

NUTRITION STANDARDS AND MEAL REQUIREMENTS FOR NATIONAL
SCHOOL LUNCH AND BREAK PROGRAMS: PHASE I

Statement of

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Good morning, Madame Chair and members of the Committee. My name is Dr. Virginia Stallings. I am a pediatrician, Director of the Nutrition Center at the Children's Hospital of Philadelphia, and Professor of Pediatrics at the University of Pennsylvania, School of Medicine.

I serve as chair of the Committee on Nutrition Standards for National School Lunch and Breakfast Programs of the Institute of Medicine which produced the report, *Nutrition Standards and Meal Requirements for National School Lunch and Breakfast Programs: Phase I. Proposed Approach for Recommending Revisions* in 2008. We are currently working on Phase II of the project that will provide recommendations for revision of the nutrition standards and Menu Requirements for the School Breakfast Program and the National School Lunch Program. I also served as chair of the committee that prepared the 2007 Institute of Medicine report on *Foods in Schools: Leading the Way Toward Healthier Youth* that recommended nutrition standards for foods offered in competition with federally reimbursable meals and snacks. Established in 1970 under the charter of the National Academy of Sciences, the Institute of Medicine provides independent, objective, evidence-based advice to policymakers, health professionals, the private sector, and the public.

In 2008, at the request of the US Department of Agriculture (USDA), the Institute of Medicine convened an expert committee to provide recommendations for updating and revision of the nutrition standards and meal requirements for the school lunch and breakfast programs. Nutrition standards and meal requirements provide the nutrition and health foundation for the National School Lunch Program and the National School Breakfast Program, and much has happened since the current standards were last updated in 1995. The key question is: What changes are needed to make these programs consistent with the current understandings about diet and health as they relate to our nation's children?

The National School Lunch Program serves more than 30 million children per day and the School Breakfast Program serves 10.1 million students daily (FY 2007). Thus, improvements to the programs offer tremendous potential to improve the dietary intake and health of children. Together, the two school meals programs can make a great impact because they may provide more than 50 percent of a student's food and nutrient intake on school days and about half of the food intake in a year. As you know, depending on household income, a child may receive program meals at no cost, reduced cost, or full (but partially subsidized) price. Thus, the programs serve as a safety net for children in need.

When the National School Lunch Program was established in 1946 as a "measure of national security, to safeguard the health and well-being of the nation's children," nutritional concerns in the United States centered on nutrient deficiencies. Although many of the overt nutritional deficiencies in children's diets have largely been eliminated, other nutrition-related concerns have emerged, most notably a high prevalence of childhood obesity. Although program standards were updated in 1980 and 1995, additional updates are needed. Further revision of program standards will enable the programs to incorporate current public health recommendations and newer knowledge about the nutritional needs of children and adolescents and the impact on health in childhood and throughout the lifetime. Among the specific reasons for revising the standards are substantial changes in the *Dietary Guidelines for Americans* (which, by law, the school meal programs are required to follow), major changes in nutrient

reference values and ways to apply them, and the alarming increases in the prevalence of childhood obesity coupled with the short and long term health consequences that will likely follow childhood obesity.

The nutrition standards and meal requirements provide the foundation for the school meals programs. If the meals offered meet the nutrition standards and meal requirements in USDA regulations, the USDA subsidizes the cost through cash reimbursements. In fiscal year 2007 the value of the cash reimbursements were near \$10 billion total for both programs. In that same year, USDA also provided commodity foods to the programs with a value of approximately \$1 billion. Commodity foods available to schools have changed over the years, and states may now choose from a list of more than 180 agricultural commodities including more foods that are encouraged by *Dietary Guidelines for Americans*, such as fruits and vegetables.

The committee's work has been divided into two phases. I am going to talk about the Phase I report issued in late 2008 that describes the committee's proposed criteria and approach to use in making recommendations for revisions to the nutrition standards and meal requirements of the school meal programs. The report is available electronically at no charge from the National Academies Press (http://www.nap.edu/catalog.php?record_id=12512 or <http://iom.edu/schoolmeals>).

During Phase I, the committee identified and reviewed available data and information on the task, formulated working principles and criteria, and reviewed and assessed the food and nutrient intakes of schoolchildren. The committee then described its planning model and analytical methods for developing recommendations. The report was discussed during a public forum in January, the committee is now engaged in Phase II, and expects to complete this report with recommended revisions to the nutrition standards and meal requirements for School Breakfast and Lunch Programs in Fall 2009.

The committee proposed four criteria to guide its work. The proposed criteria are:

1. The nutrition standards and meal requirements will be consistent with current dietary guidance and nutrition recommendations to promote health—as exemplified by the *Dietary Guidelines for Americans* and the Dietary Reference Intakes from the Institute of Medicine—with the ultimate goal of improving children's diets by reducing the apparent prevalence of inadequate and excessive intakes of food, nutrients, and calories.
2. The nutrition standards and meal requirements will be considered on the basis of age-grade groups that are consistent with the current age-gender categories used for specifying reference values and with widely used school grade configurations.
3. The nutrition standards and meal requirements will result in the simplification of the menu planning and monitoring processes, and they will be compatible with the development of menus that are practical to prepare and serve and that offer nutritious foods and beverages that appeal to students.
4. The nutrition standards and meal requirements will be sensitive to program costs.

Through its discussion of specific topics that must be addressed in order to revise nutrition standards and meal requirements, the Phase I report explains why changes are needed. Perhaps most importantly, the standards and requirements must be updated to be consistent with the

current *Dietary Guidelines for Americans* and the Dietary Reference Intakes. There is also need to identify practical approaches to making revisions, to address cost considerations, to continue providing a safety net to children who are at risk of insufficient food intake without contributing to excessive weight gain, to enable planning of meals that student will eat and enjoy, and to address other factors that affect feasibility of implementing the recommendations. I will highlight the application of *Dietary Guidelines for Americans* and the Dietary Reference Intakes to the school meals program, by way of illustration of the complexities and the necessity for revisions.

Fruits, Vegetables Whole Grains, and Low-Fat or Fat-Free Milk Products. The Child Nutrition and WIC Reauthorization Act of 2004 amended the National School Lunch Act to require increased consumption of foods that are recommended in the most recent Dietary Guidelines. These include fruits, vegetables, whole grains, and low-fat or fat-free milk products. Further, the increased consumption of such foods can be related to the decreased intake of other food groups (for example, meats and refined grains). Addressing these issues requires careful consideration of food-based and nutrient-based planning. Current standards for the two approaches differ with regard to number of servings and serving sizes of fruits and/or vegetables and fluid milk; and neither requires whole grains. While regulations specify that all schools must provide at least two types of milk, they do not restrict the types of milk offered by fat content.

The definition of whole grain products will be considered. In the marketplace, most foods that contain whole grain represent mixtures. The term *whole grain* is not defined by Food and Drug Administration and that agency has not provided a definition of a whole grain product or a whole grain serving. To assess how well a school is meeting [potential] nutrition standards concerning the inclusion of whole grains in menus, the definition of whole grain in the school setting will need to be clear. This will help industry and the school food service team.

Sodium, Cholesterol, Fiber, and Trans Fat. The Dietary Guidelines includes recommendations for sodium, cholesterol, and fiber and recommends limiting the intake of *trans* fat. Especially with regard to sodium, it may be challenging to obtain prepared foods that the children will find appetizing. Further, not all the recommendations are identical to those in the DRIs. Again, up to date uniform recommendations will likely encourage industry to respond to the nutrition and health needs of school age children.

Planning for Subsequent Revisions to Dietary Guidelines for Americans. By law, the Dietary Guidelines must be reviewed every five years. To date, changes have been made every five years. Especially because the next revision to Dietary Guidelines is expected in the year 2010, it may be helpful if revisions for the school meal programs include a way to accommodate ongoing changes to the Dietary Guidelines in a timely way.

Incorporating Current Dietary Reference Intakes and Related Planning Approaches for School Meals. The current nutrition standards for school meals reference the older 1989 Recommended Dietary Allowances. These have been replaced and expanded by the Institute of Medicine's new reference values known as the Dietary Reference Intakes (DRI) developed between 1994 and 2004. The standards for school meals have not yet changed in response. The planning task is complex and involves considerations related to program goals, nutritional

aspects (such as the selection of target nutrient intake levels), and program implementation. The revisions to the nutrition standards and meal requirements for school meal programs must take these and related considerations into account.

Specifying Age-Grade Groups. Nutrient and energy needs differ by age and, in older children, by gender. Currently, the regulations for school meal programs specify a number of age-grade groups (for example, kindergarten through grade three) and make no distinction by gender. DRI age groups differ somewhat from the ages covered by the USDA-specified age-grade groups. Part of the committee's task is to propose serving sizes and numbers of servings of the required types of foods of the nutrition standards by age-grade group. These amounts would be used in menu planning and in the evaluation of menus.

Recommending Energy Levels. Energy needs differ by age and by physical activity and body size (which vary greatly, especially in grades 7 through 12). Recommendations for energy will need to consider the great diversity of needs of the ages of the children being served. It may be appropriate to provide recommendations for both minimum and maximum energy levels.

Specifying Nutrients to Be Covered by the Nutrition Standards. Currently, regulations specify quantitative requirements for energy, protein, calcium, iron, vitamin A, vitamin C, total fat, and saturated fat. In addition, the nutrition standards encourage program operators to reduce sodium and cholesterol levels and to increase fiber levels in menus with no further specification given. The DRIs include targets for all these nutrients plus many more, and the 2005 Dietary Guidelines identified several nutrients of concern for children. These developments indicate a need to reassess the list of nutrients that are covered in the nutrition standards.

In conclusion, the National School Lunch Program and School Breakfast Program have a long and impressive history of providing nutritious low-cost meals to school-age children. There have been major developments in diet and health guidance and nutrient reference standards and their application to programs since the last major revisions to the nutrition standards and meal requirements. It is now time to develop recommendations for further revisions to the nutrition standards and meal requirements of the school meal programs so that the program can achieve greater benefits for our nation's children. Thank you for the opportunity to testify. I would be happy to address your questions.