**APPENDIX 1:** Pre/Post Test

Q1: The American Academy of Pediatrics recommends using the validated Hunger Vital1 sign 2-question survey for food insecurity screening. Which two of the following comprise the survey for patients?

Within the past 12 months .... Select two

1. We were worried whether our food would run out before we got money to buy more.
2. We cut the size of our meals because there wasn’t enough money to buy food.
3. We were hungry but didn’t eat because there wasn’t enough money for food
4. The food we bought just didn’t last and we didn’t have enough money for food
5. We did not eat balanced meals because we didn’t have enough money for food

Q2: What would be the best next step if a patient screened positive for emergent food insecurity?

1. Educate patients/families on how to buy healthy foods on a budget
2. Connect patients/families to food resources while in the office
3. Give patients/families a handout on federal nutrition programs
4. Provide resources for community nutrition education classes

Q3: What is the purpose of the federal program Supplemental Nutrition Assistance Program (SNAP)?

1. To provide low-income children under five years of age with free healthy meals
2. To provide monthly benefits to eligible low-income households to purchase food items
3. To provide weekly stipends to homeless individuals to purchase food items
4. To provide school-aged children with healthy meals while in school

Q4: All of the following are eligible to receive benefits from the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) EXCEPT?

1. Pregnant women
2. Breastfeeding postpartum women up to 1 year after the birth of an infant
3. Non-breastfeeding postpartum women up to 6 months after the birth of an infant
4. Infants up to age 1
5. Children up to age 8

Q5. Low-income immigrant (non-U.S. citizen) households may access federal WIC, School Meal Programs, and Summer Meal Programs

1. True
2. False

Answer Key: 1. A, D 2. B 3. B 4. E 5. True

1Gundersen C, Ziliak JP. Food Insecurity And Health Outcomes. *Health Aff (Millwood)*. 2015;34(11):1830-1839. doi:10.1377/hlthaff.2015.0645

Q6: How comfortable are you at discussing food insecurity with patients/families?

1. Not all comfortable
2. Slightly comfortable
3. Moderately
4. Quite comfortable
5. Extremely comfortable

Q7: How confident are you that you can refer to community resources for nutrition assistance?

1. Not all confident
2. Slightly confident
3. Moderately confident
4. Quite confident
5. Extremely confident

Q8: I believe it is my job as a future doctor to screen for food insecurity.

1. Strongly disagree
2. Disagree
3. Neutral
4. Agree
5. Strongly agree

Q9: Patients may be harmed by screening for food insecurity due to embarrassment.

1. Strongly disagree
2. Disagree
3. Neutral
4. Agree
5. Strongly agree

Q10: Screening for food insecurity will divert visit time from more important medical issues.

1. Strongly disagree
2. Disagree
3. Neutral
4. Agree
5. Strongly agree