

June 11, 2014

As pediatricians we often say one of the best prescriptions we can write is for food. We know food is medicine. Ensuring that children of all ages have enough healthy food to eat every day is essential for them to have the best opportunity for a healthy, productive future.

We know Community eligibility fills that prescription for food every day by ensuring communities serving low income children have the opportunity to offer free breakfast and lunch to all students while also eliminating the administrative burden of screening and verifying large numbers of individual applications.ⁱ Therefore Children's HealthWatch, a network of pediatricians and public health researchers, supports Community Eligibility, a key provision in the Healthy, Hunger-Free Kids Act of 2010. Community eligibility is already in place in several major cities, including Boston.ⁱⁱ We urge school districts to notify their state agencies **before August 31, 2014** if they wish to opt in for the 2014-15 school year.^{iii, iv}

An extensive body of scientific evidence, including research from Children's HealthWatch, shows that chronic undernutrition among children ages 0-4 years harms their cognitive and physical development during this critical period of rapid brain and body growth, actually changing the fundamental neurological architecture of the brain and central nervous system.^v In fact, brain structure is most vulnerable to nutritional harm early in development, but brain function is sensitive to the quality and quantity of foods consumed throughout one's lifespan, including the school years of childhood. The brain requires high energy consumption and cannot store energy.^{vi} As anyone knows from their own experience, even well-nourished adults, missing a meal can make one sluggish, irritable, and struggle to 'think straight.' Imagine this as your daily reality.

Though we are focused on the first four years of life, we know that children live within the context of their families and when families struggle to provide enough food, everyone in the family is affected. Undernourished or hungry children are not well prepared for school, find it difficult to concentrate, and are more likely to behave in ways that disrupt the learning environment and make learning more difficult for others as well.^{vii viii} In fact, school-age children who experience undernutrition cannot learn as much, as fast, or as well, and consequently do more poorly in school and have lower academic achievement. Research has shown that participation in the School Breakfast Program improved elementary school children's test scores as well as their tardiness and absence rates.^{ix} Learning is a cumulative activity; if a child misses school frequently, s/he could miss a fundamental building block concept that will make further learning in that subject very challenging. So school meals provide both the nutrition for optimizing brain function as well as a way to bring children into the school regularly and on-time.

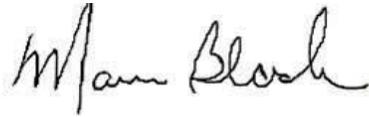
Leveraging the perspective of pediatricians and health scientists, our research is designed to improve children's opportunities for healthy, successful lives by informing public policy and practice. Community Eligibility fits this description, providing students with seamless access to

healthy meals, reduces schools' administrative burdens, and eliminates stigma often associated with verifying eligibility for free/reduced price school meals. We urge school districts to fill the food as medicine prescriptions for ALL their students to ensure they have a healthy diet and are ready to learn.

Sincerely,



Deborah A. Frank, MD
Principal Investigator and Founder
Children's HealthWatch
Boston, MA



Maureen Black, PhD
Principal Investigator
Baltimore, MD



Patrick H. Casey, MD
Principal Investigator
Little Rock, AR



Eduardo Ochoa Jr., MD
Principal Investigator
Little Rock, AR



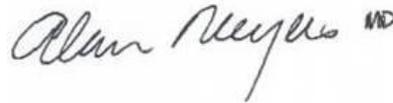
Mariana Chilton, PhD, MPH
Principal Investigator
Philadelphia, PA



John Cook, PhD, MAEd
Research Scientist and Principal Investigator
Boston, MA



Megan Sandel MD, MPH
Principal Investigator
Boston, MA



Alan F. Meyers, MD, MPH
Principal Investigator
Boston, MA



Diana Becker Cutts, MD
Principal Investigator
Minneapolis, MN



Ruth Rose-Jacobs, ScD
Principal Investigator
Boston, MA

[Children's HealthWatch](#) is a nonpartisan network of pediatricians, public health researchers, and policy and child health experts committed to improving children's health in America. Every day, in urban hospitals across the country, we collect data on children ages zero to four who are from families experiencing economic hardship. We analyze and release our findings to academics, legislators, and the public to inform public policies and practices that can give all children equal opportunities for healthy, successful lives.

For questions or further information, please contact Stephanie Ettinger de Cuba, Children's HealthWatch Research and Policy Director, at sedc@bu.edu or 617-638-5850.

ⁱ <http://www.cbpp.org/cms/?fa=view&id=4144>

ⁱⁱ <http://www.bostonglobe.com/metro/2013/09/02/boston-public-schools-will-offer-free-lunches-all-students/2aaUy5sxJjIak9ndGDHxkJ/story.html>

ⁱⁱⁱ <http://www.cbpp.org/cms/?fa=view&id=4134>

^{iv} <http://www.cbpp.org/cms/?fa=view&id=4152>

^v http://www.childrenshealthwatch.org/wp-content/uploads/FA_Report_july2009_full.pdf

^{vi} Lyle et al, 1984 [Need to find actual citation]

^{vii} <http://www.takepart.com/article/2013/09/11/going-back-school-hungry>

^{viii} Murphy JM, Pagano ME, Nachmani J, Sperling P, Kane S, and Kleinman RE. The Relationship of School Breakfast to Psychosocial and Academic Functioning Cross-sectional and Longitudinal Observations in an Inner-city School Sample. *Arch Pediatr Adolesc Med.* 1998;152(9):899-907.

^{ix} Meyers AF, Sampson AE, Weitzman M Rogers BL, and Kayne H. School Breakfast Program and School Performance. *Am J Dis Child.* 1989;143(10):1234-1239.