

November 3, 2003

Secretary Ann M. Veneman
U.S. Department of Agriculture
Washington DC 20250

FAX: 202-720-6314

Dear Secretary Veneman,

On behalf of the Society for Nutrition Education (SNE), we thank you for your support in the area of children's nutrition and health. We ask you to reaffirm and expand that support by (1) urging that USDA enforce current regulations regarding competitive foods and foods of minimal nutritional value and (2) addressing other issues related to vending machines in schools. We urge you to consider our recommendations as you work to reauthorize the child nutrition programs. The recommendations follow from the enclosed Resolution recently passed by our membership (also found at www.sne.org "Positions and Resolutions").

The Society for Nutrition Education (SNE) represents the unique professional interests of nutrition educators in the United States and worldwide. SNE is dedicated to promoting healthy, sustainable food choices and has a vision of healthy people in healthy communities. SNE provides forums for sharing innovative strategies for nutrition education, expressing a range of views on important issues, and disseminating research findings. Members of SNE educate individuals, families, fellow professionals, and students, and influence policy makers about nutrition, food, and health.

As you are aware, obesity is a critical and growing concern, especially among children. It is certain that many factors contribute to the development of obesity, since body weight is the result of calorie intake and energy expenditure. However, since soft drinks are a significant source of calories for many school children, and can displace more nutritious beverages and foods from the diet, it is prudent to limit their availability, especially within the school environment. Recent studies suggest that over consumption of soft drinks can contribute to several health and learning problems:

- Children and adolescents are consuming increasing amounts of soft drinks, a major source of added sugar in the American diet today.^{1 2 3 4}
- A study conducted by the Harvard School of Public Health found that among 548 Massachusetts school children followed for about 19 months, for each additional can or glass of soda or juice a child consumed on average per day, the child's chance of becoming overweight increased by 60%.⁵
- Children who drink soda in place of milk are at a higher risk for eventual low bone density and osteoporosis since milk is the main source of calcium in diets of many children in the United States.^{2 6 7 8 9}
- Daily between meal consumption of soft drinks three or more times a day has been found to increase the risk of dental caries by 179%.¹⁰

- Many soft drinks contain caffeine, and given the quantity of soft drinks being consumed by many adolescents, their caffeine intake can be high enough to cause side effects that can disturb sleep patterns and impair learning ability.^{3 11 12}

When over half the food choices in school settings are of low nutritive value, children have a difficult time applying the nutrition education principles taught in the classroom.^{13 14 15 16}

In many school districts, soft drinks and other nutrient-poor snack foods are available to students through vending machines, often times throughout the school day and school building. By USDA regulation, schools that participate in the National School Lunch Program are banned from selling soda in the cafeteria during lunchtime. We applaud the efforts of USDA and Congress to urge schools and districts to promote healthy school environments, and encourage you to continue and strengthen these efforts as part of the upcoming Child Nutrition Reauthorization Bill through these additional avenues:

- Enforcing current regulations regarding hours of soda availability in schools and applying these regulations to other federal food programs, such as CACFP;
- Eliminating vending machines in preschools and elementary schools;
- Requiring that healthy choices be available and actively promoted when vending machines are in place;
- Allocating funds to further research the effectiveness of making environmental changes in schools;
- Drafting policies that could be adopted by state and local officials addressing the need to promote healthier school environments.

SNE members look forward to continuing our efforts throughout the country in helping to promote healthier school environments, and we look forward to working with you and other leaders to ensure that the health of children remains a key priority of Child Nutrition Programs.

Sincerely yours,



Jane Voichick, PhD
President, Society for Nutrition Education

Elizabeth Crockett, PhD, RD, CDN
President-Elect, Society for Nutrition Education

Enc: Soft Drink Resolution

-
- ¹ Morton, JF, Guthrie JF. Changes in children's total fat intakes and their food group sources of fat 1989-91 versus 1994-95: implications for diet quality. *Fam Eco Nut Rev*, 1998; 11(3): 44-57.
- ² Harnack L, Stang, J, Story M (1999). Soft drink consumption among U.S. children and adolescents; Nutritional Consequences *J Am Diet Assoc*, 1999, 99: 436-441.
- ³ Kantor LS. A Dietary Assessment of the US Food Supply. Comparing Per Capita Food Consumption with Food Guide Pyramid Serving Recommendations 1998. Food and Rural Economics Division, Economics Research Service, USDA Agriculture Economic Report No. 772.
- ⁴ USDA Continuing Survey of Food Intake in Individuals 1994-1996.
- ⁵ Ludwig DS, Peterson KE, Gortmaker SL. Relations between consumption of sugar-sweetened drinks and childhood obesity; a prospective, observational analysis. *Lancet* 2001; 357:505-508.
- ⁶ Lin B, Guthrie J, Frazao E. Quality of children's diets at and away from home: 1994-96. *Food Rev*, Jan-Apr 1999; 2-10.
- ⁷ Wyshak G. Teenaged girls, carbonated beverage consumption and bone fractures. *Arch Ped Adol Med*, 2000; 154:610-613.
- ⁸ USDA. Tips for Using the Food Guide Pyramid for Young Children 2 to 6 Years Old (Program Aid 1647). Washington, DC, 1999.
- ⁹ Institute of Medicine. Dietary Reference Intakes; Calcium, Phosphorus, Magnesium, Vitamin D, and Fluoride. 1997: 4-28.
- ¹⁰ Ismail AI, Burt BA, Dklund SA. The cariogenicity of soft drinks in the United States. *J Am Dent Assoc* 1984; 109:241-245.
- ¹¹ USDA Nutrient Database for Palm OS SR 15 downloaded 12/02
- ¹² American Psychiatric Association. Diagnostic and Statistical Manual of Mental Disorders, 4th ed. Washington , DC. 1994.
- ¹³ USDA. Food Sold in Competition with USDA School Meal Programs: A Report to Congress January 12, 2001.
- ¹⁴ Wechsler H, Brener ND, Kuester S, Miller C. Food service and foods and beverages available at school: results from the School Health Policies and Programs Study 2000. *J Sch Health* 2001;71:313-24.
- ¹⁵ Wechsler H, Deveraux RS, Davis M, Collins J. Using the school environment to promote physical activity and healthy eating. *Prev Med* 2000;30:1-18
- ¹⁶ Cullen KW, Baranowski T, Baranowski J, Hebert D, de Moor C, Hearn MD, Resnicow K. Influence of school organizational characteristics on the outcomes of a school health promotion program. *J Sch Health* 1999;69:376-80.