

HOW “SWEET” IT ISN’T

The Sugar Sweetened Beverage Tool Kit for Park & Recreation Agencies

Enter a community center, swimming pool, senior center, etc. and you will likely see a vending machine or a concession operation that offers sugar sweetened beverages.

Our message must be clear: parks and recreation supports healthy lifestyle choices. Providing access to sugar sweetened beverages is counter-intuitive to advocating and facilitating healthy lifestyle choices.

Jane H. Adams,
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ROLE OF PARKS AND RECREATION IN HEALTH PROMOTION

Why should park and recreation agencies get involved in reducing the consumption of sodas and sugar sweetened beverages? The critical role of parks and recreation in health is now well documented.

Through parks, open space, trails, playgrounds, facilities, programs, special events, and services, local park and recreation agencies throughout the state are in the health “business.” Parks and recreation agencies provide the infrastructure to support positive health outcomes. Parks Make Life Better!® is our message and it must be communicated through marketing, programs, policies, and the physical environment. Park and recreation agencies have an important role in making it easier to access healthy drinks and foods and to be physically active. Park and recreation agencies must model environmental changes to provide healthy food choices and physical activity.

This Tool Kit presents research and facts about the impact of sugar sweetened beverages, action steps, and resources so every park and recreation agency can take action and communicate its role in supporting healthy lifestyle choices.

SUGARY DRINKS AND OBESITY

Obesity is the most serious public health problem of our time. Thirty-eight percent of school children¹ and 60% of adults in California are overweight or obese,² putting them at increased risk for life changing conditions such as preventable diabetes, asthma, cardiovascular disease, depression, and some cancers.

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Health impacts associated with obesity place a financial burden on families, employers, and the state due to increased health care costs. Obesity is the biggest cause of disabilities, loss productivity, and depression and more money is spent on obesity related health issues than health care dollars spent due to smoking. Obesity and physical inactivity cost California and estimated \$53 billion annually.³

While the *Dietary Guidelines for America 2010* recommends discretionary calories (both sugar and fat) of 5-15% per day, recent analyses show children and adolescents get 16% of their calories from added sugar and adults get 13% of their calories from added sugar.⁴ Research shows sodas are the leading source of added sugars for adults age 18-54⁴ and that 40% of sugar calories consumed by children and adolescents comes from sodas and other sugary beverages.⁴

A recent California study shows that consumption of soda and other sugar sweetened beverages is linked directly to higher levels of obesity:

- Over 10.7 million Californians over age 1 drink at least one soda or other sugary beverage daily;
- 41% of children ages 2-11; 62% ages 12-17; and 24% of adults drink one soda or other sugary beverage daily, with consumption varying widely by county and city⁵;
- Children who drink one or more sugar sweetened beverages per day have a 55% greater chance of being overweight or obese.⁶

CALIFORNIA LAWS SUPPORTING HEALTHY BEVERAGES & WATER

The California Legislature has enacted several laws which make it easier for government agencies to create policies regarding access to healthy beverages and water.

- Senate Bill (SB) 677 – enacted in 2003, eliminated the sale of soda and other sweetened beverages on elementary and middle school campuses
- SB 965 – enacted in 2005, eliminated the sale of soda and other sweetened beverages on high school campuses
- SB 12 – enacted in 2005, established nutrition standards for food sold anywhere on a California school campus outside of the school meal program, including in vending machines or school stores, or as part of a school fundraiser
- SB 1413 – enacted in 2010, requires schools to provide free, fresh drinking water during meals

DEFINITION OF TERMS

Sugar Sweetened Beverage (SSB) = category of non-alcoholic beverages (i.e., sodas, sports drinks, electrolyte drinks, sweetened tea, fruit-flavored drinks and punches) that contain added sugar, high fructose corn syrup or other caloric sweetener.⁷ SSB are the main source of added sugars in children's diets.

Sports Drinks = dietary supplement for athletes meant to address certain sports-related physiological and nutritional needs. Designed for athletes or others needing to replace electrolytes lost or used during prolonged physical activity. Sports drinks contain as much as 5 teaspoons of added sugars, 200 milligrams of sodium, and 80 calories per 8 ounces.⁷

Water = still or carbonated water without sweeteners, flavoring or additive or stimulants.

Sweeteners = caloric or non-caloric sweeteners (sucrose, high fructose corn syrup, honey, evaporated cane juice, sucralose, aspartame, PureView).

Between 1977 and 2000, Americans consumed 250-300 more calories a day; 43% of those were from sugary drinks alone. A 32 ounce sports drink contains 14 teaspoons of sugar which is equal to 22 Starburst® candies. Adolescents now obtain 10 to 15% of their caloric intake from SSBs. The average American consumes 45 gallons of SSBs annually. To "burn off" the 150 calories in a 12 ounce can of soda, a person needs to walk briskly for 30 minutes.

In 2010, the *California Obesity Prevention Plan: A Vision for Tomorrow, Strategic Actions for Today*, identified specific strategies to reduce sugar sweetened beverage consumption:

1. Adopt state and local policies that limit access to sugar sweetened beverages
2. Establish standards for food/beverages available at government run recreation centers, parks, and other public facilities
3. Address food and beverages in workplace sites, meetings and events
4. Eliminate electrolyte replacement beverages (sport drinks) during school days at public middle and high schools

TAKE ACTION

Our ultimate goal is to create an environment that supports health. A multipronged approach is beneficial and can include education, access, and collaboration. Ultimately foods and beverages bought with government funds and/or sold on government property should be nutritionally dense and contribute to the health of children and adults.

1. Invite others to assist you in developing your policy, including doctors, nurses, public health professionals, teachers, county health officer, and youth serving organizations.
2. Review your agency's current practices regarding the availability of sugar sweetened beverages and water in your vending machines and concession operations. Inventory the current balance of SSB and non SSB in vending machines and concession operations.
3. Assess your agency's willingness to change its current practices. Can these practices be changed internally? Or do they require policy maker engagement?
4. Add healthy beverage literacy to programs for children and adolescents. There are a number of resources to assist you (see Resources).
5. Exclude (or limit availability) of soda and SSB in vending machines, concessions, programs, events, facilities, and parks.
6. Exclude (or limit availability) of soda or SSB advertising, marketing, or sponsorships at government sponsored events, facilities, and parks.
7. Adopt healthy procurement policies (including vending machines) for all beverages purchased with government funds.
8. Provide access to free, safe drinking water at parks, facilities, trails, playgrounds, etc.
9. Keep your message simple; the message is health!
10. Educate agency staff at all levels about this effort; pay particular attention to front line staff as they will receive the most comments / questions regarding any changes made in beverage options.
11. Provide bilingual materials.



POLICY RECOMMENDATIONS

*Recommendations for Healthier Beverages, 2013*⁸ calls for implementation of healthier beverages across a variety of places and environments, such as child-care and afterschool settings, schools, workplaces, parks, recreational facilities, government property and hospitals to improve the health of all Americans. The adoption of organizational policies and beverage standards creates an environment that supports health. Read CCPHA's model language for city and county food and beverage policy at http://www.publichealthadvocacy.org/_PDFs/soda/ModelLanguage_CityFoodAndBeverages.pdf. ChangeLab Solutions offers examples of healthy procurement agreements and tips for local governments.

The following are suggested as overall or general policy recommendations, recognizing that each agency will have its unique circumstances:

- 100% of beverages sold in vending machines on city/county/district property shall meet specified nutrition standards:
 - Water
 - 100% fruit / vegetable juice or fruit / vegetable juice combined with water or carbonated water (limited to maximum of 12 oz and with no more than 200 mg of sodium per container)
 - Low fat (1%) and nonfat milk with no added flavors
 - Non-dairy milks fortified with calcium and vitamin D (i.e., soy, rice and/or other similar milks) with less than 200 calories per container and with no added flavors
- Safe, free drinking water is required wherever beverages are sold or offered.

STANDARDS FOR BEVERAGES AT YOUTH-ORIENTED FACILITIES

It may be necessary to set different standards for facilities that are most frequently used by children, youth or teens (teen centers, skateparks, etc.), as opposed to facilities that are used by all age groups.

- Fruit and/or vegetable based drinks that are 50-100% real juice and contain no added caloric or non-caloric sweeteners
- Drinking water with no added caloric or non-caloric sweeteners
- 1% low fat or nonfat, non-flavored milk products
- Dairy alternative (soy) products (calcium and vitamin D fortified) that contain no more than 35% sugar by weight or contain no more than 3 teaspoons of sugar for one cup
- Fresh coffee and tea, and any unsweetened iced tea
- Water is required to be available in all vending machines

Excluded beverages:

- Regular and diet sodas
- Regular and diet sports drinks
- Energy drinks and vitamin waters
- Sweetened iced teas, lemonades, and punches
- Highly sweetened flavored milks

STANDARDS FOR BEVERAGES AT NON-YOUTH-ORIENTED FACILITIES

Standards for beverages at facilities that are not accessed by public nor oriented toward youth to include 75% healthy options such as:

- Fruit and/or vegetable based drinks that are 50-100% real juice and contain no added caloric or non-caloric sweeteners
- Drinking water with no added caloric or non-caloric sweeteners
- 1% low fat or nonfat milk products
- 1% low fat or nonfat flavored milk products with no more than 35% sugar by weight or contain no more than 3 teaspoons of sugar for one cup
- Dairy alternative (soy) products that contain no more than 35% sugar by weight or contain no more than 3 teaspoons of sugar for one cup
- Fresh coffee and tea, and any unsweetened iced tea
- No more than 25% of the items offered in vending machines may be diet sodas or other artificially sweetened beverages

Source: City of Bell Gardens

AGENCIES WHO HAVE WALKED THIS PATH

California park and recreation agencies have been improving access to healthy beverages for several years. Here is a sample of those who have successfully made the transition to providing healthy food choices in their facilities and programs:

- Baldwin Park
- Bell Gardens
- Brentwood
- Carson
- Chula Vista
- Davis
- El Monte
- Fort Bragg
- Huntington Park
- La Puente
- Long Beach
- Monterey County
- Mountain View
- Novato
- Pasadena
- Pico Rivera
- Rancho Cucamonga
- Redding
- Riverbank
- Sacramento
- San Fernando
- San Francisco
- San Jose
- San Pablo
- Santa Ana
- Santa Monica
- South El Monte
- Victorville
- Visalia
- West Sacramento

SUGAR SWEETENED BEVERAGE RESOURCE LIST

It is overwhelming to sort through the resources available on sugar sweetened beverages. Here is a preferred sample:

- California Campaign for Healthy Beverages
- California Center for Public Health Advocacy
- California Project LEAN
- Center for Science in the Public Interest
- ChangeLab Solutions
- Drink Water! Said the Otter (campaign for small children)
- Prevention Institute
- ReThink Your Drink (Center for Disease Control)
- Soda Free Summer Initiative (Alameda County Campaign)
- Strategic Alliance for Healthy Food & Activity Environments
- Yale Rudd Center for Food Policy & Obesity

“Parks recreation and community services professionals are the premier stewards of public health. Their vision, commitment, and services provide measurable health benefits.”

Dr. Harold Goldstein, Executive Director
California Center for Public Health Advocacy

MOVING FORWARD

The mission of parks and recreation clearly states “promote health and wellness”.⁸ The profession supports healthy lifestyles through a variety of facilities, programs, special events, and services, as well as adhering to non-smoking and alcohol consumption laws and ordinances. Yet, park and recreation agencies may not view making changes to beverage choices in their facilities and programs as “their job.” We believe it is when you consider the following:

- *The problem is well documented:* our health is being comprised by our environment
- *The research is compelling:* sugar sweetened beverages contribute to the over consumption of sugar in our diet
- *The solution is clear:* make it easy to make the healthy choice at parks and recreation facilities
- *The resources are plentiful:* talk to park and recreation agencies who have made the transition away from sugar sweetened beverages and the issues they faced along the way; use the research presented in this Tool Kit and available online; tailor the sample policies to fit your community’s culture

There will be detractors who will work to stop your efforts to reduce sugar sweetened beverages from your facilities, parks, events and programs. So remember a balanced approach and involving partners are smart strategies. Park and recreation agencies must be leaders in improving the community’s health.

FOOTNOTES

1. Babey SH, Wolstein J, Diamant AL, Bloom A, Goldstein H. A Patchwork of Progress: Changes in Overweight and Obesity Among California 5th-, 7th-, and 9th-Graders, 2005-2010. UCLA Center for Health Policy Research and California Center for Public Health Advocacy, 2011.
2. <http://apps.nccd.cdc.gov/brfss/display.asp?cat=0B&yr=2012&qkey=8261&state=CA>
3. The Economic Costs of Overweight, Obesity, and Physical Inactivity Among California Adults, —2006 (July 2009). The California Center for Public Health Advocacy.
4. NCHS Data Brief, No. 122, May 2010
5. <http://www.publichealthadvocacy.org/bubblingover.html>
6. Morenga LT, Mallard S, Mann J. Dietary sugars and body weight: systematic review and meta-analyses of randomised controlled trials and cohort studies. *Brit Med J.* Jan 15 2013;346.
7. Consumption of Sports Drinks by Children and Adolescents, Robert Wood Johnson Foundation, June 2012.
8. *Creating Community in the 21st Century, the VIP Action Plan*, California Park & Recreation Society.

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