Key Points on 2018 Rollback on Healthy School Foods

Summary

Thanks to the 2012 updated school nutrition standards, schools are providing children with healthier school meals, snacks, and beverages. These improvements are an amazing success story and one of the most important public health achievements in a generation. With such tremendous progress, it makes no sense for the Trump Administration to force schools and companies to reverse course and jeopardize kids’ health.

Specifically, USDA’s final rule:

- Delayed the next levels of sodium reduction (Target 2) by seven years (from School Year 2017-2018 to School Year 2024-2025 – going further than the interim final rule’s proposed delay to School Year 2020-2021), and eliminated Target 3 (which was not proposed in the interim final rule);
- Weakened the whole grain-rich standard from 100 percent to 50 percent (the interim final rule proposed continuing the whole-grains waiver); and
- Allowed flavored 1 percent milk to be sold without a calorie (and/or sugar) limit, which could exceed calorie ranges for meals. A number of groups asked USDA to include a calorie cap of 130 calories per 8 ounces if 1 percent flavored milk were allowed. This request was consistent with the Robert Wood Johnson Foundation’s Healthier Beverage Guidelines. This change was not asked by SNA or schools, it was purely a handout to the dairy industry.

What Can Be Done

Congress must restore the school nutrition standards and reverse the Trump Administration’s damaging final rule that violates the law. Congress should also provide additional money for robust and more targeted technical assistance.

States and localities can preserve the progress and codify or require the 2012 standards through legislation, executive order, or guidance. Additional funding could be provided to help schools. State agencies and allied organizations can continue to deliver robust technical assistance to help schools meet the sodium reduction targets and procure 100 percent whole grain-rich products.

Negative Effects of Weakening the Standards

The school nutrition standards rollback, Child Nutrition Programs: Flexibilities for Milk, Whole Grains, and Sodium Requirements, 83 Fed. Reg. 63,775 final rule (December 12, 2018), goes further than the interim final rule and would weaken school nutrition by locking in dangerously high levels of salt in school meals; allowing schools to provide fewer whole grains; and increasing calories, saturated fat, and added sugar by allowing flavored 1 percent milk without a calorie or sugar limit.

- Weakening these standards is in violation of federal statute that requires school food nutrition standards to be aligned with the Dietary Guidelines for Americans. The
standards are based on the 2010-2015 Dietary Guidelines for Americans and the National Academies of Science, Engineering, and Medicine (formerly, Institute of Medicine) 2009 report: School Meals: Building Blocks for Healthy Children. The 2015-2020 Dietary Guidelines reinforced the same recommendations. See legislative history.¹

- **Weakening the standards is not aligned with the science.** These new rollbacks are counter to sound public health policy, evidence, and experts, and endangers child health.

- **Weakening the standards will make it more difficult for schools that want to do what is right for their students.** For instance, requiring sodium reduction across the board incentivizes companies to reformulate and make products with appropriate levels of sodium, which helps make these products more competitively priced, widely available, and better able to compete with taste preferences. A school that wants to meet Target 3 would have to procure products that meet Target 3 (which will become less available and therefore pricier without the economies of scale) and compete with student taste preferences for meals currently at Target 1.

- **Weakening the standards will create winners and losers for children’s access to healthier foods.** Low-income students who attend schools that strive to continue to meet sodium reduction and more whole-grain foods will have better access to healthier foods than schools that choose to stop the progress under the final rule. The Healthy, Hunger-Free Kids Act helped level the playing field for kids; prior to the updated school nutrition standards, students in more affluent and larger schools were more likely to have access to healthier foods than those in lower-income and smaller schools. This progress could now be reversed.

- **By CSPI’s estimates, USDA received 100,000 comments in opposition. According to USDA’s final rule, 99 percent of comments were in opposition to these changes.** The final rule did not substantively respond to concerns about endangering children’s health and did not estimate the effect weakening the standards would have on their health. The final rule virtually ignored the opposition. According to CSPI’s docket analysis:
  - Non-profit and association groups generally opposed the interim final rule.
  - Industry (SNA, some food companies) and school superintendents (AASA) supported.
  - However, some food companies opposed, including Mars, Nestle, and Unilever.
  - There were mixed views among health departments: New York City, Seattle, King County, and Santa Clara County were very much opposed; California, Colorado, Washington, DC, and Wisconsin were supportive.

**Schools Were Successfully Meeting the 2012 Standards**

Virtually all schools (more than 99 percent) participating in the National School Lunch and Breakfast Programs are making great progress toward serving healthier meals with less sodium; more whole grains, fruits, and vegetables; no trans fat; and fewer sugary drinks and unhealthy snack food.²
• The Harvard University T.H. Chan School of Public Health concluded that the updated school nutrition standards are “one of the most important national obesity prevention policy achievements in recent decades.”\(^3\)
• Researchers estimate that these improvements prevent more than two million cases of childhood obesity and will save up to $792 million in health-care related costs over ten years.
• Improved school nutrition is critical: one out of three children and adolescents aged 2 to 19 years is overweight or obese.\(^4,5\) Children consume one-third to one-half of their daily calories during the school day.\(^6\)

The Negative Effects of Keeping Sodium Too High

The seven-year delay in the second sodium reduction levels and elimination of the third sodium reduction levels would harm children’s health, locking in unsafe levels of sodium for children.

• Delaying the second phase from School Year 2017-2018 to School Year 2024-2025 and eliminating the third phase of sodium reduction would result in children consuming, on average, an extra six cups of salt over the course of the seven-year delay.
• Unfortunately, nine out of ten children consume too much sodium,\(^7\) increasing their risk of elevated blood pressure, heart disease, and stroke.\(^8\)

Sodium and Children’s Health

• Sodium is an essential nutrient, but the average amounts children consume far exceed biologic needs and maximum recommended levels.\(^9,10\) Schools have been encouraged (but not required) to lower sodium since 1995. In 2010, the Healthy, Hunger-Free Kids Act made the first major changes to school nutrition in 15 years. The updated standards released in 2012 by USDA align school meals with the latest nutrition science. As part of that alignment, the USDA set sodium limits for school meals. These sodium reduction levels are based on recommendations from the National Academy of Medicine’s 2009 report, *School Meals: Building Blocks for Healthy Children*\(^11\) and aligned with the 2010 and 2015 *Dietary Guidelines for Americans*\(^12\) and other expert recommendations.
• The 2015 DGAs recommend that children consume no more than 1,900 to 2,300 mg of sodium per day.\(^13\) Unfortunately, on average children consume considerably more than that, consuming between 2,500 to 4,200 mg of sodium per day, well over the recommended levels.\(^14\)
• Along with the DGAs, the Centers for Disease Control and Prevention, the World Health Organization, the American Heart Association, and other experts recommend limiting sodium intake to less than 2,300 mg.\(^15\)
• At the current levels (Target 1), an elementary school lunch has on average 1,230 mg, or about two-thirds a day’s worth of sodium for a child in one meal. A high school lunch has on average 1,420 mg, or about half a day’s worth. The Target 2 sodium levels align with the DGA by lowering high levels of sodium in school meals to support a healthy diet and do not constitute a low-sodium diet. In fact, reaching Target 3 would put sodium levels at the ceiling of what is appropriate and recommended.
• Excess sodium consumption is strongly associated with the development and worsening of high blood pressure and an increased risk of coronary heart disease, stroke, heart
failure, kidney failure, gastric cancer, and osteoporosis. A substantial number of studies show that as dietary sodium intake rises, so does blood pressure. Studies have shown a link between high blood pressure in childhood and high blood pressure in adulthood, and high blood pressure in childhood is linked to early development of heart disease and risk for premature death later in life.

- Opponents cite research that is contrary to the preponderance of evidence on sodium. The American Heart Association reviewed these studies that reported inconsistent findings regarding sodium and cardiovascular disease and found an average of three to four methodological issues per study. Those flaws limit the usefulness of those studies in setting, much less reversing, sodium intake recommendations. On balance, a vast body of diverse research indicates that lowering sodium intake lowers blood pressure, a major risk factor for heart disease, in adults and children.

- The prevalence of high blood pressure is increasing in American children. Approximately one in six children aged 8-17 have elevated blood pressure. Children who eat high-sodium diets are about 40 percent more likely to have elevated blood pressure than children who eat lower-sodium diets.

- Lowering sodium consumption can have a tremendous impact on public health. Studies have shown that reduced sodium intake can lower blood pressure, control hypertension, and prevent cardiovascular disease. In addition, lowering sodium consumption, and thereby lowering blood pressure, can reduce medical costs. From 2012 to 2013, high blood pressure cost the United States an estimated $51.2 billion in direct and indirect costs. The U.S. is lagging behind other countries to bring sodium down to safe levels; more than 50 countries have adopted reductions in the sodium content of certain foods.

- Taste preferences for salty foods may be established early in life, so children’s liking for salt may remain lower if they are exposed to less sodium in their diets at a young age. Repeated exposure to lower-sodium foods can lead to decreased preference for salty taste over time, consistent with the gradual, phased-in approach to reduce sodium in school meals.

- Sodium does occur naturally in some foods, but about 71 percent of the sodium in Americans’ diets is added to food during processing before they can make the choice. Luckily a variety of methods and technologies are available to help reduce this amount in many food categories.

- The totality of the existing body of high-quality scientific research supports reducing sodium intake to moderate levels for better health.

Many schools, food service companies, and others in industry are working toward or already providing healthy and appealing meals and products with less sodium. USDA should address remaining challenges through robust training and individualized technical assistance.

- Appealing products with safe levels of sodium are now more readily available and consumer demand for these products has grown. For example, food companies such as Revolution Foods provide school meals that already meet the Target 3 sodium levels.

- Schwan’s Company—the largest producer of school pizza—produces the pizza for Revolution Foods and has already invested in the technology and resources to make appealing school pizzas that meet Targets 2 and 3.
In addition, many companies—including Aramark, ConAgra Foods, Domino’s Pizza (Smart Slice), General Mills, Kellogg’s, Kraft Foods, Mars, Nestlé, PepsiCo, and Unilever—are engaged in voluntary sodium reduction across their full lines of consumer products, which should aid school sodium reduction efforts.

These efforts to decrease sodium also complements state and local efforts such as New York City’s National Salt Reduction Initiative. A variety of methods and technologies are available to help reduce levels of sodium in many food categories.

We know that many schools have been working hard and are at or very close to meeting Target 2 levels.

For example, the school meals program in Elbert County Schools, Georgia has done tremendous work to get their menus down to safe levels of sodium. They have employed tactics such as training staff to analyze sodium content in their menus; educating students on nutrition and menu changes; working with local and regional companies to find alternative products that met their sodium needs; and re-working their recipes to keep their foods with less sodium appealing to students.

Other schools have also lowered sodium by using spice bars and salad bars that gives students more options to provide flavor with less salt.

Schools all around the country—from Virginia to California, Indiana to Kansas, Oklahoma to New York, and Georgia to North Dakota—have successfully used these best practices to meet the Target 1 and Target 2 sodium levels.

USDA should put greater effort into elevating and sharing these methods and encouraging their adoption by other schools around the country.

USDA programs like “Team Up for School Nutrition Success” and the “What's Shaking?” initiative have been beneficial and should not be left behind. However, USDA needs to focus on targeted technical assistance that delivers more intensive and personalized training for those programs that may still have difficulties lowering sodium.

Whole grain-rich products are widely prevalent in the marketplace, and the variety of products available continues to grow. Schools, food service companies, and others in industry have provided innovated new products to meet the whole grain standards. As of December 2017, the Alliance for a Healthier Generation’s Smart Food Planner, an online database that features food and beverage products that align with the school nutrition standards, shows that approximately 874 whole grain-rich products are currently available.
available for purchase by schools. Further, USDA Foods provides more whole-grain products and has developed a number of resources that list whole grain-rich options.

- Eating more whole grains is associated with reduced risk of heart disease, stroke, and diabetes, provides more nutrients, and are a healthful source of fiber.
- Children, on average, consume too few whole grains and too many refined grains.

Other Concerns

There is overwhelming bipartisan support for healthy school meals.

- The public overwhelmingly opposed the proposals to weaken school nutrition, according to a 2018 January poll released by the Center for Science in the Public Interest.
- Nine out of ten Americans support the school nutrition standards. From this same poll, nearly 70 percent believe school meals are excellent or good, compared to just 26 percent in 2010, before schools implemented the updated school nutrition standards. Students also like the taste of the healthier school meals.
- A September 2014 poll released by The Pew Charitable Trusts, the Robert Wood Johnson Foundation, and the American Heart Association shows that 72 percent of parents favor strong nutrition standards for school meals and 91 percent support serving fruits or vegetables with every meal.
- According to an August 2014 survey by the Robert Wood Johnson Foundation, the majority of school leaders nationwide reported that students liked the new lunches.
- Many statewide polls have demonstrated overwhelming support for the updated school nutrition standards. For instance, in Alabama, Kentucky, Louisiana, and North Carolina, more than 70 percent of parents support the standards. In addition, support for healthier school meals is bipartisan: the majority of registered voters with children in public schools are supportive of healthier school meals.

Counter to claims, consumption of healthy school foods has increased; plate waste has remained the same or decreased.

In the final rule, the administration cites concerns over students not eating the food and throwing it away as justification for making meals less healthy. These claims are contrary to the evidence.

- Students are eating more healthy food and studies show that food waste has either remained the same or decreased since the updated school nutrition standards.
  - A May 2014 Harvard School of Public Health study shows that children are now eating 16 percent more vegetables and 23 percent more fruit at lunch.
  - A study released in March 2015 by the University of Connecticut's Rudd Center for Food Policy & Obesity found that students are eating more nutritious foods and discarding less of their lunches under the healthier standards. Children ate 13 percent more of their entrees, nearly 20 percent more vegetables, and chose 12 percent more fruit in 2014 compared to 2012, which means that students threw away less food than in the past.
- Food waste is not an issue unique to schools.
  - USDA estimates 31 percent of the overall food supply was wasted in 2010. While food waste in schools is a real concern, the problem existed long before the updated nutrition standards.
Food waste can be a problem in schools; however, this problem existed long before the updated nutrition standards were put into place.

Further, there are a number of strategies to reduce food waste in schools, such as giving students more time to eat; putting recess before lunch; time of day of the lunch period; marketing; and involving students in meal planning.

Participation in the school lunch program is increasing.
Contrary to claims made by USDA in the final rule, changes in participation are not the result of changes to the nutrition standards. According to USDA’s own data, participation is increasing.

- Participation among students receiving free meals has dramatically increased (from 15.4 million children in 2008 to 20 million children in 2017) and remains the largest category (about two-thirds of participating students in 2017). Participation was increasing well before the 2008 recession, when 13 million participated in 2000.
- Overall participation remains high with more than 30 million students benefiting in 2017. The Community Eligibility Program (CEP) has also helped increase the number of students participating.
- Many other factors impact participation, such as sales of competitive foods, increased charges for paid meals, time to eat, long lunch lines, and school closures and consolidations.

Healthy school foods can reduce health disparities and stigma.
Improvements in school foods have been critical to reducing health disparities and stigma for low-income children.

- According to research by Bridging the Gap, prior to the updated school nutrition standards, students in more affluent and larger schools were more likely to have access to healthier foods than those in lower-income and smaller schools.
- Another study found that improved school nutrition standards are associated with a decrease in obesity among low-income students.
- The CEP helps decrease stigma by providing a free meal to the entire eligible school, negating low-income kids being singled out. CEP also helps relieve some of the bureaucracy that might have been cumbersome for parents.

School lunch revenue can increase following implementation of nutrition standards.
School lunch revenue can also increase with healthier school food.

- A study by the Robert Wood Johnson Foundation found that schools that implemented healthier nutrition standards for meals and snacks reported revenues rebounding to original profits two years after the updated standards went into effect (in 2014) and participation in the school meals program rose significantly among students from low-income families during the same period.
- School food service directors have anecdotally indicated that marketing matters: those who promote their programs and speak positively about better nutrition tend to have higher participation rates than those who deride the updated nutrition standards or do not put an effort into reaching out to children and parents.

References


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