

## FACT SHEET: CHILDHOOD HUNGER IN MONTANA

November 2012

**2011 Census Data for Poverty in Montana**

- 19.7% of children are at 100% of poverty level
- 41.1% of children are at 185% of poverty level
- 8.5% of children are at 50% of poverty level (DEEP POVERTY)

**2011 Food Security Measures**

- 14.5% of all people live with Low Food Security (not enough food for adults)
- 5.4% of all people live with Very Low Food Security (not enough food for adults and children)

**2010 Child Food Security**

- 20.9% all children live with Low or Very Low Food Security

\*USDA studies show that unless a family income is above 185% poverty, the family is at risk of hunger. Based on this – **89,958** children are at risk of hunger in Montana.

**SNAP (food stamp) participation in Montana**

- 125,226 recipients as of August 2012
- Approximately 42% of all SNAP recipients are children under 19 (as of Oct 2011)
- Approximately 38% of SNAP households have at least one worker (as of Oct 2011)
- Working families receiving SNAP have increased in Montana from 11,192 families in FY 2009 to 18,770 families in FY2010

**Demand for Emergency Food at Montana Food Banks**

- 50% increase in child visits from 218,359 total child visits in 2009 to **326,761** total child visits in 2011.
- A total of 153,193 Montanans (more than 1 in 7 individuals) received food through an agency of the Montana Food Bank Network in 2011.

**Implications of Food Insecurity and Hunger in Children**Physical Health

- Impact on physical growth, mental development, overall health status.
- Poor and inconsistent nutrition leads to inadequacy of vital nutrients, reduced immunity, increased risk of infections, morbidity, incidence of chronic diseases, and poor eating behaviors.
- Chronic nutrient deficiencies lead to heart disease, hypertension and diabetes in children.

Link to Childhood Obesity

- Hunger and lack of food security increases risk of overweight and obesity
- Overweight increases risk of other chronic diseases including diabetes
- In Montana, approximately 25% of children ages 10-17 are overweight or obese.
- 2011 YRBS data based on CDC measures shows that 8.5% of children in MT were obese.

Reduced potential for learning and Academic Achievement

- Lower math and reading scores.
- Reduced cognitive development, reduced ability for memory, language, motor skills and social interaction.
- Increased absenteeism due to increased illness, infections.
- Increased grade repetition, tardiness, anxiety, aggression, behavior problems in class.

Economic Impact on Schools, Families, Public Health and the future Workforce in the State.

- Higher health care costs, lost work time for parents, risk of job loss
- Poor academic outcomes lead to high school dropout, lack of higher education, lack of skills to seek better employment opportunities and gain economic self-sufficiency in adulthood.
- A poorly educated workforce creates greater demand on employers and business community.

Contact: Food Security Council, Montana Food Bank Network. <http://www.mfbn.org>

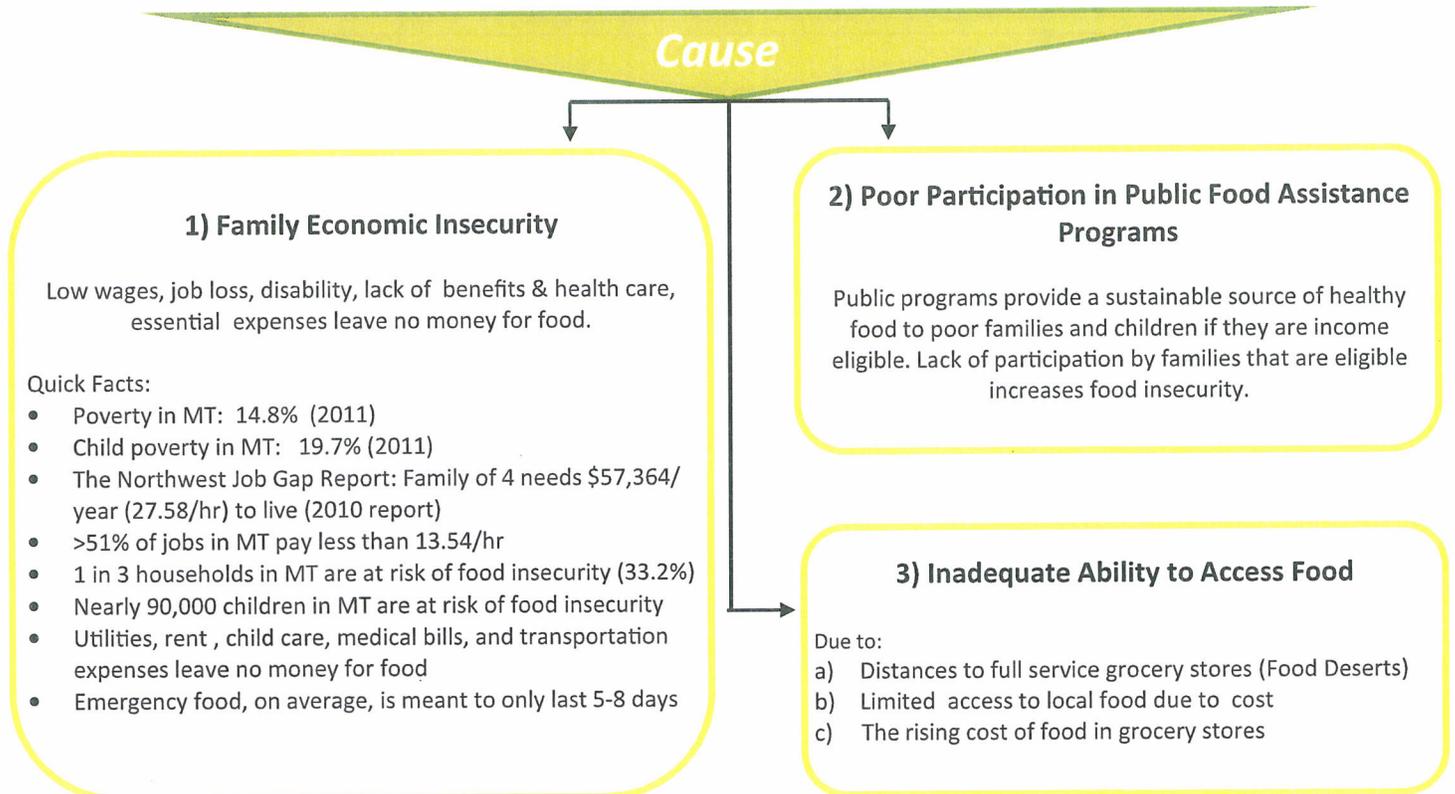
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# Childhood Hunger : Cause and Effect

*Child hunger and food insecurity is due to family food insecurity.*

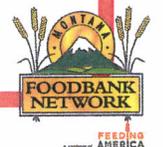
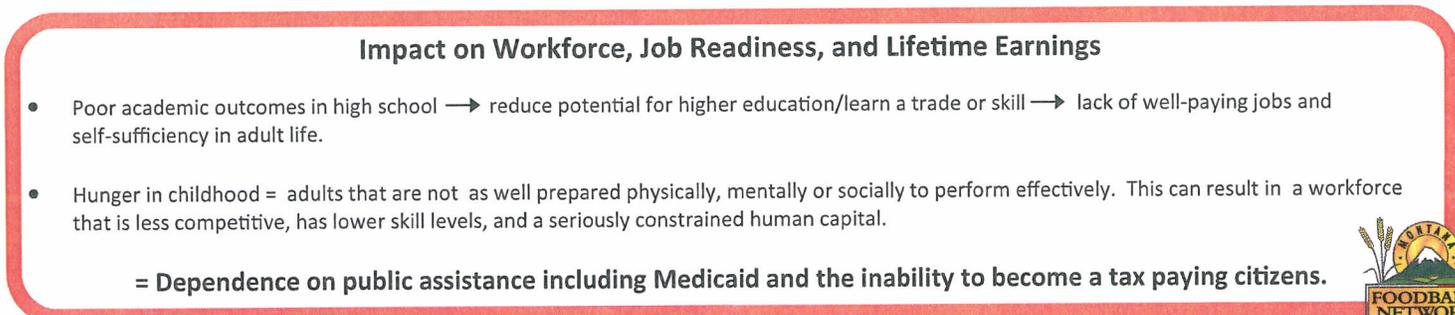
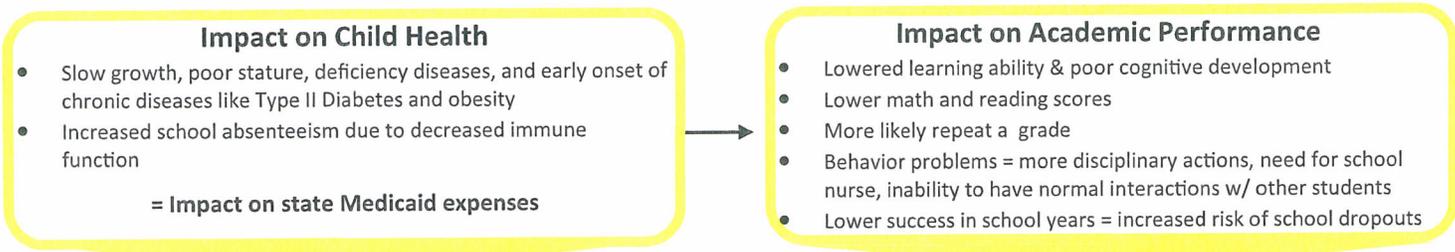
**Food Insecurity:** *Not having a consistent, sustainable source of food that meets nutritional needs.*

**Hunger:** *Inability to access food consistently and need to reduce food intake, eat poor diets and often go without any food. Research shows that parents skip meals in order to have enough food to feed their children.*



**Effect**

*Normal growth and development should be a seamless process without frequent interruptions in vital needs like nutrition. Hungry children incur developmental impairments that limit their physical, intellectual and emotional development.*



**IMPACT OF HB 98**  
**Montana 63<sup>rd</sup> Legislative Session - 2013**

**Creating new School Breakfast Programs (SBP),  
Closing the gap between cost of Free and Reduced Price SBP.  
Based on SY 2012 data**

A. Start-up funds:

- **120 schools** public and private schools do not have a SBP in the state.
- This represents **18,506 children** that do not have access to Breakfast.
- Up to **74% of children in many schools are low income** and eligible for the Free (F) and Reduced Price (RP) meals.
- The start up funds of \$20,000 for new SBP in HB 98 would be administered by the School Nutrition Program, Office of Public Instruction to schools of various sizes throughout the state and **impact thousands of children.**

B. Closing the 30 cent gap between the cost of Reduced Price SBP and Free SBP

- Total of **142,262 children** in the public schools.
- Total of **1,148 children** in private schools.
- **64,112 children** eligible for Free & Reduced Price meals in public schools
- **501 children** eligible for Free & Reduced Price meals in the private schools.
- Over **13,600 children** eligible for the Reduced price meals in public and private schools.

It is this group of over 13,600 children that this part of the bill would address.

What is the Current Problem?

The changing up and down status of family income causes children to lose eligibility for the Free meals frequently through the school year. Once that happens, parents are not able to pay the 30 cent difference so children go without Breakfast. Parents are afraid to sign up their children into the Free meals when the income drops, for fear that if the income changes again, it would be disruptive to the child and the school. The eligibility changes create a lot of extra work for school administration also.

- The \$300,000 in HB 98 would cover the cost of Reduced Price breakfasts in public and private schools for 2 years, so that children who are low-income could be assured of having breakfast and not miss out because parent's incomes keep fluctuating in these uncertain economic times.

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