



**Healthy School Food**  
M A R Y L A N D

## Primary and Secondary Education – Health and Safety – Sugar-Free Schools Act

[HealthySchoolFoodMD.org](http://HealthySchoolFoodMD.org)

### Background

The American Heart Association (AHA) recommends that children ages **4-8 consume no more than 3 teaspoons** and **pre-teens and teenagers consume no more than 5-8 teaspoons of added sugar daily**. Sugar consumption is correlated with increased rates of diabetes, as well as obesity, which contributes to numerous health problems, including heart disease, stroke, high blood pressure, cancer, gallbladder disease and gallstones, osteoarthritis, gout, sleep apnea and asthma. Currently, **26% of Maryland's high school students are overweight or obese** (CDC, 2013). Obesity during adolescence has been shown to cause lifetime increases in rates of cardiovascular disease and adverse psychosocial consequences for women, including completion of fewer years of education, higher rates of poverty and lower rates of household income. In addition, a growing body of research suggests that **obesity is associated with poorer academic performance** beginning as early as kindergarten. USDA regulations mandate that competitive foods sold in schools (foods sold outside of federally reimbursable meals) contain no more than 35% sugar by weight. However, **there is no limit on sugar in foods sold as part of federally reimbursable meals**, and when you combine several food items containing sugar sold in schools, you can quickly surpass AHA recommendations on added sugar. For example, a typical breakfast in many Maryland counties (and used in the breakfast in the classroom program) consisting of a **cinnamon roll and chocolate milk** (to which fruit and juice may be added) contains **21 grams of added sugar, or 5 teaspoons**. Or, a child buying a reimbursable lunch with a chocolate milk who then purchases a cookie or an ice cream a la carte could easily surpass these recommended maximum levels of added sugar.



### Purpose of the Bill

- This bill would require school districts to come up with a plan for reducing total sugar intake per meal for any child based on the recommendations of the American Heart Association.
- School districts would be required to form a committee to write this plan and invite the general public, including any interested stakeholders, such as parents, students, educators, medical professionals and non-profit organizations, to sit on this committee.
- Plans would be required to be opened up for public comment for an appropriate period of time and publicized to parents.

### Benefits to Our Children and Families

- Many parents trust that schools are providing their children with healthy meals but do not

realize the amount of sugar that children have access to at school. This would help parents reduce the amount of sugar that their children are consuming overall.

- Parents would participate in the process of developing these regulations for their districts, thereby maintaining local control while addressing an issue of concern.
- 44% of Maryland's public school children are eligible for Free or Reduced-price Meals. These children eat up to 3 meals a day at school, including breakfast, lunch and suppers provided with after-school programming. Reducing sugar in school food will have a significant impact on these most vulnerable children.

### Benefits to Maryland's Economy

- If the Body Mass Index of Marylanders was lowered by 5 percent, Maryland could save 7.6% in health care costs, which would equate to savings of \$13,836,000,000 by 2030.
- The number of Maryland residents who could be spared from developing new cases of major obesity-related diseases includes:
  - 158,413 people could be spared from type 2 diabetes,
  - 129,330 from coronary heart disease and stroke,
  - 126,707 from hypertension,
  - 70,406 from arthritis, and
  - 10,841 from obesity-related cancer.

### Responses to Potential Criticism

- *We can't keep track of what every child is eating.* **Response:** There are many ways that school systems can approach this issue. While some school districts may have the resources to purchase software that monitors sugar intake by student, other districts may use simpler systems to limit sugar intake. This may mean removing a la carte items from sale that contain sugar, limiting sales of flavored milks, limiting a la carte purchases by child, only serving sugary breakfast items with white milk, or purchasing items with reduced sugar. These types of changes have been made to reduce fat intake and they can be made for sugar.
- *School districts don't know how much sugar is added to products because it is not listed on the product labels, only total sugar.* **Response:** Because added sugars are not yet listed on product labels, this law suggests working from the perspective of reducing total sugar intake. However, it is not difficult to deduce approximate added sugars in food items.
- *School systems have had to make a lot of changes recently, so now isn't the time to impose a new burden on them.* **Response:** Now is exactly the time. Recent research connecting sugar to obesity and diabetes and the current epidemics of both of these illnesses mean that we can no longer wait to take action.

#### Healthy School Food Maryland coalition partners:

Brickyard Educational Farm  
Center for Science in the Public Interest  
Coalition Halting Obesity Everywhere in Children  
(CHOICE)  
Crossroads Community Food Network  
First Bites  
GrowingSoul

Healthy Kinder, Inc.  
Maryland Environmental Health Network  
Montgomery County Sustainability Network  
Montgomery Victory Gardens  
Prince George's County Food Equity Council  
Real Food for Kids - Montgomery  
Safe Grow Montgomery  
Student Section of the Maryland Public Health  
Association  
Young Activist Club