



ASHA Supports Comprehensive Food Allergy and Anaphylaxis Management Plans for Schools

WHEREAS, Food allergy is an emerging food safety and public health issue in the United States, affecting more than 11 million Americans;¹

WHEREAS, Food allergy afflicts 4% to 8%, or approximately 2.2 million school-aged children nationwide;²

WHEREAS, Outside the hospital setting, food allergy is believed to be a leading cause of anaphylaxis,³ a severe, life-threatening condition;⁴

WHEREAS, In the United States, cases of anaphylactic shock caused by a food allergy account for nearly 200 deaths and 30,000 hospital visits annually;⁵

WHEREAS, 54% of food-induced anaphylaxis deaths occurred in children 10 to 19 years of age;⁶

WHEREAS, 16% of children with peanut allergies report having an allergic reaction at school;⁷

WHEREAS, Foods containing the most common food allergens are often found in schools;⁸

THEREFORE BE IT RESOLVED: The American School Health Association supports the adoption of state and national guidelines for managing food allergy and anaphylaxis in schools.

BE IT FURTHER RESOLVED: The American School Health Association encourages all schools and school districts to:

- Adopt, implement, and evaluate food allergy and anaphylaxis management policies consistent with recommendations of the [Food Allergy and Anaphylaxis Network \(FANN\)](#).⁹
- Ensure that any time someone with a known severe allergy is at a school, child care setting or a sponsored event, an EpiPen and a person trained to use it are available.
- Utilize a School Health Advisory Council to coordinate the responses to and evaluate food allergy reactions that occur at school and child care settings.
- Within the confines of a comprehensive health education curriculum, provide instruction to students; and when practical, family and community members, about common food allergens, symptoms of allergic reactions, and appropriate responses to food allergy reactions.
- Provide appropriate training for staff on how to reduce the risk of exposure and intervene appropriately to food allergy reactions at school and child care settings.

References

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