**Texas School Health Advisory Committee**

**Texas CVD and Stroke Partnership**

**Recommendations for Reducing Sodium Intake in the School Setting (2012)**

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| Background |

## Texas Cardiovascular Disease and Stroke Partnership

The Texas Cardiovascular Disease and Stroke Partnership is a group of stakeholders from across Texas working to implement the four goals of the Texas Plan to Reduce Cardiovascular Disease and Stroke.1 The Partnership Goal II Workgroup implements strategies to Detect and Treat Risk Factors, such as high blood pressure.

During 2011 and 2012, the Partnership Goal II Workgroup included a focus on reducing the intake of sodium as a means to reduce and control high blood pressure. The Workgroup supported the implementation of the following key recommendations as stated in the United States Department of Agriculture (USDA) 2010 Dietary Guidelines for Americans (DGA):

1. Reduce daily sodium intake to less than 2300 milligrams (mg) and
2. Limit the consumption of foods that contain refined grains, especially refined grain foods that contain solid fats, added sugars, and sodium.2

The final USDA rule includes achieving significant sodium reductions no later than 10 years post implementation of the final rule through intermediate targets. The intermediate and final targets for the Breakfast and Lunch Programs reflect a reasonable approach. Meeting these national standards will significantly assist states and local communities in making major improvements to create healthier school environments leading to a reduction in heart disease, stroke and obesity.

Also, as more interest has grown in reducing the intake of sodium to recommended levels within the population, the partnership agreed to add an additional Goal V: The Texas Salt Reduction Collaborative. Organizations within the collaborative will work to increase the proportion of adults taking measures to reduce their sodium intake.

## The Texas School Health Advisory Committee

In 2005, the 79th legislature passed Senate Bill 42.  This comprehensive school health education package focused on a number of significant issues, one of which was the establishment of a state-level school health advisory committee at the Department of State Health Services (DSHS). The Texas School Health Advisory Committee (TSHAC) provides active leadership in the identification and dissemination of school health best practices and resources for school policy makers.3

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| National Review and Recommendations |

## Institute of Medicine Strategies to Reduce Sodium Intake in the United States Report

In 2010, the Institute of Medicine released a report, Strategies to Reduce Sodium Intake in the United States.4 Highlights from the report:

* Excess salt intake is a major public health problem.
* More than 40 years of voluntary initiatives have failed to reduce salt intake.
* Most salt consumed is in foods sold to consumers.
* Standards for the addition of salt to processed and restaurant/foodservice foods are the best strategy to protect the public health.

Specifically, the report recommends strategies to reduce sodium in processed foods that include reaching out to the entities that produce, buy and sell those foods. Included is the following strategy:

Strategy 3.4: Food retailers, governments, businesses, institutions, and other large-scale organizations that purchase or distribute food should establish sodium specifications for the foods they purchase and the food operations they oversee.

Groups that purchase large volumes of food products that in turn are either sold to others or served as part of a restaurant/foodservice operation can wield a powerful tool when they set the specifications for products they will purchase and foods served by operations under their authority. Specifically, the nutrition specifications for foods procured are likely to provide incentives for food manufacturers to develop or offer lower-sodium foods, especially given the high levels of procurement expenditures.

Further, specifications for the use of sodium in foods served can ensure that foodservice staff will not add excess sodium. Federal, state, and local governments all have the potential to create sodium specifications for foods purchased or served in their facilities or through their programs. Relevant programs include the federal school lunch and breakfast programs as well as the military. To some extent the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) and the Supplemental Nutrition Assistance Program (SNAP) may also be useful to drive change through the use of incentives for participants to purchase lower-sodium food products.

State and local governments are also large-scale procurers of foods and can be instrumental in this strategy. Further, food retailers can assist in lowering sodium intake through their procurement and product display practices.4

## Centers for Disease Control and Prevention “Under Pressure: Strategies for Sodium Reduction in the School Environment”

The Centers for Disease Control and Prevention (CDC) recently released a document entitled “Under Pressure: Strategies for Sodium Reduction in the School Environment” which notes that excessive sodium intake increases blood pressure.5 Data show that sodium reduction lowers blood pressure in children and, if sustained over time, translates to reduced blood pressure in adulthood.

The report notes that high blood pressure is a leading risk factor for cardiovascular diseases, including heart disease, stroke, and other vascular diseases. These are leading causes of death in the United States. Because more than 90 percent of U.S. adults who reach middle age will develop high blood pressure in their lifetime, most children, even those with blood pressure in the normal range, are still at high risk of having high blood pressure as adults. Because high blood pressure is a leading risk factor for cardiovascular disease, preventing the gradual rise in blood pressure during childhood and adolescence through dietary interventions such as sodium reduction could result in substantial health benefits as children enter adulthood.

In the document, the following strategies for sodium reduction are recommended for adoption in the school environment:

* Modify the Built Environment
* Incorporate Nutrition Education into Health Education for Students
* Implement Nutrient Standards for Competitive Foods Served at School
* Implement Nutrient Standards for School Meals
* Utilize Community Partners
* Promote Healthier Options with Marketing and Incentives
* Innovate

## United States Department of Agriculture *Team Nutrition* Program and HealthierUS School Challenge

USDA's ***Team Nutrition*** is an integrated, behavior-based, comprehensive plan for promoting the nutritional health of the Nation's children.6 This plan involves schools, parents, and the community in efforts to continuously improve school meals, and to promote the health and education of 50 million school children in more than 96,000 schools nationwide.

***Team Nutrition***'s goal is to improve children's lifelong eating and physical activity habits by using the principles of the [***Dietary Guidelines for Americans***](http://www.cnpp.usda.gov/DietaryGuidelines.htm) and [**MyPlate**](http://www.mypyramid.gov/).

Schools are the key focal point for ***Team Nutrition***. They are invited to enroll as "Team Nutrition Schools," affirming their commitment to take the lead in making nutritional changes, conducting nutrition education activities and events, and using innovative materials from the USDA Food and Nutrition Service (FNS). Emphasis is placed on working through state agencies to recruit ***Team Nutrition*** Schools as well as develop training support systems necessary for local implementation.

The HealthierUS School Challenge (HUSSC) is a voluntary initiative established in 2004 to recognize those schools participating in the National School Lunch Program that have created healthier school environments through promotion of nutrition and physical activity.

In February 2010, First Lady Michelle Obama introduced [**Let’s Move!**](http://www.letsmove.gov/), incorporating the HealthierUS School Challenge into her campaign to raise a healthier generation of kids. At that time, monetary[**incentive awards**](http://teamnutrition.usda.gov/healthierUS/hussc_incentives.pdf)became available for each HUSSC award level: Bronze, Silver, Gold, and Gold Award of Distinction.

Schools may [**submit applications**](http://healthymeals.nal.usda.gov/hsmrs/HUSSC/) for the HealthierUS School Challenge by US mail or online. A [**simplified district application process**](http://teamnutrition.usda.gov/healthierUS/SimplifiedApp.pdf)is available if there are two or more schools applying from one school district.

Since the beginning of the HealthierUS School Challenge in 2004, awards have been given to schools in 45 states. As of October 20, 2011, there are 2,161 schools certified.

## American Heart Association Statement on Sodium **Reduction**

The AHA further supports the risk of sodium to consumers.7 The AHA website states:

Cardiovascular diseases are the leading cause of death worldwide, and high blood pressure is a major risk factor. For the estimated one in three Americans who will develop high blood pressure, a high-sodium diet may be to blame. In some people, sodium increases blood pressure because it holds excess fluid in the body, creating an added burden on the heart. Too much sodium in the diet may also have other harmful health effects, including increased risk for stroke, heart failure, osteoporosis, stomach cancer and kidney disease.

The problem is starting early in America: 97 percent of children and adolescents eat too much salt, putting them at greater risk for cardiovascular diseases as they get older.

The American Heart Association wants to help all Americans lower the amount of sodium they consume.

Here’s what they are doing to help:

* encouraging manufacturers to reduce the amount of sodium in the food supply;
* advocating for more healthy foods to be available and accessible (for example, more fruits and vegetables); and
* providing consumers with education and decision-making tools to make better food choices.

It is estimated that if Americans cut their average sodium intake by more than half – to an average of 1,500 milligrams a day – there would be a nearly 26 percent decrease in high blood pressure and a savings of more than $26 billion in healthcare costs over just a year.

The American Heart Association [recommends](http://www.heart.org/HEARTORG/GettingHealthy/Diet-and-Lifestyle-Recommendations_UCM_305855_Article.jsp) foods with little or no salt to reduce the risk of cardiovascular diseases. **Aim to eat less than 1,500 mg of sodium per day.**

We know sodium is an acquired taste. As you take steps to reduce sodium, you’ll actually start to appreciate foods for their true flavor. In time, you’ll look forward to how food really tastes – not just the salty flavor.7

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| State Reviews and Policies |

## Texas Public School Nutrition Policy

In 2004, the Texas Department of Agriculture (TDoA) released rules called the Texas Public School Nutrition Policy requiring all public schools participating in the federal child nutrition programs comply with the new policies.8 It also notes that school districts may have stricter guidelines. The policy defines certain nutritional terms as Foods of Minimal Nutritional Value (FMNV) and prohibits the sale of certain foods defined as FMNV in the foodservice area during meal periods. It further outlines the sale of these products in elementary, middle/junior high school, and high schools. It also defines what a healthy nutrition environment should consist of in the school cafeteria and dining areas. However, based on the new requirements passed by USDA, TPSNP is subject to change.

## Coordinated School Health Programs

In 2001, the Texas Education Code was amended to include sections on implementation of a Coordinated School Health Program (CSHP) in all schools.9 The Texas Education Agency administers the rules requiring schools to implement the CSHP, including monitoring the adherence to the TDoA nutrition policies.

Therefore, the Partnership and TSHAC recommend that schools do the following:

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| Recommended Strategies to Reduce Sodium Intake in Texas School Districts |

* consider adopting the USDA’s sodium implementation timeline for the National School Lunch and Breakfast Program more quickly than the proposed 10 year implementation targets.
* participate in training provided through the Education Service Centers that educate on requirements administered through the Texas Department of Agriculture to stay current on evidence- based and promising best practices to support a healthier school environment.
* use the USDA Team Nutrition Program and
* seek to apply for the USDA HealthierUS School Challenge Award.

## References:

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2. “Dietary Guidelines for Americans 2010, U.S Department of Agriculture”, U.S. Department of Health and Human Services, [www.dietaryguidelines.gov](http://www.dietaryguidelines.gov).
3. Texas School Health Advisory Committee, <http://www.dshs.state.tx.us/schoolhealth/shadvise.shtm>
4. “Strategies to Reduce Sodium Intake in the United States”, Institute of Medicine of the National Academies, April 20, 2010. <http://www.cdc.gov/salt/>
5. “Under Pressure: Strategies for Sodium Reduction in the School Environment”, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention, Division for Heart Disease and Stroke Prevention, July 28, 2011. <http://www.cdc.gov/salt/publications.htm>
6. United States Department of Agriculture *Team Nutrition* Program and HealthierUS School Challenge website at [www.teamnutrition.usda.gov](http://www.teamnutrition.usda.gov)
7. American Heart Association, <http://www.heart.org/HEARTORG/GettingHealthy/NutritionCenter/HealthyDietGoals/Sodium-Salt-or-Sodium-Chloride_UCM_303290_Article.jsp#.TwcNkdR5ERo>
8. Texas Public School Nutrition Policy, Texas Administrative Code, Title 4 Agriculture, Part 1 Texas Department of Agriculture, Chapter 26 Food and Nutrition Division, Subchapter A Texas Public School Nutrition Policy. [http://info.sos.state.tx.us/pls/pub/readtac$ext.ViewTAC?tac\_view=5&ti=4&pt=1&ch=26&sch=A&rl=Y](http://info.sos.state.tx.us/pls/pub/readtac%24ext.ViewTAC?tac_view=5&ti=4&pt=1&ch=26&sch=A&rl=Y)
9. Texas Education Code; Title 2. Public Education; Subtitle G. Safe Schools; Chapter 38. Health and Safety; Section 013 and 014, <http://www.statutes.legis.state.tx.us/Docs/ED/htm/ED.38.htm>