
FOOD INSECURITY AND CHILDREN'S SYMPTOMS OF HYPERACTIVITY AND INATTENTION

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Food insecurity (that is inadequate access to sufficient, safe, and nutritious food that meets individuals' dietary needs) is concurrently associated with children's psychological difficulties. However, the predictive role of food insecurity with regard to specific types of children's mental health symptoms has not previously been studied. We used data from the Longitudinal Study of Child Development in Québec, LSCDQ, a representative birth cohort study of children born in the Québec region in Canada in 1997-1998 (n=2120). Family food insecurity was ascertained when children were 1½ and 4½ years old. Children's mental health symptoms were assessed longitudinally using validated measures of behaviour at ages 4½, 5, 6 and 8 years. Symptom trajectory groups were estimated to identify children with persistently high levels of depression/anxiety (21.0%), aggression (26.2%), and hyperactivity/inattention (6.0%). The prevalence of food insecurity in the study was 5.9%. In sex-adjusted analyses, children from food-insecure families were disproportionately likely to experience persistent symptoms of depression/anxiety (OR: 1.79, 95% CI 1.15-2.79) and hyperactivity/inattention (OR: 3.06, 95% CI 1.68-5.55). After controlling for immigrant status, family structure, maternal age at child's birth, family income, maternal and paternal education, prenatal tobacco exposure, maternal and paternal depression and negative parenting, only persistent hyperactivity/inattention remained associated with food insecurity (fully adjusted OR: 2.65, 95% CI 1.16-6.06). Family food insecurity predicts high levels of children's mental health symptoms, particularly hyperactivity/inattention. Addressing food insecurity and associated problems in families could help reduce the burden of mental health problems in children and reduce social inequalities in development.