ONLINE FIRST

School Meals

A Starting Point for Countering Childhood Obesity

On December 11, 2012, the *New York Times* devoted its front-page, right-hand column—the most important news of the day—to a welcome surprise: several cities were reporting declines in the prevalence of childhood obesity.[1] Although the declines were small, 5% or less, they were hopeful signs of a possible reverse in the sharp increase in childhood obesity observed since the early 1980s. And although the cause of the reversals could not be definitively established, the cities reporting them were the ones that had made "strong, far-reaching changes—those that make healthy foods available in schools and communities and integrate physical activity into people's daily lives."[2]

In this issue of *JAMA Pediatrics,* Taber and colleagues[3] provide important evidence to support the value of strong, far-reaching public health initiatives to counter childhood obesity. They observed that some states—but not others—had passed laws requiring school lunches to exceed then-current US Department of Agriculture (USDA) standards for healthier foods such as fruits and

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vegetables, reduced-fat milk, and whole grains. The investigators asked whether children in states with more stringent lunch requirements might have better weight status than those living in states with less restrictive standards. But because low-income children are at greater risk for obesity, they further categorized children by the type of lunch reported as typically consumed: the free or reduced-price USDA lunch (available only to low-income students) or the USDA lunch at the regular price or no school lunch (available to everyone, regardless of income). They reported the percentage of obesity in children by school lunch category in states adhering to, or exceeding, the USDA nutrition standards.

As expected, the study observed a higher prevalence of obesity among students consuming the free or reduced-price lunches in all states. But obesity prevalence was lower among such students in states with more stringent nutrition standards. In addition, the difference in obesity prevalence between students consuming the free or reduced-price lunch and those not consuming such meals also was lower in states with the stricter standards. In short, the study found an association between more stringent school meal standards and more favorable weight status, especially among low-income students.

The study produced one other noteworthy result. Students did not compensate for the healthier school meals by buying more snacks or sodas on school premises. In previous reports, Taber et al[4,5] observed that students in states with stricter standards governing competitive foods—those sold in competition with federally supported school meals—consumed fewer calories and less fat and sugar at school and did not gain as much weight as students in states with less stringent standards.

Taken together, these studies have profound implications for current USDA school nutrition policies for meals as well as for competitive foods. In January 2012, the USDA issued new nutrition regulations similar to those of the states with the most stringent standards. A year later, the USDA proposed rules for competitive foods, opening them to what would undoubtedly be extensive public comment.[6] Although the USDA based its nutrition standards on studies by the Institute of Medicine,[7] when it comes to school food, politics trumps science. Producers of potatoes and pizza, for example, concerned that the new rules would reduce federal purchases of their products, induced Congress to pass legislation forbidding the USDA from setting limits on the number of potato servings or the amount of tomato sauce needed to qualify as a vegetable serving.[8] Congressional micromanagement of USDA nutrition standards allows the tomato sauce on pizza to count as a vegetable.

In response to protests from the food industry and some food service directors and high school students, several members of Congress complained to the USDA that school meals had become inadequate to meet the nutritional needs of growing children, especially for protein and calories.[9] Although protein and calories are hardly deficient in the diets of American schoolchildren, the UDSA sensibly agreed to allow schools flexibility in the amounts of meat and grains permitted under the new standards during this first year of implementation.[10] The objecting members of Congress, however, want this "flexibility" to be permanent. Because the work of Taber et al makes it clear that more stringent nutrition standards promote healthier weights, these arguments cannot be about children's health. Instead, they are about which food corporations—and the congressional representatives whose election campaigns they support—most benefit from federal purchases of foods for school lunches.

Reversing childhood obesity ought to be a major national priority. Increasing evidence suggests that policies such as school nutrition standards can promote healthier weights. A 2011 Cochrane review of school actions to counter obesity confirmed the value of providing healthier meals, teaching students about healthful

dietary practices, and supporting teachers, staff, and parents in developing strategies and activities that foster such practices.[11]

The American Heart Association has identified public health measures most likely to be effective in improving the diets of children and adults: school-based campaigns, subsidies for healthier foods, work-site programs, restrictions on televised food commercials at home and at school, and more stringent nutrition standards for marketing food products.[12] In looking at what communities, cities, and the federal government can do to promote healthier child eating patterns, other researchers note analogies with alcohol control policies. Such policies suggest the potential value of educational campaigns, quality labels on foods, differential food taxes, and limits on portion sizes and food outlet density, especially near schools.[13]

In these reviews of potentially effective environmental changes, schools emerge as key locations for obesity intervention. This makes sense. Most children attend schools for large portions of the day. For many children, school meals provide substantial fractions of daily food intake. Increasing evidence confirms that school-based dietary interventions can help promote healthier eating patterns and body weights, especially among children likely to bear the greatest consequences of obesity. Health professionals should applaud such interventions. Objections to school nutrition standards must be recognized for what they do: place the financial health of food companies and their supporters in Congress above the health of the nation's children.

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