

City plans hunger fight

Report shows pervasive malnutrition

By Jonathan Bor, Sun Reporter
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Nearly one in eight families taking children to the University of Maryland Medical Center's emergency room and primary care clinic lack enough food to ensure good nutrition - putting the youngsters at risk for growth and learning problems, a study has found.

Acting on the finding, the city health department yesterday announced a plan to screen children for signs of hunger and to link families to food pantries and federal nutrition programs such as food stamps and Women Infants and Children.

"The underlying cause of hunger in Baltimore is poverty, so I don't think better coordination will make the whole problem go away, but it's going to help a lot more people,," said Baltimore Health Commissioner Dr. Joshua M. Sharfstein.

Though citywide statistics are not available, the study offers a snapshot of a problem that Sharfstein and public health experts say afflicts poor communities across Baltimore.

The pervasiveness of the problem is often disguised by the tendency of many poorly nourished people to become overweight or obese, said Maureen Black, professor of growth and nutrition at the University of Maryland School of Medicine and the study's director. With scenes of emaciated children of Darfur ingrained in the U.S. consciousness, it's often hard to conceive of local children as nutritionally deprived.

In Baltimore and other U.S. cities, she said, poverty and food scarcities are less extreme. Yet many families buy food that is inexpensive and fattening, and skimp on food purchases during heating seasons and other times when bills pile up.

"The people hear 'malnourished,' they think 'skinny,'" Black said. "But if you're eating those noodles all the time that fill you up and have no nutritional value, you can turn fat."

Over the past four years, researchers at the downtown hospital asked a series of food-related questions to families seeking care for their children. They found that 13.5 percent of the families were "food insecure" - a federal designation that means they don't have a regular or steady supply of nutrition.

"In the United States, we should be up in arms about any food insecurity," said Black. "We are

the richest country in the world, and we shouldn't have families anxious about getting their next meal."

Among families struggling with putting food on the table, 11 percent were not receiving food stamps or enrolled in WIC, the study found. More than 40 percent were receiving just one of the services, despite the fact that virtually all were eligible for both.

The study was funded by a \$50,000 grant from the Baltimore-based Annie E. Casey Foundation, which supports programs for children's health and welfare. The findings are contained in a report, "Food Security: Ensuring the Health of Baltimore's Babies," written by Black and colleagues.

Sharfstein announced a few simple steps aimed at identifying children in need while linking them to services.

For instance, the city health department is urging pediatricians to ask two related questions to parents of young patients: Over the past year, did they worry that food would run out before they got money to buy more? And did they find that, indeed, the food they bought didn't last before they could afford another purchase?

Doctors and social workers should refer parents who answer "yes" to either question to pantries and offices where they can apply for nutritional services, according to a city advisory.

The health department has also established a Web site - www.hungryinbaltimore.org - that has a list of food assistance programs and a map of pantries supplied by the Maryland Food Bank.

"The research compels an immediate response," Sharfstein said. "Everyone caring for families in Baltimore should be asking questions about food security and connecting families to resources."

Dr. David Paige, a pediatrician and professor at the Johns Hopkins University's Bloomberg School of Public Health, said children spanning the social spectrum can look the same because of their "T-shirt and dungarees" attire. It belies the fact that many are lacking in essential nutrients such as iron and zinc.

In the first few years of life, he said, children are particularly vulnerable because the brain is growing and establishing important connections.

Researchers in three other cities have conducted similar studies in hospitals serving poor areas. Baltimore had the lowest percentage of children from "food insecure families." In Little Rock, Ark., 14.6 percent met the definition; Philadelphia, 16.4 percent; Boston, 20.8 percent, and Minneapolis, 40.5 percent.

But Black said comparisons can be deceiving. In Boston and Minneapolis, with healthier economies than Baltimore's, the hospitals were in neighborhoods with heavy immigrant populations.

Newly arrived immigrants, particularly those who are undocumented, often have trouble finding services or fear reprisals if they do, she said. Despite this, WIC serves immigrants meeting

income-eligibility requirements whether or not they have proper documentation.

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