ACKNOWLEDGEMENTS:

This Toolkit was written in 2004 by The Food Trust. It was funded through a grant from the Pennsylvania Department of Agriculture and developed through a collaborative effort of a diverse group of partners including the Pennsylvania Department of Agriculture, The Food Trust, Food Services Division of the School District of Philadelphia, Pennsylvania Department of Education, Pennsylvania Department of Health, Pennsylvania Advocates for Nutrition and Advocacy (PANA), Pennsylvania Action for Healthy Kids, Project PA, American Dairy Association & Dairy Council Mid East, Mid-Atlantic Dairy Association, Pennsylvania Nutrition Education Network, and the Pennsylvania Parent Teacher Association.

The Food Trust is a private non-profit that was established in 1992 to increase the availability of fresh foods, develop a stable food supply in undeserved communities, and improve the connection between urban and agricultural communities. Its goals are to provide nutritious and affordable fresh foods to undeserved communities, to educate people about the importance of healthy diets and to build healthy and sustainable rural and urban communities where everyone has access to locally grown, fresh and affordable food regardless of their income and where they live.
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**CHECK OUT THE Toolkit CD!**

Look for this symbol to direct you to tools you can edit and make your own!

The Toolkit CD will provide you with a wealth of resources that you can utilize in your efforts to replace soda and other sweetened beverages with water, 100% fruit juice, and milk.

It contains:
- The Full Toolkit Booklet
- The Toolkit Appendix
- Articles and Other Resources
Childhood obesity has emerged as one of the most serious and fastest growing health threats to our children. While a great deal is known about the causes of childhood obesity, not enough is being done to address this critical issue that is affecting the future health and well being of children.

This Healthy Beverage Toolkit has been designed to help parents, teachers, food service professionals, school administrators and community leaders confront the epidemic of childhood obesity by promoting healthy beverage consumption. The tools in this kit focus on one critical aspect of the eating habits of children - what beverages are sold and served to the children at school. Here, you will find background information on childhood obesity including the role sweetened drinks play in this emerging epidemic and in other diet-related problems. And you will find the information you need to develop a model healthy beverage policy tailored to your school district and community, with information on how to develop a Healthy Beverage Coalition to effect that change.

Schools provide an ideal setting for doing something about the problem of childhood obesity. Almost all children are enrolled in schools, and most spend a significant amount of time there. Children can be influenced by the school environment - including by the foods and beverages offered. In addition to providing opportunities for children to engage in healthy eating and physical activity, children receive important messages at school about eating and their physical activity. Through classroom nutrition education, physical education, and school food services, schools and the professionals who work in them can make a difference in the healthy eating habits of children. “I do not blame schools for our obesity epidemic,” said the U.S. Surgeon General at the Healthy Schools Summit. “Instead I look to schools - and to everyone who has an influential hand in education - as a powerful force for change.”

While the Toolkit describes what is generally considered the healthiest approach -- a model beverage policy promoting 100% milk, juice and water -- it also guides users through the process of developing their own beverage policies, appropriate to their own school or community settings. We urge you to use the tools in this kit to improve the health of children.

R. Duane Perry, Executive Director  The Food Trust
CHAPTER 1
Background Facts

THE OVERWEIGHT CRISIS IS AFFECTING AMERICA’S YOUTH
CHILDHOOD OBESITY IS ON THE RISE

1. Obesity rates have doubled in young children and tripled in adolescents over the last two decades in the U.S. Today, one in seven young people is obese and one in three is overweight.¹

2. Obese children are twice as likely as non-obese children to become obese adults.²

3. Obesity increases the risk of high blood cholesterol, high blood pressure and diabetes while still in childhood.³

4. Being overweight and obese can result in negative social consequences for children, e.g., discrimination, depression and lower self-esteem.⁴

5. From 1979 to 1999, annual hospital costs for treating obesity-related diseases in children rose threefold (from $35 million to $127 million).⁵

6. Eighteen percent of children in Pennsylvania suffer from being overweight -- a rate higher than the national average (15.4%). And even that rate may understate the reality of the dimensions of the problem in the state.⁶

UNHEALTHY EATING HABITS OFTEN BEGIN IN CHILDHOOD

1. Between 1989 and 1996, the caloric intake of children increased by an extra 80 to 230 calories a day, depending on the child’s age and activity level.⁷ These increases were likely driven by an increase in foods and beverages high in added sugars.

2. Only 2% of children ages 2 to 19 meet the recommendations for a healthy diet described in the USDA’s Food Guide Pyramid.⁸

3. Three out of four American high school students do not eat the recommended five or more servings of fruits and vegetables each day.⁹

4. Three out of four children consume more saturated fat than recommended by the U.S. Department of Agriculture Dietary Guidelines for Americans.¹⁰
OBESITY AND OTHER DIET-RELATED DISEASES IN CHILDREN

1. Type 2 Diabetes can no longer be called “adult onset” diabetes because of rising rates of this chronic disease in children. One alarming study found the incidence of type-2 diabetes in adolescents increased ten-fold between 1982 and 1994.11

2. A quarter of overweight children ages 5 to 10 years show early warning signs for heart disease, such as elevated blood cholesterol or high blood pressure.12

WHAT YOU SHOULD KNOW ABOUT SWEETENED DRINKS & YOUR SCHOOL-AGE CHILDREN

1. Soft drink consumption rates among children have doubled in the last decade.13

2. Soft drinks are currently the leading source of added sugars in the daily diet of young Americans. The average teenager gets 15 to 20 teaspoons a day of added sugar from soft drinks alone.14

3. More than 1 out of every 10 calories in an adolescent’s (ages 12-17) diet comes just from soft drinks.15

4. Carbonated sodas are composed primarily of sugar, high fructose corn syrup, caffeine, and water. They have led to a decrease in vitamin A, calcium, and magnesium consumption in children. Juice and milk provide important vitamins and minerals such as vitamins A, C, D, B-12, calcium, magnesium, protein and folate.16, 17, 18

5. Frequently consuming carbonated beverages, sweetened fruit drinks, fruit punches, and high carbohydrate, starchy foods predisposes children and adolescents to tooth decay.19
SWEETENED DRINKS ARE CONTRIBUTING TO CHILDHOOD OBESITY LEVELS EVERY DAY

1. For every additional serving of soft drinks consumed each day, the risk of becoming obese increases by 60 percent.20

2. In another study of school-aged children, youngsters who did not consume soft drinks at all took in an average of 1,830 calories per day, while those who consumed an average of 9 ounces or more of soda a day took in an average of 2,018 calories a day - almost 200 more calories per child per day - or more than 10 percent additional calories each day.21

MORE BUBBLES CERTAINLY -- BUT LESS CALCIUM UNFORTUNATELY

1. The U.S. Department of Agriculture reports that American teens drink twice as much carbonated soda as milk.22

2. Children who consumed more dairy foods and had moderate intake of dietary fat gained less fat and weight over an eight-year period than children who consumed fewer dairy foods and had low or very high intakes of dietary fat.23

3. A Harvard School of Public Health study of ninth and tenth grade girls found that those who drank colas were three times more likely to develop bone fractures, and, if they were regularly active, as much as five times more likely to do so.24

4. From 1988 to 1994, the percentage of U.S. youths who met dietary recommendations for calcium intake dropped from 88 percent to 52 percent for boys and 79 percent to 19 percent for girls.25

5. School-aged children who drank the most soft drinks consumed less milk and fruit juice than those who did not consume soft drinks.26

6. Several studies have demonstrated that those children and adults who consume adequate amounts of dairy foods benefit by having lower blood pressure.27

7. A growing body of research suggests that dairy products and calcium play a beneficial role in controlling body weight and fat in children and adults.28
CHAPTER 2
Foods and Beverages in Schools

COMPETITIVE FOODS

In recent years, schools have offered and sold increasing numbers of foods and beverages that fall outside of the USDA’s school meals programs. They’re called competitive foods precisely because they “compete” for the attention and resources of children, with the more highly regulated nutritional meals available through the federal Child Nutrition Programs. These competitive foods fall into two categories:

• First, there are Foods of Minimal Nutritional Value (FMNV) including carbonated beverages, water ices, chewing gum, hard candy, jellies and gums, marshmallow candies, licorice, spun candy, and candy-coated popcorn. Fund-raisers for various clubs and organizations sometimes offer other foods for sale in schools. Current USDA federal school meal program regulations prohibit the sale of FMNV in the food service area during the school meal periods.29

• Second, there are the other foods that students purchase for sale in the schools in addition to or in place of a reimbursable school meal, such as a la carte sales and foods and beverages purchased from vending machines, school stores, canteens and snack bars. Current federal regulations do not prohibit the sale of these foods during the school day anywhere on the school campus, including the food service areas.

USDA regulations for the federal school meal programs require that states and school food authorities prohibit the sale of FMNV in the cafeteria and other food service areas during the school meal periods. However, 43% of elementary schools, 74% of middle/junior high schools, and 98% of senior high schools have vending machines, school stores, or snack bars that sell competitive foods according to national surveys.30 While school meals are required to meet nutrition standards, competitive foods are not required to meet those standards.

When Pennsylvania high school food service directors were asked to indicate their five top-selling a la carte food items, for beverages they said31:
• 42% - soda pop, sports drinks or fruit drinks that are not 100% juice
• 37% - water
• 17% - milk
• 8% - 100% fruit juice or 100% vegetable juice

Pennsylvania high schools with vending machines offer the following beverages32:
• 72% - bottled water
• 67% - fruit juice
• 64% - juice drinks
• 59% - carbonated beverages
• 59% - sports drinks
• 58% - iced tea
• 44% - lemonade
• 25% - chocolate milk
• 22% - whole milk
• 19% - low fat/skim milk

Schools are starting to implement healthy beverage policies

State agencies and local school food authorities have the power to impose additional restrictions on the sale of all foods sold at any time in schools participating in the federal school meals programs. About 23 states have policies that are more stringent than USDA regulations. These vary from West Virginia’s nutrition standards that offer comprehensive nutrition guidelines, to states that do not allow foods of minimal nutritional value on school campuses through the last lunch period.33 However, Pennsylvania as a state does not have policies that go beyond the USDA regulations. On the other hand, some districts, including at least two in Pennsylvania, are doing more:

1. More than half of the 10 largest school districts in the United States have policies that restrict competitive foods in schools beyond federal and state regulations.

2. The School District of Philadelphia, the fifth largest school district in the country, eliminated soda and implemented a policy for all vending and a la carte sales, starting July 2004. Beverages are now limited to 100% juice, water and milk.


4. The New York City Public School District, the largest school district in the country, eliminated candy, soda, and other snack foods from all vending machines in the district, beginning in the fall of 2003. Vending machines on school grounds are now limited to selling water, low-fat snacks or 100 percent fruit juices.

5. The Los Angeles Board of Education, representing the second largest school district in the country, passed a soda vending ban in high schools that went into effect January 1, 2004. In addition, the board banned fried chips, candy and other snack foods in school vending machines and school stores as of July 1, 2004.

“Since the District's new policy was made public in January it has received positive reviews from nutrition experts who consider it one of the toughest policies of its kind in any school district in America. This policy will go a long way in supporting one of the District's core missions: doing everything we can to keep our students safe and healthy.”

James Nevels, Chairman, Philadelphia School Reform Commission
The following healthy beverages are recommended for sale in schools:

- Low-fat or fat free chocolate milk
- Fruit-based beverages that contain no less than 100% real fruit juice
- Water and seltzers with no additives
- 6 oz portion is the recommended serving size for juice products*
- 8 oz portion is the recommended serving size for milk products*
- No portion limits for water

The following beverages are not recommended for sale:

- Soda, punches and iced teas
- Fruit-based drinks that contain less than 100% real fruit juice
- Drinks containing caffeine, excluding low-fat/fat-free chocolate milk
- Any beverage with added sugars or artificial sweeteners, including diet drinks

*While these are recommended serving sizes, not all manufacturers sell these size juice and milk containers. If you are not able to sell/serve the recommended portion size, select the container size that most closely matches the recommendations.
THE PHILADELPHIA EXPERIENCE - A CASE STUDY OF WHAT IS POSSIBLE

The new beverage policy for Philadelphia’s schools had its genesis in a Comprehensive School Nutrition Policy Task Force formed by The Food Trust and the Food Services Division of the School District of Philadelphia. The Task Force’s goal was to change the school environment to support healthy eating, increase physical activity and decrease the prevalence of childhood obesity, overweight and diet-related diseases. The Task Force was composed of more than 40 groups and individuals.

The Task Force devoted a year to discerning how best to adapt the Centers for Disease Control and Prevention (CDC) guidelines to Promote Lifelong Healthy Eating and Physical Activity to meet the needs of the Philadelphia School District. Committees were established to make recommendations around each component of the CDC Guidelines. These recommendations included the establishment of a Select Committee on Nutrition Standards, composed of experts who worked together to increase healthy food offerings at schools, creating an easily understandable platform for nutrition education efforts and an approach to guiding school food purchasing decisions.

The Committee worked with the Food Services Division to remove all sodas from a group of pilot schools in September 2001. By March 2002, the pilot schools also had all Fruitopia and Nestea, as well as all juice drinks and sweetened drinks that did not meet the standards set by the Committee removed from the vending machines and the cafeteria line choices. In addition, data on children’s body mass index (BMI) - a measure of obesity, food intake, physical activity and sedentary behavior - were collected as well as data on vending sales.

In February 2003, the Philadelphia School District released a Request for Proposal (RFP) for an exclusive beverage contract. Like many urban school districts, Philadelphia does not receive sufficient funding to cover all its costs. Beverage contract revenues are one way to help offset funding gaps. The district received proposals for exclusive beverage rights from several beverage suppliers.

The Food Trust organized the Philadelphia Coalition for Healthy Children to work with the District and the School Reform Commission, the appointed body that governs the School District, to ensure that any beverage contract that was signed would not jeopardize the health of students. Parents, health professionals, school personnel and other interested persons joined the coalition and attended School Reform Commission meetings to express their interest in making child health and the prevention of childhood obesity priorities in the vending contract negotiations.

“Parents know the difference between wholesome food and junk food. That is why they want the school district to sell real fruit juice and real milk which are packed with essential vitamins. None of us are drinking enough pure water, so of course this should be encouraged by schools. But enticing children to consume more junk while they are at school is simply wrong.”

Shelly Yanoff, Executive Director, Philadelphia Citizens for Children and Youth, and a member of the Philadelphia Coalition for Healthy Children
Coalition members contacted the media to raise public awareness about the link between soda consumption and the growing epidemic of childhood obesity. Articles began appearing in the Philadelphia Inquirer and other newspapers as the issue gained community-wide interest.

The Food Trust commissioned a poll showing that 9 out of 10 parents of Philadelphia school-children wanted only water and 100% fruit juice in school vending machines. The Coalition worked with the Philadelphia City Council to pass a resolution calling on the School Reform Commission to hold public hearings and to allow only healthy beverages in vending machines.

The Coalition also met with School Reform Commissioners and state legislators to garner support for a beverage policy that allowed only water, 100% fruit juice, and milk in schools. In July, District CEO Paul Vallas announced his support for banning soda and called on the School Reform Commission to enact the new policy.

The School Reform Commission held two days of hearings in August 2003 to invite comment on the need for a new beverage policy. Elected officials, nutritionists, doctors, obesity researchers, teachers, parents, and students testified in favor of banning soda and other sweetened beverages from schools. A smaller number testified against a soda ban, including researchers with funding from the National Soft Drink Association, one school principal and a parent who thought students should have the freedom to choose their drinks.

After the hearings, the Coalition continued its efforts to garner support around a healthy beverage policy by contacting the media, e-mailing the CEO of the school district and presenting the School Reform Commission with a petition, signed by the Philadelphia Coalition for Healthy Children, to implement a new policy based on the recommendations that gained widespread support at the hearings. By a 3-2 vote, in February 2004, the School Reform Commission banned soda and other non-nutritious beverages by passing the School District of Philadelphia Beverage Policy. The Division of Food Services rejected all proposals it had received for an exclusive vending contract and instead implemented the new policy throughout the district on July 1, 2004. The new policy only allows 100% juice, water and milk to be sold in schools. The Philadelphia School District’s beverage policy is one of the toughest in the nation and is viewed as a national model for improving school nutrition. (Appendix 1).

“Since the District’s new policy was made public in January it has received positive reviews from nutrition experts who consider it one of the toughest policies of its kind in any school district in America. This policy will go a long way in supporting one of the District’s core missions; doing everything we can to keep our students safe and healthy.”

James Nevels, Chairman, Philadelphia School Reform Commission

“The estimated healthcare costs of obesity in Philadelphia will be $380 million this year with a significant amount of that figure being spent on young people who suffer from being obese.”

Philadelphia City Council Resolution, June 12, 2003
CHAPTER 3
How to Make Healthy Beverages Happen in Your School

BECOME A HEALTHY BEVERAGES EXPERT

STEP 1 -
FAMILIARIZE yourself with the facts on childhood obesity and soda consumption described in Chapter I (also see Appendix 2 - Resources and Web Links)

STEP 2 -
LEARN more about which beverages are healthy and how to read nutrition labels to learn more about the nutrition content of the beverages your children drink or that are offered in their schools.

The healthiest beverages are those with no added sugars. All juices and milk contain natural sugars but at the same time, they have many naturally occurring vitamins and minerals that are essential for growth and good health. Added sugars provide only calories with no additional nutritional value. Read your nutrition labels to look for juices with only 100% juice that have no added sugars. Splenda, a naturally derived sugar that contains no calories has been under investigation because of safety concerns and is therefore not recommended.

STEP 3 -
FIND OUT if your school district has a beverage policy and what beverages are sold in your schools:

WHICH HEALTHY BEVERAGES ARE SOLD OR SERVED IN YOUR SCHOOL?
- Low-fat, 1% or fat-free milk
- Water
- Fruit juice (should be 100% real juice)

WHICH UNHEALTHY BEVERAGES ARE SOLD OR SERVED IN YOUR SCHOOL?
- Soda
- Diet soda, diet ice tea and other artificially sweetened beverages
- Iced tea or other sweetened drinks
- Fruit drink (less than 100% real juice)
- Sports drinks (only recommended near gyms, pools or athletic fields)
- Drinks

ARE UNHEALTHY BEVERAGES SOLD IN ANY OF THE FOLLOWING PLACES:
- Cafeteria line
- Vending machines
- School store
- Fundraising drives
- Sporting events
- Other?

STEP 4 -
RESEARCH other school policies that may affect the development of a Healthy Beverage policy (Chapter II - Foods and Beverages in Schools).

STEP 5 -
LEARN about the economics of removing soda and other sweetened beverages (Appendix 3 - Healthy Food and Healthy Finances) from schools and how to overcome the concern about losing added income

STEP 6 -
CONDUCT a poll of parents in your school district (Appendix 4)
PLAN YOUR STRATEGY
You may meet little to no resistance to creating and implementing a new healthy beverage policy for your school district. After all, school districts across the country are moving ahead on this issue, and your involvement and encouragement may simply help guide and support the process. However in many communities opposition to the idea of restricting sweetened beverages to 100% milk, fruit juice and water may develop. This could come from the soda industry, students, parents, employees of the school district or local political leaders. Opponents may propose a “compromise” solution, such as removing sweetened beverages in elementary schools only or mandating that vending machines contain some specified percentage of healthy options in addition to the less healthy ones. Unfortunately such policies or compromises may do little to prevent obesity. In order to build community support to counter this type of opposition, it is important to formulate an effective strategy. Indeed, there is no reason to settle for anything less than the “Gold Standard” that has been established by the Philadelphia School District and other forward-looking school districts across the country.

As you develop these steps, plot a rough timeline of each of your actions leading to a specific date when you would expect the school district to make a decision. If your school district has a contract with a beverage supplier, find out when it is up for renewal (If your district has a policy, see Appendix 5 for some options). A school board vote on a beverage contract is a good target to build your timeline around.
PHILADELPHIA BEVERAGE POLICY TIMELINE

<table>
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<tr>
<td>9/01</td>
<td>Philadelphia School District's Food Services Division and The Food Trust launch a healthy beverage pilot project.</td>
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<tr>
<td>2/03</td>
<td>District releases Request for Proposal for exclusive beverage contract.</td>
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<tr>
<td>5/03</td>
<td>The Food Trust forms the Philadelphia Coalition for Healthy Children.</td>
</tr>
<tr>
<td>6/03</td>
<td>The district hears oral proposals from both Coca-Cola and Pepsi on supplying beverages to city schools. City Council passes a resolution calling for a healthy beverage policy and public hearings on the issue.</td>
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<tr>
<td>7/03</td>
<td>The Food Trust releases a poll that shows 9 out of 10 parents want only healthy beverages in schools. The Coalition for Healthy Children members speak at a School Reform Commission meeting. Paul Vallas, CEO of the Philadelphia School District, announces his desire to ban soda in schools and calls on the School Reform Commission to enact the ban.</td>
</tr>
<tr>
<td>8/03</td>
<td>School Reform Commission holds two days of public hearings on the new beverage policy.</td>
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<tr>
<td>11/03</td>
<td>The Coalition presents the School Reform Commission with a petition to implement suggestions from the public hearings and pass a healthy beverage policy.</td>
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<tr>
<td>1/04</td>
<td>The Philadelphia School District unveils its proposed beverage policy; by allowing only 100% fruit juice, water and milk, it garners national headlines as one of the most advanced approaches in the country.</td>
</tr>
<tr>
<td>2/04</td>
<td>The School Reform Commission approves the district’s Healthy Beverage Policy.</td>
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Both your plan of action and your timeline will change as events unfold. It is important to stay flexible. Respond to opportunities when they arise. Some steps will end up being impossible to implement or unimportant to try, while other steps will have to be added. The important thing is to keep working towards your ultimate goal.
As a first step, you should organize a coalition of organizations and concerned citizens to raise awareness in your community and work with your school district to implement a healthy beverage policy.

Your coalition does not have to be large. Nevertheless, you may be surprised at how many people are interested in this issue. For anyone interested in getting involved, ask for their contact information and invite them to join your coalition. When you reach out to a new person or organization to join you for the first time, ask them to do something simple to help. Perhaps they can send an e-mail or fax a letter to a school board member requesting that only healthy beverages be sold and served in the schools. Provide your potential members with facts about obesity, the lack of nutritional value of sweetened drinks, how they may harm children’s health and about the sale of these beverages in local schools. This will help them understand why you want to reform the beverage policy, and provide information they can use in e-mailing others. Create a flyer and e-mail outlining these key facts.

**KEY STEPS TO FORMING A COALITION**

**STEP 1 -** Name your coalition (“your town’s” Coalition for Healthy Children).

**STEP 2 -** Start building an e-mail list of doctors, dentists, registered dietitians and nutritionists, school employees, parents, non-profit professionals, and other interested citizens.

**STEP 3 -** Identify allies in the School District such as food service directors, school board members, or the superintendent. School District employees who support beverage policy reform can be your strongest coalition members.

**STEP 4 -** Call your local hospitals and locate specialists in obesity or diabetes - see if they will agree to join the group and/or be on the list of experts who may be asked to testify or speak to the media.

**STEP 5 -** Teachers can be a great asset by providing valuable information - with first hand accounts - of the amount of unhealthy food or drinks children consume during the day. However, if the school administration is officially opposed to reforming the nutrition policy, teachers may find it uncomfortable to play a strong public role to support the issue.

**STEP 6 -** Get buy-in from your coalition on your strategy and goals. E-mail a draft policy to each of them and ask for feedback and, eventually, their approval.

**STEP 7 -** Create a one-page flyer that explains the coalition, its members, its goals and offers a few key facts to support the need to develop a healthy beverage policy. Distribute the flyer to coalition members, media contacts, elected officials, school officials and other interested community members. (Appendix 6 - see sample flyer)

**STEP 8 -** Send regular updates. One e-mail a week should suffice. (Appendix 7 - see sample e-mail update from the Philadelphia Coalition for Healthy Children)

**STEP 9 -** Ask the coalition to take action and provide them with phone numbers or e-mails of key school district staff. Let them know their voice will make a difference! (see the Downingtown Case Study on page 16)
WHO SHOULD JOIN YOUR COALITION?

PARENTS
Start with parents at your school. Ask them if they would be interested in getting together to talk about whether or not sweetened drinks should be restricted at school.

SCHOOL OFFICIALS
Talk to teachers, principals, food service directors and school nurses and see if they want to promote healthy beverages in schools.

FAMILY DOCTORS AND DENTISTS
Ask your own doctors if they would like to join, and solicit ideas about other doctors in the area who specialize in nutrition, obesity, diabetes or other diet-related problems.

STUDENTS
It would be ideal to be able to involve students who have an interest in healthy eating or who have overcome a weight problem. It can be very powerful to ask a student to testify at a public meeting or hearing, offering their own story.

LOCAL HOSPITALS
Call and ask to speak to a specialist on childhood obesity or diabetes. See if you can e-mail information to them about your coalition.

LOCAL COLLEGES, UNIVERSITIES, AND MEDICAL SCHOOLS
Someone may be doing relevant research on obesity or diabetes. Medical students are wonderful allies and can provide enthusiastic support.

Other resources include: County health departments, neighborhood associations and other local nonprofit groups, and church and faith-based groups
(See Appendix 2 for web links and resources of groups in Pennsylvania)

SAMPLE COALITION E-MAIL

From: Concerned Parent
Date: November 19, 2004 2:48:28 PM EST
To: "List Member"
Subject: Soda In Schools
Reply-To:

The Coalition for Healthy Children is working to reform our school's beverage policy in order to replace soda and other junk drinks with water, 100% fruit juice and milk. Soda consumption has been strongly linked to childhood obesity. I have attached a flyer that we are asking be circulated to as many contacts as possible. Is this something you could help with?

Thanks,
Your name
Contact info
I was on the “soda committee” for the Downingtown School District, which met in May of 2003. The soda committee was set up by the School District in response to pressure by parents to improve children’s diets, and consisted of parent representatives from nine of 13 schools, two high school students, three administrators, a physical education teacher, a food service employee and a school board member. The committee developed four recommendations. The recommendation which received the most votes was the one limiting the sale of soda to 30% of total offerings. Most of the parents were in favor of banning soda completely, while the students and food service employees were not.

I made the decision to push the board to go for the stronger recommendation of banning soda. After two years of building support, I thought we were ready. I asked parents to e-mail school board members and attend the next School Board Policy Committee meeting. I registered myself, and Dr. Tammy James (a health education professor), on the agenda to speak. I called each board member to speak to them about the issue so I would know how to address their concerns. Parents did a great job and sent e-mails and showed up at the meeting. There were only two parents who spoke in opposition, with students’ “freedom to choose” being the issue.

The Policy Committee decided to uphold the committee’s recommendation of limiting offerings and to pass it on to the full board for a vote. Parents really came through and e-mailed all of the board members sitting on the fence; some made personal phone calls as well. School Board member Dr. Kim Brown worked hard advocating for a complete ban of soda. At the full board meeting, we had a great turnout and many parents gave very persuasive testimony. The class president, who was against a ban, spoke and unwittingly helped make the case against soda saying, “Every once in a while I need a jolt of caffeine and I deserve to have it!” He also brought up the fact that student council split the profits from the vending machines with the district.

Our hard work paid off at the school board meeting and they voted to get rid of soda during the school day; a 7-1 vote with one member absent. The 30% limit on soda was brought to the floor and Dr. Brown made a motion to amend it to “no soda during the school day.” Next on the agenda: snacks!
MEET WITH SCHOOL DISTRICT OFFICIALS 
AND THE FOOD SERVICE DIRECTOR

A well-planned meeting between school district officials and key members of your coalition will help to clearly state your position on the proposed new policy. Here are some steps.

**STEP 1** - Discuss your concerns about student health and share data you have gathered. (Appendix 8 - Fact Sheet: How to set-up and run a successful meeting).

**STEP 2** - Explain your reasons for requesting a new policy.

**STEP 3** - Discuss a model policy (see sample on page 8).

**STEP 4** - Ask if the school district has a contract with a beverage supplier and when it is up for renewal (this could influence how you plot your timeline).

**STEP 5** - Request a timely response to your coalition’s concerns.

**STEP 6** - If efforts to meet are rebuffed, investigate possibilities to speak at your school board meetings (many are open to the public and allow anyone to speak).

**STEP 7** - Be prepared to counter arguments against changing the policy (Appendix 9 - Fact sheet: Simple answers to common soda industry arguments).
CONTACT THE MEDIA

Both childhood obesity and school beverage policies are hot topics for the media. Your goal should be raising awareness with local newspapers, radio and television outlets to demonstrate that parents want schools to sell only healthy beverages to their children. Don’t be intimidated by contacting the media. Reporters will be very interested in this story.

The Philadelphia Inquirer

Philae. to ban soda sales in schools

Money for nothing

Vallas has the right idea in expelling sodas and snacks from school buildings.

Are sodas a scourge? Well, no. And imagine the innocent pleasures of opening an ice-cold soda in the middle of a hot summer day. But when these pleasures are consumed in excess, the negative health consequences are evident. The problem is that sodas are often consumed in excess. Indeed, the American Heart Association recommends that adults limit their intake of sugar-sweetened beverages to one serving per day, but in reality, the average American consumes two to three servings per day.

The Philadelphia Inquirer

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HERE’S HOW TO GET STARTED

STEP 1 - In Pennsylvania, you can point to a great model to help make your case for your own locality -- Philadelphia! Find reporters who cover health and ask them to investigate why Philadelphia is moving ahead in dealing with the epidemic of childhood obesity, but your school district is not. Contact local newspapers and editorial boards and let them know that you have parents and medical experts who are available to discuss their concerns about sweetened beverages in schools. Tell them about your plans to call for hearings and reform the school vending policy. Keep your media contacts alerted on a regular basis.

STEP 2 - Develop a list of coalition members who can speak to the media.

STEP 3 - Keep a list of key media contacts (Appendix 10 - Fact Sheet: Contacting the media).

STEP 4 - Have coalition members send letters to the editor or submit op-ed pieces to local newspapers (Appendix 11).

STEP 5 - Send press releases at key points in your campaign (Appendix 12 - Sample press release).

STEP 6 - Invite the media to any event where citizens will be speaking on this topic, such as school board meetings or hearings (Appendix 13 - Sample media advisory). When they arrive, make sure to greet the reporters and give them a flyer. After the school board meeting, be prepared to speak with the media to provide additional comments and answer their questions.

STEP 7 - Create good visuals! A jar filled with sugar that equals the amount of sugar children get each week by drinking soda is a good visual for media events and when speaking to school boards. (see below: How to make a sugar jar visual)

STEP 8 - Follow-up! Touch-base with key media contacts throughout your campaign, keeping them informed of any local developments as well as other major news on obesity or school beverage policies from other communities.

STEP 9 - Save your news clips and make copies. These can be distributed to elected officials and school board members. (Check the CD for press clips)

CREATE A VISUAL: MAKE A SUGAR JAR!

1. Buy a 16 oz. mason jar or find a used mayonnaise jar.

2. Fill it with 2 cups of sugar

3. Label it: 2 cups of sugar = Average amount of sugar children get from soft drinks during a school week.

4. Bring it to school board meetings and other events.
INFORM YOUR ELECTED OFFICIALS

Enlisting your elected officials to join your coalition, sending a letter to school board members and testifying at a hearing can make a difference in reaching your goal. Elected officials like to hear from their constituents and may be very willing to help.

HERE'S HOW TO GET STARTED

**STEP 1 -** Educate your local elected officials on the need for healthier beverages in schools. (Appendix 8 - Fact Sheet: Setting up a meeting).

**STEP 2 -** Provide your elected officials with informational materials and a list of your coalition members.

**STEP 3 -** Ask your elected officials for help in calling for school district hearings on a beverage policy.

**STEP 4 -** Ask your elected officials to send a letter to the school superintendent asking for a healthy beverage policy. (Appendix 14 - Sample letter from Speaker John Perzel).

**STEP 5 -** Ask your elected officials to pass a resolution calling on the school district to implement your policy. (Appendix 15 - Sample resolution).

**STEP 6 -** Follow-up with staff contacts in your elected official's office.

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INFORM YOUR ELECTED OFFICIALS. SPEAK AT SCHOOL BOARD HEARINGS.

A school board meeting that allows public comment is a good way to get your message heard. You may also be successful in calling for a special public hearing on a healthy beverage policy or on a more general topic like school nutrition before the school board. Preparing for both of these opportunities is similar. However for a formal hearing that focuses on your proposal, you will want to pull out all the stops and make sure you have plenty of speakers ready to testify. A school board meeting is less formal, but good preparation is just as important.

Parent Poll
• Parents overwhelmingly (88%) feel that vending machines should contain only water and juice.

HERE’S WHAT TO DO

**STEP 1** - Call the district and find out the procedures for speaking at a school board meeting or hearing. Usually the district will ask you to register as a speaker in advance. There is a fixed amount of time you can speak and you will need to bring a specific number of copies of your statement.

**STEP 2** - Organize members from your coalition to testify. Ensure a good mix of medical professionals, parents and other advocates. Ask your coalition members to provide speakers from their respective organizations. If you are planning for a hearing, invite local politicians who support your position to testify as well.

**STEP 3** - Coordinate who will address which issues - so as not to duplicate testimony and to ensure that all key points are addressed. (Appendix 16 - Sample testimony).

**STEP 4** - If possible, collect written testimony from all speakers a few days in advance and provide feedback to them to make certain all important points are covered appropriately.

**STEP 5** - Alert the media of the hearings and about which community members will be speaking.

**STEP 6** - Follow-up with the media at the conclusion of the meeting and the next day, for additional comments and to answer questions.
CHAPTER 10
Reaching Your Goal: a Healthy Beverage Policy

DEVELOP AND GAIN PASSAGE FOR A HEALTHY BEVERAGE POLICY

**STEP 1-** Work with the school officials to ensure that the final policy meets community standards and their own governance policies.

**STEP 2-** Petition the school board to enact a policy based on the coalition’s recommendations and testimony (Appendix 17 - Sample petition).

**STEP 3-** Keep the media informed at each step as you near a final decision.

**STEP 4-** Inform your coalition and the media of your success - or further actions that are needed.

**STEP 5-** If the policy passed by the school district does not meet the coalition’s goal, don’t give up. Continue your efforts! The media should be contacted immediately and elected officials that have been on your side should be informed. Don’t settle for a weak policy.

**STEP 6-** Don’t forget to thank everyone involved for their hard work!
A PERSONAL STORY
EXCERPTED FROM AN OP-ED BY MATT OSTER,
A MEDICAL STUDENT AT UPENN.

The School Reform Commission of Philadelphia is currently considering an exclusive contract for its vending machines in schools. As a medical student, future pediatrician, and survivor of obesity, I applaud Mr. Vallas’ leadership in calling for all beverages to be sold in schools to be of nutritive value. I am asking the School Reform Commission to join Mr. Vallas by ensuring that soda and other high sugar, empty calorie beverages, are not sold to our children.

I want to share my personal story of living with obesity. When I was growing up, I was always one of the biggest kids around. I wore “husky” pants, I was the “anchor” in tug-of-war, and I was often called “Fat Matt.” When I got to college, I was 210 pounds and 5’8”, which translates medically to obese.

I decided that I needed to make a significant alteration in my diet. One of the first steps that I took was to cut out all sodas and unhealthful snacks. No more Coke, no more Pepsi, no more Doritos, and no more cookies. While cutting out sodas and unhealthful snacks wasn’t the only step, it was certainly one of the biggest. In six months I had lost 25 pounds. One year later I had lost an additional 25 pounds. That’s right, I lost 50 pounds in a year and a half, and I would not have been able to do that while still drinking sodas and eating unhealthful snacks.

Today, I am happy to say that I have been able to keep off that weight, and am holding steady at 160 pounds.

As a 4th year medical student at the University of Pennsylvania, I have unfortunately already had the opportunity to treat many adolescents who are afflicted by obesity. I still am amazed by the number of teenagers that I’ve seen diagnosed with adult-onset diabetes, a condition that used to only affect those who were much older but is now becoming more and more common in overweight adolescents.

Does stopping soda really make a difference? Yes. For proof, consider this:
1. One can of soda has 140 calories.
2. Approximately 3500 calories equals 1 pound.
3. In one school year, a person who consumes just one can of soda per school day, consumes 25,200 extra calories.

This translates to 7.2 extra pounds of weight that a student adds on per year just by consuming one can of soda per school day. THAT’S OVER 50 POUNDS IN JUST 6 YEARS! Non-carbonated, high sugar drinks are equally as harmful, or perhaps more so, because the labels often have pictures of fruit that trick youngsters into believing they are getting a healthy drink.

When I treat patients with obesity, I often wonder if my counseling efforts really make a difference. By banning the sale of sodas and unhealthful snacks in schools, the Philadelphia School Commission undoubtedly will be making a significant difference in the lives of children. They have an amazing opportunity, and I believe duty, to do something wonderful for these kids. Don’t pass it up. I wish that someone had taken this step when I was growing up.


14 Ibid.


16 Whitney, Hamilton, Rolles. Understanding Nutrition. 5th Edition. [Note: Do you have publication place, date and better author citation?]


18 Ballew, Kuester, Gillespie, Arch. Pediatric Adolescent Medicine vol. 154 pg. 1148 to 1152, Nov. 2000 [Do you have better info on author’s names?]


25 National Center for Health Statistics, NHANES III


32 Ibid.


In the News…

“How much would Starbucks be willing to pay to be the official wake up drink of the Philadelphia schools?”

- Rick Nichols, Philadelphia Inquirer, May 22, 2003
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