Wellness Rules in New Jersey Schools

New Jersey Model School Nutrition Policy Guidelines



Sound Nutrition, Physical Activity and Academic Excellence

DIVISION OF FOOD AND NUTRITION

NEW JERSEY DEPARTMENT OF AGRICULTURE

New Jersey Action for Healthy Kids®

Wellness Rules in New Jersey Schools

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Wellness Rules in New Jersey Schools

About This Guide

- The guidelines included in this booklet are designed to help schools implement the New Jersey Model School Nutrition Policy, which New Jersey Administrative Code (N.J.A.C. 2:36-1.7) requires to be adopted by September 2007.

- The nutrition and physical activity standards are based on the 2005 Dietary Guidelines for Americans.*

- The implementation for the New Jersey Model School Nutrition Policy is presented in 8 steps. To facilitate policy implementation each step can be delegated to various individuals or groups of individuals.

- Many resources are available to help school districts implement local wellness policies. Helpful websites are included for your convenience as well as a list of definitions of key terms.

- The appendices at the end of the guide contain valuable information that will provide additional support for each of the 8 steps.

- Reproducible handouts are located in the Resources by Topic Section as a supplement to this guide.

*Enroll your school in Team Nutrition if not already enrolled. Team Nutrition can provide you with additional tips and tools as you improve your school nutrition and physical activity environment. Go to http://www.teamnutrition.usda.gov/. ***

NOTE: This resource kit may be reproduced for educational purposes.

*Go to www.health.gov/DietaryGuidelines/ for ***Dietary Guidelines for Americans 2005***.
***Appendix B:* **Team Nutrition Enrollment Form**

Wellness Rules in New Jersey Schools

Introduction

A new Federal Public Law (PL, 108.265 Section 204) requires that every school district offering Federal Meal Programs (*e.g. school breakfast, school lunch, special milk program*) must establish a Local School Wellness Policy by the beginning of the 2006–2007 school year. The legislation also places the responsibility of developing a wellness policy at the local level, so that the individual needs of each district can be addressed.

New Jersey Administrative Code (N.J.A.C.2:36-1.7) Local School Nutrition Policy requires child nutrition program sponsors and other public schools with 5% or more students eligible for free or reduced price meals:

- To adopt a Wellness/Nutrition Policy by September 2006
- To adopt the New Jersey Model School Nutrition Policy by September 2007

A difference can be made in the lives and futures of children through optimal nutrition in schools along with opportunities for behaviorally focused nutrition education and increased physical activity on a daily basis.

In order to ensure that children learn practical, life-long lessons about the balance of good nutrition along with the benefits of physical activity, teams of parents, pediatricians, registered dietitians, school board representatives, school staff and community leaders as well as the students themselves are needed to assist in changing the school environment to maximize positive outcomes.

Following the creation of the local school policy, one or more persons must be designated to oversee the implementation and evaluation of the policy recommendations.

The Local Education Agency (LEA) also must establish a plan for measuring implementation of the local wellness policy.

Wellness Rules in New Jersey Schools

Why do we need a School Wellness Policy?

1. Sedentary Lifestyle:
    - Suburban living—less walking / more driving
    - Increase in "Screen Time"—Computers, TV, Video Games
    - Decrease in physical activity
2. Over Consumption of Calories:
    - Increase in two-income families
    - Less time for meal planning, shopping and home cooking
    - Frequent dining out contributes to over consumption of large portions of high calorie, high fat, low cost "fast" foods
3. Overweight and obesity is increasing in the USA along with many associated diseases such as Type 2 diabetes, high blood pressure, high cholesterol and heart disease which may lead to heart attack and stroke. *
4. The treatment for adult overweight and obesity through exercise and diet has resulted in poor outcomes with only a small percentage able to maintain a significant long-term weight loss.
5. Percentage of overweight children has been increasing in the USA. Overweight children will likely become overweight adults.*
6. US Government declared Childhood Obesity an epidemic in 1998. In 2001 US Surgeon General issued a "Call To Action to **Prevent** and Decrease Overweight and Obesity" resulting in:
    - Intense focus on child wellness within programs such as WIC, Headstart, Cooperative Extension, School Lunch, etc.
    - Funding for research and community action programs
    - Numerous free educational resources promoting healthy lifestyles
7. USDA Mandate: Every school receiving child nutrition funding is required to have a wellness policy.
   New Jersey Mandate: ***New Jersey Model School Nutrition Policy must be adopted by September 2007.***

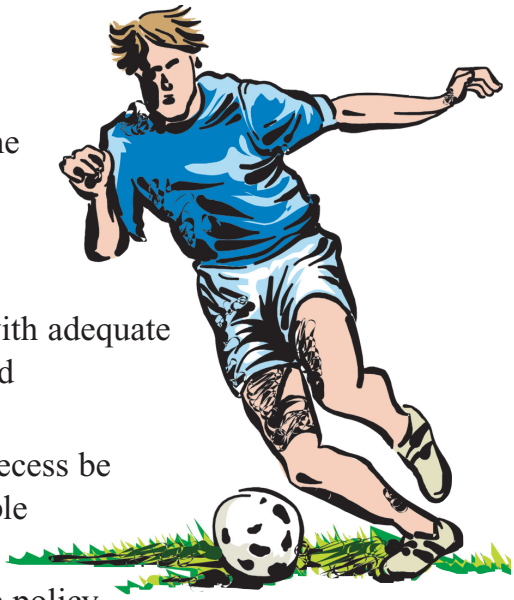
Appendix C:* **What The Research Tells Us: NHANES Study; Obesity in New Jersey / Health Data Fact Sheet

Wellness Rules in New Jersey Schools

Board Of Education Mission Statement on Student Wellness

The New Jersey Model School Nutrition Policy* has been developed as a valuable tool to help foster active, healthy lifestyles in New Jersey children. Through this policy the Board is dedicated to:

- Provide students with healthy, nutritious foods
- Encourage the consumption of fresh fruits and vegetables, low fat milk and whole grains
- Support healthy eating through nutrition education
- Encourage students to select and consume all components of the school meal
- Provide students with the opportunity to engage in daily physical activity
- Provide a pleasant dining environment with adequate time allowed for student meal service and consumption
- Recommend that physical education or recess be scheduled before lunch, whenever possible
- Ensure that school staff has the necessary skills needed to implement the policy
- Expand awareness about the policy to students, parents, teachers, and the community at large











Appendix A:* **New Jersey Model School Nutrition Policy

Wellness Rules in New Jersey Schools

Snapshot of the New Jersey Model School Nutrition Policy

All Grade Levels

Promote	Prohibit
• Fresh Fruits & Vegetables • Low Fat Milk • Whole Grains • Physical Activity • Nutrition Education • Recess before lunch • Adequate time for student meals • Purchase of products without trans fats	• Foods of Minimal Nutritional Value • All forms of candy • Items listing sugar as first ingredient

Snack & Beverage Standards: All Schools

Total Fat per Serving *(except nuts & seeds)*	**Saturated Fat per Serving**	**Serving Sizes** *(except water & milk with 2% or less fat)*
No more than 8 grams	No more than 2 grams	No more than 8 oz whole milk
		No more than12 oz all beverages

Snack & Beverage Standards: Elementary Schools—100% Rule

- All beverages offered shall be:
  - Milk
  - Water
  - 100% Fruit or Vegetable Juice
- All snacks, ice cream, frozen desserts shall meet above standards

Snack & Beverage Standards: Middle & High Schools—60/40% Rule

- At least 60% of all beverages offered (other than milk and water) shall be 100% fruit or vegetable juices
- No more than 40% of all ice cream / frozen desserts may exceed the above standards for fat and saturated fat
- All snacks shall meet above standards

Wellness Rules in New Jersey Schools

Overview of the New Jersey Model School Nutrition Policy

Who must comply?

1. All public schools with 5% or more students eligible for free or reduced price meals

2. All public and non-public schools if they participate in **any** federally funded reimbursable Child Nutrition Programs:

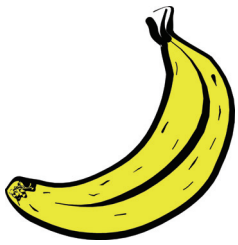
   School Breakfast **School Lunch** **Special Milk Program**

What does the policy apply to?

1. All snacks and beverages sold or served anywhere on school property during the school day including the following venues:
   a. Vending machines
   b. Snack bars
   c. Cafeteria a la carte lines
   d. School stores
   e. Fundraisers

2. Food and Beverages **not regulated** by the USDA Child Nutrition Program Regulations*

3. Federally funded After School Snack Program

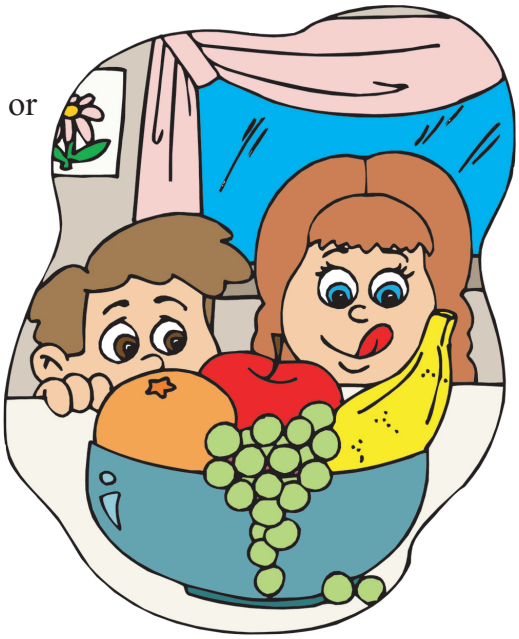




**Food and beverages offered as components of the reimbursable meals (School Breakfast, School Lunch) continue to meet Federal nutrient standards as required by USDA Child Nutrition Program Regulations.*

Wellness Rules in New Jersey Schools

Overview of the New Jersey Model School Nutrition Policy
(continued)

What items may not be served?



The following items **may not** be served, sold or given out as free promotion anywhere on school property during the school day:

- Foods of Minimal Nutritional Value **(FMNV)** as defined by USDA*
- All foods and beverages listing sugar, **in any form**, as the first ingredient
- All forms of candy

What items should be served less?

Schools shall **reduce the purchase** of any products containing **trans fats****



**Appendix H:* **Foods of Minimal Nutritional Value (FMNV)*
***Appendix D:* **Fat Facts**

Wellness Rules in New Jersey Schools

Steps to Implement the New Jersey Model School Nutrition Policy

STEP 1:
Identify and eliminate restricted items in the school environment

A. **RESTRICTED ITEMS**—Foods of Minimal Nutritional Value (**FMNV**)* as per USDA regulations:

- Soda water
- Water ices
- Chewing gum
- Hard candy, jellies and gums
- Marshmallow candies
- Fondants
- Licorice
- Spun candy
- Candy coated popcorn

Recommendations—Offer a variety of healthy snack/beverage alternatives from the My Pyramid food groups. **

- **Fruit Group**—Apples, grapes, orange slices, mixed fruit cup, canned fruits in light syrup or natural juice, unsweetened applesauce, 100% fruit juice
- **Vegetable Group**—Baby carrots, celery sticks, cucumber slices, sliced red or green peppers, 100% vegetable juice
- **Grains Group**—Whole grain crackers, air popped low fat popcorn, trail mix, pretzels, as well as certain baked snacks and low-fat bakery items
- **Milk & Milk Products Group**—Low fat yogurt / low fat frozen yogurt, low fat pudding, low fat cheese / low fat string cheese
- **Meat & Beans Group**—Nuts, seeds, peanut butter, hummus

Key Definitions* **(FMNV)
***Appendix E:* **My Pyramid**

STEP 1: *(continued)*
Identify and eliminate restricted items in the school environment

B. **RESTRICTED ITEMS—Products with sugar in any form as the first ingredient.**

Recommendations—Be informed and recognize sugar terminology.

Other names for Sugar include:	
Sugar	Dextrin
Corn syrup	Malt
Fructose	Maltose
High fructose corn syrup	Maple syrup
Galactose	Molasses
Glucose	Sucrose
Lactose	Honey

TEST YOUR KNOWLEDGE

Question: Can this product be sold or served?
Read the ingredients listed on the sample label (below).

SAMPLE LABEL:

Ingredients: Filling (high fructose corn syrup, corn syrup, apple puree concentrate)

Answer: NO, the first ingredient in the filling is high fructose corn syrup, which is a form of sugar.

If the first ingredient is filling it is usually followed by a parenthesis listing the filling ingredients.

Wellness Rules in New Jersey Schools

STEP 1: *(continued)*
Identify and eliminate restricted items in the school environment

C. RESTRICTED ITEMS—Candy in any form.

Recommendations—Read nutrition facts label.

- Do not be misled by deceptive food labels exaggerating healthful ingredients. Many processed foods contain token amounts of healthful ingredients highlighted on labels and are typically loaded with fats, refined sugars, refined flour, and / or salt, in various combinations.
- Do not rely on pictures of fruits and vegetables on packages.
- Compare labels from different manufacturers.
- Compare labels from the same manufacturers as they may change.
- "Fruit Snacks" *(example below)* cannot be sold. *(Exception: "Fruit Snacks" that are approved and qualify as a fruit component for the USDA reimbursable meal)*

NUTRITION FACTS: FRUIT SNACKS

Serving size 12 pieces (30g)

Servings per container about 2.5

Amount per serving

Calories 90

	% Daily Value*
Total Fat	0g 0%
Sodium 15mg	1%
Total Carb 22g	7%
Sugars 16g	
Protein 1g	0%
Vitamin C 25%	

Not a significant source of calories from Fat, Sat Fat, trans fat, Cholesterol, Dietary Fiber, Vitamin A, Calcium and Iron,

*Percent Daily Values based on 2,000 calorie diet

Ingredients: Corn Syrup, Sugar, Fruit Juices from Concentrate (grape, strawberry) Modified cornstarch, artificial flavor, hydrogenated coconut oil*, ascorbic acid(vitamin)Carnauba Wax.

Note: servings = 2.5 per pkg
Calories = 90 x 2.5 = 235 total calories if entire bag is consumed.

Note: The first and second ingredients are Sugar (in the form of corn syrup) and sugar.

STEP 1: *(continued)*
Identify and eliminate restricted items in the school environment

D. RESTRICTED ITEMS—Trans Fats / Reduce the purchase of any products containing trans fats.

Trans Fats:

- raise unhealthy LDL cholesterol
- lower healthy HDL cholesterol

Recommendations—Know how and where to find trans fats.* Trans fat can be found in foods and processed foods that contain partially hydrogenated oils such as:

some margarines	shortenings	crackers
candies	baked goods	cookies
snack foods	fried foods	salad dressings

- When comparing foods, look at the Nutrition Facts panel *(example below)* and choose the food with the lower amounts of unhealthy saturated fat and trans fat. You will find trans fat listed on the Nutrition Facts panel directly under the line for saturated fat.
- Limit palm oil because many food processors are seeking to eliminate trans fat by switching to palm oil. Coconut, palm oil or palm kernel oil contain a high amount of unhealthy saturated fat. These may be listed under "ingredients".

Nutrition Facts

Serving Size 1 cup (228g)
Servings Per Container 2

Amount Per Serving	
Calories 250	Calories from Fat 110
	% Daily Value*
Total Fat 12g	**18%**
Saturated Fat 3g	**15%**
Trans Fat 3g	
Cholesterol 30mg	**10%**
Sodium 470mg	**20%**
Total Carbohydrate 31g	**10%**
Dietary Fiber 0g	**0%**
Sugars 5g	
Protein 5g	
Vitamin A	**4%**
Vitamin C	**2%**
Calcium	**20%**
Iron	**4%**

Appendix D: **Fat Facts**

Note: Even if a product lists no trans fats in the Nutrition Facts panel, check the ingredients list for hydrogenated oils. Any oil that has been partially hydrogenated will contain trans fats.

Example:
INGREDIENTS: Peanuts, Sugar, Partially Hydrogenated Vegetable Oils (Rapeseed, cottonseed and soybean), Palm Kernel Oil, Brown Sugar, Baking Soda, Corn Syrup, Dehydrated Milk.

Steps to Implement the New Jersey Model School Nutrition Policy

STEP 2: Understand Nutritional Standards for Snacks and Beverages

To determine if a snack item meets the policy's nutrition standards, use the Nutrition Facts label on the package.*

A. All Schools

1. Snacks

Maximum amount per serving

Total Fat**	Saturated Fat
8 grams	**2 grams**
**except nuts and seeds	

2. Beverages

Maximum serving sizes

8 oz	12 oz	Unlimited
Whole Milk	All Other Beverages	Water 2%Milk 1% Milk Fat Free / Skim Milk

**Appendix F:* **Label Reading /Understanding Nutrient Standards / Label Reading Quiz*

Wellness Rules in New Jersey Schools

STEP 2: *(continued)*
Understand Nutritional Standards for Snacks and Beverages

B. Elementary Schools



1. **Beverages—100 % Rule**
   All beverages served will be limited to:
   - Milk
   - Water
   - 100% Fruit Juice
   - 100% Vegetable Juice

2. **Ice cream and Frozen Desserts**
   - No more than 8 grams total fat/serving
   - No more than 2 grams saturated fat/serving
   - Sugar cannot be first ingredient

C. Middle and High Schools

1. **Beverages—60 / 40% Rule*** *(Exclusive of Milk & Water)*

At least 60% of all Beverages:	No more than 40% of all Beverages:
100% Fruit or Vegetable Juice	Other Drinks such as Sports Drinks, Juice Drinks, Iced Tea

Example: For every 10 beverages served **except for milk and water:**
- 6 must be 100% Fruit or Vegetable Juice (60% of 10 = 6)
- 4 can be other beverages such as Iced Tea, Sports Drinks or Juice Drinks (40% of 10 = 4)

NOTE:
- Each flavor counts as a beverage type
- Each serving area must adhere to the 60/40 mix

Appendix G:* **HS & MS Beverage Chart (60/40 Rule)

Wellness Rules in New Jersey Schools

STEP 2: *(continued)* Understand Nutritional Standards for Snacks and Beverages



C. Middle and High Schools *(continued)*

2. Ice Cream & Frozen Desserts— 60/40 % Rule*

At least 60%	No more than 40%
Must meet standards** for • fat • saturated fat	May exceed standards** for • fat • saturated fat

Fats **** Remember Standards** **Sugar**

- Total Fat 8 grams or less per serving
- Saturated Fat 2 grams or less per serving
- Reduce Trans Fats
- No sugar as first ingredient (in any form)



Appendix G:* **HS & MS Ice Cream Chart - 60/40% Rule.
Available Resource: ***The "A" List of Acceptable Vending Items*** *listed by product and mfg.*
http://www.johnstalkerinstitute.org/vending%20project/healthysnacks.htm

Steps to Implement the New Jersey Model School Nutrition Policy

STEP 3: Make Special School Celebrations Fun and Healthy!

Although exempt from policy standards, with the exception of Foods of Minimal Nutritional Value*, school and classroom parties are yet another opportunity for students to experience the benefits of good nutrition and a healthy lifestyle. The following suggestions will help promote healthy celebrations during the school day:

- Combine student birthday parties into one monthly celebration.
- Always consider allergies, ethnic and medical food restrictions.
- Do not make food the main focus of the celebration.
- Suggest families send in small (non-food) grab-bag party favors.
- Include healthy snacks and physical activity.
- Play games and organize age appropriate activities such as "Simon Says", line dancing, karaoke, sing-a-longs, etc.
- Provide guidance to parents and families on foods that are appropriate for school celebrations that reflect reinforcement of the Local School Wellness Policy.
- Ask parents for suggestions and healthy recipes that can be shared with other families for school celebrations.
- Suggest that teachers reward the celebrating students with a free homework pass for their special day.

**Appendix H:* **List of Foods of Minimal Nutritional Value (FMNV)*
NOTE: See **Healthy Alternatives for Special School Celebrations/Classroom Parties . . .** in the Resources by Topic Section.

Steps to Implement the New Jersey Model School Nutrition Policy

STEP 4: Provide A Pleasant Dining Environment

Providing students with adequate time and a pleasant dining environment for meals is a step that schools can take in order to encourage healthy eating habits.

Here are some suggestions:

- Allow adequate time for meal service and consumption. About 10 minutes for breakfast and 20 minutes for lunch (after student is served and seated).
- Avoid long serving lines—consider "Grab n' Go" meal alternatives.
- Tables and chairs should be of the appropriate size for students.
- Seating should not be overcrowded.
- Try to provide round tables that create a sense of family and a relaxed environment for socializing.
- Keep noise levels within a comfortable range while not being too restrictive.
- Consistently reinforce rules for safe behavior.
- Clean tables and floors between lunch periods.
- Keep up with repairs to the physical structure.
- Avoid offensive odors (remove trash promptly).
- Protect confidentiality on eligibility for free and reduced price school meals.



- Invite ideas from students on how to decorate the dining room area to make it more appealing to them—consider a special project with the Art Department.
- Ensure that food service staff has the knowledge and skills to provide nutritious, palatable, safe meals and food and beverage options.

Steps to Implement the New Jersey Model School Nutrition Policy

STEP 5: Integrate Nutrition Education Messages Throughout the School

You can make a difference!

- Initiate policy and environmental changes that enhance and promote nutrition education for students.
- Utilize the services of a qualified nutrition professional* to ensure that staff is properly trained to deliver quality nutrition education.
- Integrate nutrition education into classroom curricula.
- Develop behaviorally focused, interactive lessons that target the importance of the various food groups, caloric, sugar and fat intake, healthy cooking methods and the relationship of a balanced diet and regular physical activity.
- Explore the role of media in marketing and food advertising with age-appropriate lessons.
- Provide consistent nutrition messages throughout the school that reinforce each other.
- Offer nutrition education in the school dining room as well as the classroom with coordination between the school foodservice staff and teachers.
- Use and display posters, videos, and websites on various nutrition topics.
- Participate in USDA nutrition programs such as "Team Nutrition".
- Promote nutrition education activities that involve students, parents and the community.
- Provide educational information to families about the benefits associated with healthy eating and regular physical activity.

For information on **science based nutrition education, always go to reliable sources such as: The American Dietetic Association, Public Health Agencies, Hospitals/Health Clinics, Government Sources, Universities and qualified nutrition experts such as Registered Dietitians (RD) and Extension Agents.*

NOTE: See **Nutrition Information and Curriculum Development** in the Resources by Topic Section.

Steps to Implement the New Jersey Model School Nutrition Policy

STEP 6: Promote health through physical activity

What can school administrators do?



- Initiate policy and environmental changes that enhance and promote physical activity for students both inside and outside of school.
- Provide training to enable teachers, coaches, recreation and health care staff as well as other personnel to promote lifelong physical activity among young people.
- Provide access to safe spaces and facilities and implement measures to prevent activity-related injuries.
- Schedule recess or PE for elementary grades, before lunch whenever possible.*
- Discourage the use or withholding of physical activity as punishment.*



- Offer after school programs and provide community access to school activity facilities outside of the normal school day.
- Develop strategies that will integrate school, parents and community in order to help young people adopt and maintain a physically active lifestyle. Initiate special programs and events that promote physical activity *(i.e. walk-a thons, walk to school days)*
- Evaluate physical activity instruction programs and facilities regularly.



Appendix I:* **Physical Activity / Recess

STEP 6: *(continued)*
Promote health through physical activity

What can teachers and coaches do?

- Go to the American Alliance for Health, Physical Education, Recreation and Dance (AAHPERD) for resources, support and professional development.
- Develop non-competitive activities for students who may not be athletically gifted.
- Emphasize activity and enjoyment over competition.
- Break up extended periods of inactivity (> 2 hours) with a 15 minute opportunity for physical activity *(i.e. walk, stretch, march in place etc)*.
- Schedule times for activity breaks such as:
    a. while taking attendance
    b. between lessons
- Incorporate physical activity into lesson plans.
- Refrain from using physical activity, such as doing push-ups or running laps, as punishment.
- Provide educational information to families about the benefits of regular physical activity and the health risks associated with a sedentary lifestyle.

What can parents or guardians do?

- Limit "screen time" (TV, computers, video games, etc).
- Play and be physically active with their children.
- Include physical activity in family events.
- Be a good role model by following a physically active lifestyle.
- Support and encourage their children's participation in physical activity.
- Volunteer to help their children's sports teams and recreation programs.
- Learn what their children want from physical activity programs and help them choose appropriate activities.
- Teach their children safety rules and make sure that they have the clothing and equipment needed to participate safely in physical activity.

NOTE: See **Physical Activity/ Recess** in the Resources by Topic Section.

Steps to Implement the New Jersey Model School Nutrition Policy

STEP 7: Communicate and Form Partnerships

Increase awareness, make the connection, solicit input and creative ideas, motivate and inspire, build a team, reach out for volunteers from the community.

Communicate With Whom?

- Teachers *
- Parents*
- Media
- PTA/PTO
- Healthcare Professionals
- Local Business & Industry Professionals
- Students
- Foodservice Administrators*
- Community Leaders
- School Board
- Nutrition Professionals

Communicate About what?

Creating a healthy school, home and community environment for the health and well being of all children in the district by encouraging good nutrition and physical activity on a daily basis.

Why?

"It Takes A Village" . . . schools cannot do it alone. Achieve maximum effectiveness by increasing awareness outside the school and into the home and community. Market your school wellness policy in order to obtain "buy- in" from stakeholders.

How?

- Solicit ideas and assistance according to the needs of your school district.
- Use the reproducible handouts included with this guide to promote better health for young people and gain support for this school wellness initiative.

YOU CAN—MAKE IT HAPPEN!

***NOTE:** See **Communication** in the Resources by Topic Section

Steps to Implement the New Jersey Model School Nutrition Policy

STEP 8: Evaluate and Measure Outcomes

Measure implementation of the policy by designating one or more persons with the following operational responsibilities:

1. Ensure that the school meets policy requirements.
2. Set goals and review periodically; determine what does / does not work and why.
3. Document professional preparation and development of school staff to meet criteria for implementation of policy:
   - Teachers—have skills to provide science based nutrition education to students.
   - Food Service Administrators—attend nutrition related seminars.
   - Food Service workers—have knowledge and skills to provide nutritious, palatable and safe meals & food and beverage options.
4. Conduct pre and post surveys with students and other stakeholders; document results.
5. Document communication to expand awareness of the policy to students, parents, teachers, the community-at-large, etc.
6. Indicate improvements to the dining environment and evaluate the time allocated for student mealtimes.
7. Evaluate time spent on nutrition education with methods of delivery.
8. Document the opportunity for daily physical activity.
9. Review snacks and beverages to determine if they meet the policy's nutritional standards in all venues.
10. List methods used to limit trans fats and promote the consumption of fruits and vegetables, low fat milk and whole grains.
11. Report on special school celebrations (survey teachers).
12. Create plans for continued improvement over time.*
13. Build awareness and support.

Appendix K:* **Wellness Policy Evaluation Tool
Suggested Resource: ***The School Health Index Self Assessment & Planning Guide***
www**.cdc.gov/nccdphp/dash/SHI/index.htm**
NOTE: see **Evaluation Tools** in the Resources by Topic section.

Definition of Key Terms

Adequate time (for meal service): The National Association of School Boards of Education (NASBE) recommends 10 minutes, after the student is served, for consuming breakfast and 20 minutes, after the student is served, for consuming lunch. *(Fit, Healthy, and Ready to Learn: A School Health Policy Guide, Part 1, Chapter E, page 18)*

A`la carte: Any foods or beverages sold in school cafeterias which are not a reimbursable meal.

Candy: Any food item that as served in its finished form contains, by weight 40% or more sugar and/or other sweetening agents, or any food product commonly referred to as "candy."

Curriculum related activity: Occasional activity, such as lessons on foods from other countries that include food items relating to a particular culture, which may also include classroom preparation and taste-testing.

FMNV (Foods of minimal nutritional value) Foods and beverages, as defined by USDA, that provide less than 5% of the Recommended Dietary Allowance (RDA) for each of the key specified nutrients per serving. Soda water (carbonated beverages), water ices, chewing gum, and certain candies are included in the list of FMNV. See *Appendix H* for specific list of FMNV items.

Fundraisers: Activities in which students or others sell products to raise money for the school.

Juice 100%: Full strength (100%) juice fresh, canned, frozen or reconstituted.

Juice Drinks: Diluted sweetened fruit or vegetable juice, or fruit and vegetable juice blend.

Definition of Key Terms

(continued)

Medically authorized special needs diets: Items given during the course of health care or as part of the student's Individualized Education Plan (IEP). Examples:

- cough drops given by a nurse
- high sugar product given to a diabetic student with low blood sugar
- candy given for behavior modification (per IEP) for special needs student

Milk:
Fat free milk: Pasteurized, homogenized fluid cow's milk containing less than 1% milk fat by weight.
Low fat milk: Pasteurized, homogenized fluid cow's milk containing less than 2% milk fat by weight. (contains at least 25% less fat compared to whole milk)
Whole milk: Pasteurized, homogenized fluid cow's milk containing 3.25% milk fat by weight.

School celebration: A classroom party for a student's birthday or a special holiday.

School day: Runs from the literal beginning of the day (i.e. 12 o'clock A.M., midnight) to the end of the academic day.

"Screen time": The time spent watching TV, on computers, playing video games.

Soda water: All carbonated beverages both sweetened and unsweetened.

Wellness: A way of living that emphasizes such preventive measures as eating a healthy diet, making exercise an enjoyable part of your life, and making self-care decisions that will actively improve the quality of your life.
(Reference: University of California, Berkeley/Wellness Letter)

Whole grains: Whole grains contain the entire edible part of any grain: wheat, corn, rice, oats, etc. Whole grain foods are important sources of vitamins, minerals and fiber.

Wellness Rules in New Jersey Schools

Useful Websites

The following lists provide web sites of numerous organizations which provide information, resources and educational materials pertaining to nutrition, physical activity and overweight for children and adolescents.

General Nutrition and Physical Activity

Action for Healthy Kids
http://www.actionforhealthykids.org/
American Alliance for Health, Physical Education, Recreation, and Dance
http://www.aahperd.org
American Dietetic Association
http://www.eatright.org
American Council on Exercise
http://www.acefitness.org
Center for Nutrition Policy and Promotion
http://www.cnpp.usda.com
Cooperative State Research, Education, and Extension Service
http://www.csrees.usda.gov/
—Rutgers Cooperative Extension Service
http://www.rce.rutgers.edu
—Rutgers Food Stamp Nutrition Education Program:
http://www.fsnep.rutgers.edu

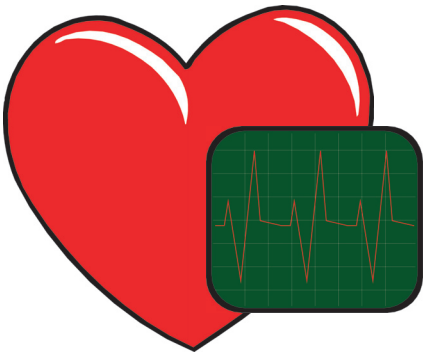


Food and Nutrition Information Center
http://fnic.nal.usda.gov/
International Food Information Center (IFIC)
http://www.ific.org
Maternal and Child Health Library
http://www.mchlibrary.info/Aztopics.htm
National Academy of Science/Food and Nutrition Board
http://www.nas.edu
National Agricultural Library Food and Information Center
http://www.nal.usda.gov/fnic
National Association for Health and Fitness
http://www.aahperd.org
National Dairy Council
http://www.nationaldairycouncil.org
National Recreation and Park Association
http://www.activeparks.org
President's Council on Physical Fitness and Sports
http://www.fitness.gov/

General Nutrition and Physical Activity *(continued)*

Produce for Better Health Foundation
http://www.fruitsandveggiesmorematters.org
School Nutrition Association
http://www.schoolnutrition.org
USDA Team Nutrition
http://www.teamnutrition.usda.gov
US Government (gateway to nutrition sites): http://www.nutrition.gov
http://www.healthfinder.gov
YMCA of the USA
http://www.ymca.net

Health and Disease Prevention/Treatment



American Academy of Family Physicians
http://www.aafp.org
American Cancer Society
http://www.cancer.org
American Diabetes Association
http://www.diabetes.org
American Heart Association
http://www.americanheart.org
American Medical Association
http://www.ama-assn.org
American Nurses Association
http://www.ana.org
American Academy of Pediatric
http://www.aap.org
American Psychological Association
http://www.apa.org
American Public Health Association
http://www.apha.org
Bright Futures
http://www.brightfutures.org
Center for Disease Control and Prevention
http://www.cdc.gov
Food and Drug Administration
http://www.fda.gov
Maternal and Child Health Bureau
http://www.mchb.hrsa.gov
National Association of Pediatric Nurse Practitioners
http://www.napnap.org

Health and Disease Prevention/Treatment *(continued)*

National Association of Social Workers
http://www.socialworkers.org
National Cancer Institute
http://www.cancer.gov
National Center for Education in Maternal and Child Health
http://www.ncemch.org
National Center for Health Statistics
http://www.cdc.gov/nchs
National Institutes of Health
http://www.nih.gov/health
National Institute of Child Health and Human Development Clearinghouse
http://www.nichd.nih.gov
National Institute of Diabetes and Digestive and Kidney Disease
http://www2.niddk.nih.gov
Office of Disease Prevention and Health Promotion
http://odphp.osophs.dhhs.gov/
U.S. Department of Health and Human Services
http://www.hhs.gov

Pediatric Overweight

American Dietetic Association
http://www.eatright.org
American Obesity Association
http://www.obesity.org
Center for Disease Control (CDC)
http://www.cdc.gov (Contains step- by- step learning modules on BMI, Growth Chart and Overweight in Youth)
Healthy Weight Network
http://www.healthyweight.net
National Institutes of Health National Heart, Lung, and Blood Institute
http://www.nhlbi.nih.gov
Shape Up America
http://www.shapeup.org
The Surgeon General's Call To Prevent and Decrease Overweight and Obesity
http://www.surgeongeneral.gov/topics/obesity
Weight-Control Information Center
http://www.win.niddk.nih.gov/

Accessed from *Battling Pediatric Overweight Utilizing Web-based Tools for Kid-friendly Counseling*; Webinar August 9, 2006; AMERICAN DIETETIC ASSOCIATION, 120 South Riverside Plaza—Suite 2000,Chicago, IL 60606-6995

Appendices

Appendix A

New Jersey Model School Nutrition Policy

The Board of Education, or recognized school authority, recognizes that child and adolescent obesity has reached epidemic levels in the United States and that poor diet combined with the lack of physical activity negatively impacts on students' health, and their ability and motivation to learn. The Board is committed to:

- Providing students with healthy and nutritious foods;
- Encouraging the consumption of fresh fruits and vegetables, low fat milk and whole grains;
- Supporting healthy eating through nutrition education;
- Encouraging students to select and consume all components of the school meal; and.
- Providing students with the opportunity to engage in daily physical activity.

All reimbursable meals shall meet Federal nutrient standards as required by the U.S. Department of Agriculture Child Nutrition Program regulations. All items served as part of the After School Snack Program shall meet the standards as outlined within this policy.

The following items may not be served, sold or given out as free promotion anywhere on school property at anytime before the end of the school day:

- Foods of minimal nutritional value (FMNV) as defined by U.S. Department of Agriculture regulations;
- All food and beverage items listing sugar, in any form, as the first ingredient; and
- All forms of candy.

Schools shall reduce the purchase of any products containing trans fats. (Federal labeling of trans fats on all food products is required by January 1, 2006.)

All snack and beverage items sold or served anywhere on school property during the school day, including items sold in a la carte lines, vending machines, snack bars, school stores and fundraisers or served in the reimbursable After School Snack Program, shall meet the following standards:

Wellness Rules in New Jersey Schools

Appendix A

1) Based on manufacturers nutritional data or nutrient facts labels:
   - No more than eight grams of total fat per serving, with the exception of nuts and seeds.
   - No more than two grams of saturated fat per serving.
2) All beverages shall not exceed 12 ounces, with the following exceptions:
   - Water.
   - Milk containing two percent or less fat.
3) Whole milk shall not exceed eight ounces.

   In elementary schools:
   - 100 percent of all beverages offered shall be milk, water or 100 percent fruit or vegetable juices.

   In middle and high schools:
   - At least 60 percent of all beverages offered, other than milk and water, shall be 100 percent fruit or vegetable juices.
   - No more than 40 percent of all ice cream/frozen desserts shall be allowed to exceed the above standards for sugar, fat, and saturated fat.

Food and beverages served during special school celebrations or during curriculum related activities shall be exempt from this policy, with the exception of foods of minimal nutritional value as defined by USDA regulations.

This policy does not apply to: medically authorized special needs diets pursuant to 7 CFR Part 210; school nurses using FMNVs during the course of providing health care to individual students; or special needs students whose Individualized Education Plan (IEP) indicates their use for behavior modification.

Adequate time shall be allowed for student meal service and consumption. Schools shall provide a pleasant dining environment. The Board recommends that physical education or recess be scheduled before lunch whenever possible.

This school district's curriculum shall incorporate nutrition education and physical activity consistent with the New Jersey Department of Education Core Curriculum Standards.

The Board of Education is committed to promoting the Nutrition Policy with all food service personnel, teachers, nurses, coaches and other school administrative staff so they have the skills they need to implement this policy and promote healthy eating practices. The Board will work toward expanding awareness about this policy among students, parents, teachers and the community at large.

Wellness Rules in New Jersey Schools

Appendix B

Team Nutrition School
Enrollment Form

Our Team Nutrition School Leader is:

☐ Ms. ☐ Mrs.

☐ Mr. ☐ Other

Mail To: Team Nutrition
3101 Park Center Drive, Room 632
Alexandria, VA 22302

Fax To: 703-305-2549

FIRST NAME _____ LAST NAME _____

TITLE _____ SCHOOL'S NAME _____

TOTAL ENROLLMENT _____ GRADES TAUGHT _____

SCHOOL DISTRICT _____ SCHOOL COUNTY _____

SCHOOL ADDRESS _____

_____

CITY _____ STATE _____ ZIP CODE _____

TELEPHONE ( ) _____ FAX ( ) _____

E-MAIL ADDRESS _____

Please check one or more of the appropriate grade ranges:

☐ P (PRESCHOOL) PRE-K ☐ E (ELEMENTARY) K-5/6 ☐ M (MIDDLE) 6/7-8 ☐ H (HIGH) 9-12

We agree to:

- Suport USDA's Team Nutrition goal and values.
- Demonstrate a commitment to help students meet the Dietary Guidelines for Americans.
- Designate a Team Nutrition School Leader who will establish a school team.
- Distribute Team Nutrition materials to teachers, students and parents.
- Involve teachers, students, parents, food service personnel, and the community in interactive and entertaining nutrition education activities.
- Participate in the National School Lunch Program.
- Demonstrate a well-run Child Nutrition Program.
- Share successful strategies and programs with other schools.

We certify our school does not have any outstanding overclaims or significant program violations in our school meals programs.

_____ _____

SCHOOL PRINCIPAL, PRINTED NAME SCHOOL FOOD SERVICE MANAGER, PRINTED NAME

_____ _____

SIGNATURE SIGNATURE

_____ _____

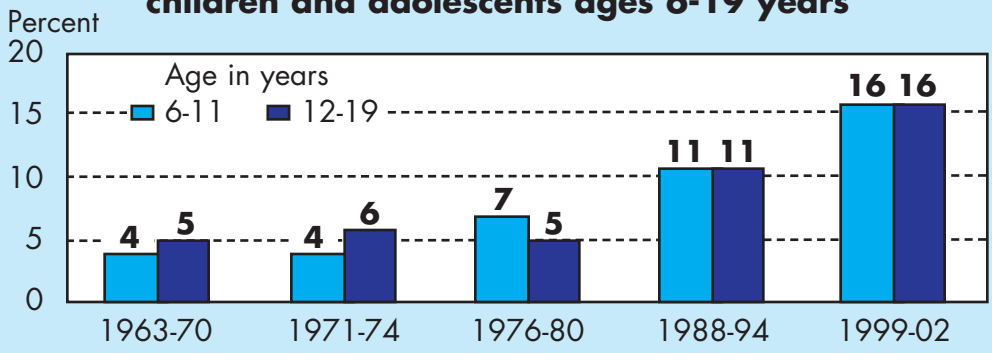
DATE DATE

Appendix C

What The Research Tells Us

- The percentage of school-age children 6–11 that are overweight more than doubled between the late 1970s and 2000.
- The percentage of overweight adolescents ages 12–19 tripled during the same time period. (1)

Figure 1. Prevalence of overweight among children and adolescents ages 6-19 years



NOTE: Excludes pregnant women starting with 1971-74. Pregnancy status not available for 1963-65 and 1966-70. Data for 1963-65 are for children 6-11 years of age; data for 1966-70 are for adolescents 12-17 years of age, not 12-19 years.
SOURCE: CDC/NCHS, NHES and NHANES

Results from the 1999–2002 National Health and Nutrition Examination Survey (NHANES), using measured heights and weights, indicate that an estimated 16 percent of children and adolescents ages 6–19 years are overweight. This represents a 45 percent increase from the overweight estimates of 11 percent obtained from NHANES III (1988–94).

Health Consequences of Childhood Obesity:

- Asthma
- Type 2 Diabetes
- High Blood Pressure
- Sleep Apnea
- Mental Health / Low Self Esteem
- Adult Obesity

(1) www.cdc.gov/nchs/products/pubs/pubd/hestats/overwght99.htm, accessed 10/10/06

Appendix C

Center for Health Statistics | NEW JERSEY DEPARTMENT OF HEALTH SENIOR SERVICES

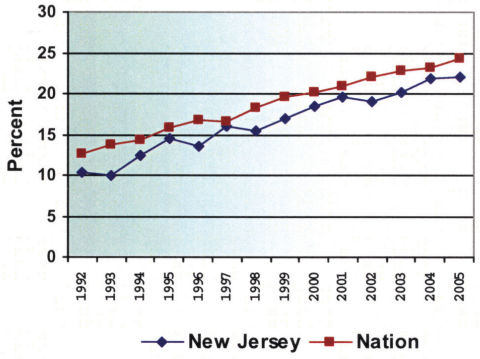
HEALTH DATA
FACT SHEET
July 2006

Obesity in New Jersey

OVERVIEW:

- Obesity, defined as the excess accumulation of body fat, is a growing health problem. Obesity is a known risk factor for numerous chronic diseases, including diabetes, heart disease, high blood pressure, gall bladder disease, arthritis, breathing problems, and some forms of cancer.
- The rate of obesity is rising nationwide, creating what is being called an *obesity epidemic*, particularly among men and young children. One in three Americans, or 58 million people, are considered overweight or obese.
- A person is considered obese if their body mass index (BMI) is over 30.0. BMI is determined by dividing a person's weight in kilograms by height in meters squared. Generally, obesity is the excess accumulation of body fat. One is considered overweight when the BMI is between 25.0 and 29.9.

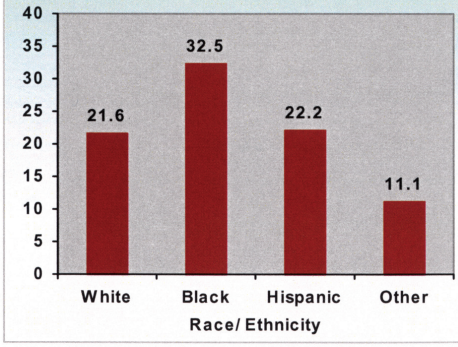
Figure 1. New Jersey vs. Nationwide Obesity Trends, 1992-2005
Source: BRFSS



NEW JERSEY FACTS:

- Consistent with nationwide trends, obesity has been rising steadily in New Jersey since the early nineties. However, New Jersey's obesity rates are slightly lower than national rates (Figure 1). According to the Behavioral Risk Factor Surveillance System (BRFSS), in 2005, 37 percent of New Jerseyans were overweight and 22 percent were obese.
- The 2005 New Jersey Student Health Survey found that 12% of ninth to twelfth graders were overweight and another fifteen percent were at risk for becoming over weight.
- A study conducted in 2003 by the New Jersey Departments of Health and Senior Services and Education found that 20 percent of sixth graders evaluated were obese and another 18 percent were overweight. Higher obesity levels were observed among the sixth grade boys as compared to girls.

Figure 2. Obesity Prevalence by race/ ethnicity, New Jersey, 2005
Source: BRFSS



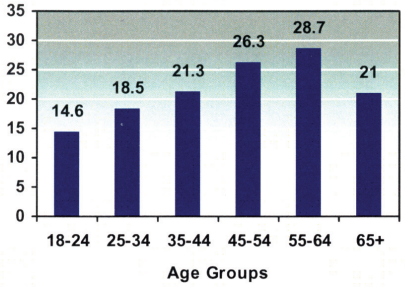
Wellness Rules in New Jersey Schools

Appendix C

NEW JERSEY FACTS CONTINUED:

- The prevalence of obesity is significantly higher among blacks when compared to all other groups. In 2005, thirty-two percent of blacks were obese. This percentage was significantly higher than the 22 percent of whites and Hispanics who were obese. (Figure 2)
- A majority of New Jersey residents (56%) are at risk for health problems related to being overweight (based on BMI). Nationally, nearly 80 percent of diabetes patients are obese; 70 percent of diagnosed cases of heart disease are related to obesity; 26 percent of obese people suffer from hypertension; and almost half of breast cancer cases are diagnosed among obese women.
- New Jerseyans between the ages of 45 and 64 are significantly more obese than other age groups. (Figure 3)

Figure 3. Percentage of obese persons by age groups, New Jersey 2005
Source: BRFSS



NEW JERSEY PROGRAM INFORMATION:

- The state of New Jersey Department of Agriculture has mandated a set of nutrition rules to be implemented in New Jersey schools in an effort to combat childhood obesity and health problems. In short, the rules state that sugared sodas and candy will not be offered to students at school and that fruits, vegetables, lowfat milk, and whole grains will be featured in school cafeterias. Furthermore, children will be instructed on the problems of obesity within their core curriculum and will also be given health education about nutrition.
- The New Jersey Obesity Prevention Action Plan prepared by the New Jersey Obesity Prevention Task Force, was completed in June 2006. This comprehensive action plan addresses the unique and diverse needs of New Jerseyans. The plan is comprised of seven major sections: infrastructure, public/professional awareness, community, schools, workplace, health care systems, and disparities. The plan will serve as the framework for a statewide, coordinated effort to support and enhance obesity prevention among New Jersey residents.
- In 2005, Governor Richard J. Codey implemented GetFitNJ Challenge, a program that encourages both children and adults to participate in some form of physical activity every day. New Jersey residents were asked to pledge to participate in a physical activity for a minimum of 30 minutes five days a week for six consecutive weeks.
- The financial cost for treating the health problems that are related to obesity are very high and rising. The health consequences of obesity are well documented. Prevention of obesity, especially among children, is critical in combating the epidemic in New Jersey as well as throughout the nation.

SOURCES:

New Jersey Department of Health and Senior Services, Center for Health Statistics

Centers for Disease Control and Prevention Behavioral Risk Factor Surveillance System survey data

Obesity in America; Overweight and Obesity Facts; New Jersey's school nutrition policy

Get Fit New Jersey Program; New Jersey Department of Personnel Working Well NJ Program

Jon S. Corzine, Governor

Fred M. Jacobs, MD, JD,
Commissioner

New Jersey Department of Health and Senior Services
Public Health Services Branch
Office of the State Epidemiologist, Center for Health Statistics
P.O. Box 360
Trenton, NJ 08625-0360

Appendix D

Fat Facts

What About Fats?

- Saturated and trans fats have unhealthy effects in the body. They both raise unhealthy LDL cholesterol levels in the blood. Trans fats may also lower healthy HDL cholesterol levels.
- Each day the average American consumes 5.8 grams of trans fat or 2% of daily calories.
- Some food manufacturers are replacing trans fats with unhealthy saturated fat such as coconut, palm and palm kernel oil in order to carry the food label claim of 0 trans fat.
- Monounsaturated fats have healthful effects.
- Replace trans fat and saturated fat with monounsaturated and polyunsaturated fats since they do not raise LDL cholesterol and have health benefits when eaten in moderation.





Consume More Healthy Fats	Limit/Avoid Unhealthy Fats
Monounsaturated olive and canola oils	**Saturated** butter, stick margarine, whole milk, animal products
Polyunsaturated vegetable oil, soybean oil, corn oil, and foods like nuts and fish	**Trans fats** certain commercially baked or fried goods & snacks

Wellness Rules in New Jersey Schools

Appendix D

What About Trans Fat?

- Trans fat is made when manufacturers add hydrogen to vegetable oil-a process called hydrogenation.
- Hydrogenation increases the shelf life and flavor stability of foods containing these fats.
- While scientific reports have confirmed the relationship between trans fat and an increased risk of Coronary Heart Disease (CHD), none has recommended an amount of trans fat that FDA could use to establish a Daily Value (DV).
- Without a DV, a %DV cannot be calculated. As a result, trans fat is listed with only a gram amount on the Nutrition Facts panel directly under the line for saturated fat.
- Manufacturers are allowed to state zero grams if the amount of trans fats is 0.5 grams or less in one serving.
- When a product lists no trans fats in the Nutrition Facts panel, check the ingredient list for hydrogenated oils. Any oil that has been partially hydrogenated will contain trans fats.

How Do You Avoid Trans Fat?

- Cut back on fried foods, and processed and commercial foods.
- Choose soft margarines instead of solid shortenings, stick margarines, and butter.
- Avoid other unhealthy fats such as foods made with coconut, palm and palm kernel oils.
- Watch out for “no cholesterol” or “cholesterol free” products, some may contain high levels of trans fat.

Appendix E

Use MyPyramid to Make Healthy Choices
For additional resources, visit dairycouncilofca.org and mealsmatter.org
PHYSICAL ACTIVITY
Be physically active for at least 30 minutes most days of the week.
OILS & EXTRAS
Make most of your fat choices from fish, nuts and vegetable oils. Limit your intake of "extra" foods that are mainly fat or sugar.
GRAINS
VEGETABLES
FRUITS
MILK & MILK PRODUCTS
MEATS & BEANS
6 oz. everyday*
1 oz. = 1 slice bread, 1 cup dry cereal, or 1/2 cup rice or pasta
2 1/2 cups everyday*
Choose dark green, orange and starchy vegetables as well as dry beans and peas
2 cups everyday*
Vary between fresh, frozen or canned without added sugar
3 cups everyday*
2 cups for kids aged 2-8
1 cup = 1 1/2 oz. hard cheese, 2 oz. processed cheese
5 1/2 oz. everyday*
1 oz. = 1 oz. meat, fish or poultry, 1 Tbsp. peanut butter, 1/2 oz. nuts, 1/4 cupdry beans
Make at least half of your grains whole grains
Try to vary your vegetable choices each day
Make most choices whole fruit
Choose fat-free or low-fat most often when you choose milk, yogurt and other milk products
Choose lean meat and poultry. Vary your choices - more fish, beans, nuts and seeds
*Recommended amounts based on a 2,000 calorie diet
CEREAL
FROZEN PEAS
RAISINS
FAT-FREE MILK
1% milk
YOGURT
PEANUT BUTTER
TUNA
© Dairy Council of California, 2005

Wellness Rules in New Jersey Schools

Appendix F

Understanding Nutrient Standards for Snacks and Beverages/ Label Reading Activity Quiz

Question: Which items meet / do not meet the Model Policy criteria for total fat and saturated fat?

"A"	"B"	"C"
NUTRITION FACTS: Cookies **Serving size 1 pouch (50g)** **Servings per container 1**	**NUTRITION FACTS: Nuts** **Serving size 3Tbs (30g)** **Servings per container 1**	**NUTRITION FACTS:Cookies** **Serving size 1 Package (22g)** **Servings per container about 1**
Calories 210 Calories from Fat 70	Calories 180 Calories from Fat 120	Calories 100 Calories from Fat 25
% Daily Value*	% Daily Value*	% Daily Value*
Total Fat 8g 13%	Total Fat 14g 21%	Total Fat 3g 5%
Saturated Fat 6g 28%**	Saturated Fat 3g 14%	Saturated Fat 0g 0 %
Trans Fat 0g	Trans Fat 0g	Trans Fat 0g
Cholesterol 5mg 2%	Cholesterol 0mg 0%	Polyunsaturated Fat 0.5g
Sodium 220mg 9%	Sodium 124mg 5%	Monounsaturated Fat 2g
Total Carbohydrate 32g 11%	Total Carbohydrate 9g 3%	Cholesterol 0mg 0%
Dietary fiber 1g 4%	Dietary fiber 2g 8%	Sodium 115mg 5%
Sugars 13g	Sugars 1g	Total Carbohydrate 16g 5%
Protein 3g	Protein 5g	Dietary fiber 1g 4%
Vitamin A 0% Vitamin C 0%	Vitamin A 0% Vitamin C 0%	Sugars 4g
Iron 6% Calcium 0%	Iron 6% Calcium 0%	Protein 1g
*Percent Daily Values based on 2,000 calorie diet	*Percent Daily Values based on 2,000 calorie diet	Iron 4% Calcium 10%

** Remember : 5% or less Daily Value is low 20% or more Daily Value is high

Answer: *"B" and "C" meet criteria; "A" does not.*
"A" meets criteria for total fat but exceeds limit on saturated fat. "B" (nuts) is exempt from this standard. "C" is in compliance with both total and saturated fat. All products have no trans-fats.

POLICY STANDARDS: (Except nuts and seeds)
Maximum per serving = 8 grams total fat
2 grams saturated fat
Reduce the purchase of trans fats

Wellness Rules in New Jersey Schools

Appendix G

HS and MS Beverage Chart (excluding water & milk)

Total Varieties Offered (Each flavor is a variety)	40% Calculation for "other" beverages that can be offered	60% Calculation for 100% juices
3	1	2
4	1	3
5	2	3
6	2	4
7	2	5
8	3	5
9	3	6
10	4	6
11	4	7
12	4	8
13	5	8
14	5	9
15	6	9
16	6	10
17	6	11
18	7	11
19	7	12
20	8	12
21	8	13
22	8	14







Wellness Rules in New Jersey Schools

Appendix G

HS and MS Ice Cream Chart

Total Varieties Offered (Each flavor is a variety)	40% Calculation for "other" items that can be offered	60% that must meet standards
3	1	2
4	1	3
5	2	3
6	2	4
7	2	5
8	3	5
9	3	6
10	4	6
11	4	7
12	4	8
13	5	8
14	5	9
15	6	9
16	6	10
17	6	11
18	7	11
19	7	12
20	8	12
21	8	13
22	8	14







Wellness Rules in New Jersey Schools

Appendix H

Foods of Minimal Nutritional Value

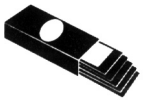
The following items shall not be served, sold or given away as a free promotion anywhere on school property at any time before the end of the school day, including items served in the reimbursable After School Snack Program:



- Soda Water



- Water Ices—Those water ices, which contain fruit or fruit juices, are not included.



- Chewing Gum

- Certain Candies



—Hard Candy: Includes such food as sour balls, fruit balls, candy sticks, lollipops, starlight mints, after dinner mints, sugar wafers, rock candy, cinnamon candies, breath mints, jaw breakers, and cough drops.



—Jellies and Gums: Includes such foods as gumdrops, jellybeans, jellied and fruit-flavored slices.



—Marshmallow Candies

—Fondant: Includes such foods as candy corn and soft mints.



—Licorice

—Spun Candy



—Candy-Coated Popcorn

Appendix I

Physical Activity/ Recess

www.cdc.gov/HealthyYouth/PhysicalActivity

Guidelines for School Health Programs to Promote Physical Activity: Summary

Division of Adolescent and School Health (DASH), National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP), Centers for Disease Control and Prevention (CDC)

Young people can build healthy bodies and establish healthy lifestyles by including physical activity in their daily lives. However, many young people are not physically active on a regular basis, and physical activity declines dramatically during adolescence. School and community programs can help young people get active and stay active.

Benefits of Regular Physical Activity

- Studies show that regular physical activity in childhood and adolescence:[1]
  - Improves strength and endurance.
  - Helps build healthy bones and muscles.
  - Helps control weight.
  - Reduces anxiety and stress and increases self-esteem.
  - May improve blood pressure and cholesterol levels.

In addition, young people say they like physical activity because it is fun; they do it with friends; and it helps them learn skills, stay in shape, and look better.

Percentage of High School Students Participating in Physical Activity and Physical Education, by Sex, 2005[2]

	Girls	Boys
At least 60 minutes/day of physical activity[a]	27.8%	43.8%
Attended physical education class daily [b]	29.0%	37.1%

[a]*Any kind of physical activity that increased heart rate and made them breathe hard some of the time for at least 60 minutes per day on 5 or more of the 7 days preceding the survey*
[b]*Attended physical education classes 5 days in an average week when they were in school*

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Centers for Disease Control and Prevention

MAY 2006

CDC SAFER·HEALTHIER·PEOPLE™

Wellness Rules in New Jersey Schools

Appendix I

Consequences of Physical Inactivity

- Inactivity during childhood and adolescence increases the likelihood of being inactive as an adult. Adults who are less active are at greater risk of dying of heart disease and developing diabetes, colon cancer, and high blood pressure.[1]

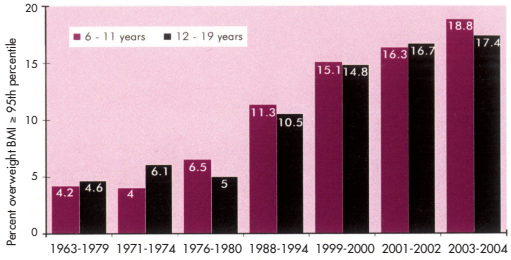
Overweight Among Youth

- The prevalence of overweight among children aged 6-11 has more than doubled in the past 20 years, increasing from 7% in 1980 to 18.8% in 2004.[3]
- Children and adolescents who are overweight are more likely to be overweight or obese as adults; overweight adults are at increased risk for heart disease, high blood pressure, stroke, diabetes, some types of cancer, and gallbladder disease.[4]

Physical Activity Among Young People

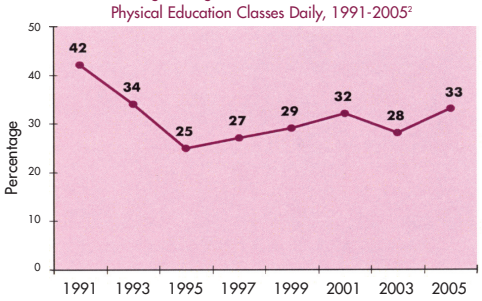
- Thirty-six percent of high school students had participated in at least 60 minutes/day of physical activity on 5 or more of the 7 days preceding the survey.[2]
- Sixty-four percent of high school students participated in sufficient vigorous physical activity, and 27% participated in sufficient moderate physical activity.[2]
- The percentage of high school students who attended physical education classes daily decreased from 42% in 1991 to 25% in 1995, and has remained stable at that level until 2005 (33%). In 2005, 45% of 9th grade students but only 22% of 12th grade students attended physical education class daily.[2]
- Among the 54% of students who attended physical education classes, 84% actually exercised or played sports for more than 20 minutes during an average class.[2]

Percentage of U.S. Children and Adolescents Who Were Overweight* 1963-2004**



* ≥ 95th percentile for BMI (Body Mass Index) by age and sex based on 2000 CDC BMI-for-age growth charts.
**Data for 1963-70 are only for children (ages 6-11 years) from 1963-65 and only for adolescents (ages 12-17 years) from 1966-70.
Source: *National Center for Health Statistics, CDC*

Percentage of High School Students Who Attended Physical Education Classes Daily, 1991-2005[2]



Young people can benefit from being physically active on most, if not all, days of the week. This should include both moderate and vigorous physical activity.

Examples of moderate activity include:

- Brisk walking
- Bicycling
- Playing actively
- Dancing

Examples of vigorous activity include:

- Running
- Jumping rope
- In-line or rolling skating
- Skipping

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Complete guidelines are available online at ftp://ftp.cdc.gov/pub/Publications/mmwr/rr/rr4606.pdf.

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Recess Before Lunch: It Does Make a Difference!

Speaker: Alice Joe Rainville, SFNS, Professor, Eastern Michigan University

Overview

The evidence is in and the results are conclusive: recess before lunch is the way to go. When students are allowed to play before eating lunch, they are more likely to eat more and waste less. In addition, children who have recess before lunch are better behaved during lunch and are much more likely to concentrate and focus during afternoon classes.

With such a strong case for recess before lunch, the question remains: why do so many schools still serve lunch before recess?

In a focus group study conducted by the National Food Service Management Institute, school administrators, teachers, school nutrition personnel, and parents voiced concerns, such as logistics about changing the traditional paradigm of lunch before recess. Yet, they also indicated a willingness to consider recess before lunch if the educational and nutritional case is presented convincingly.

Context

Professor Rainville discussed the findings of a study conducted by the National Food Service Management Institute to determine why more schools don't have recess before lunch despite the numerous proven benefits from doing so.

Key Conclusions

- **Recess before lunch provides numerous advantages.**

  Study after study has demonstrated that allowing children to have recess before lunch is superior from both a nutritional and an educational standpoint. Students who have recess before lunch tend to eat more and waste less food than those who have lunch before recess. After recess, children behave better during the lunch period because they have had the opportunity to burn off energy after sitting through hours of classes.

  In addition, this good behavior appears to carry over into the afternoon classes. Finally, and not insignificantly, children seem to enjoy lunch before recess better as they don't feel so compelled to rush through lunch so they can go out and play.

- **Despite obvious advantages, very few schools have implemented recess before lunch.**

  According to a 2001 School Health Policies and Program Study, only 4.6% of elementary schools scheduled recess before lunch.

  Given the weight of evidence in favor of recess before lunch, the National Food Service Management Institute (NFSMI) set out to study why most schools were still serving lunch before recess. NFSMI conducted focus groups consisting of school administrators, school nutrition personnel, teachers, and parents to determine the barriers to lunch before recess.

  They found that tradition is a significant barrier to recess before lunch. In short, what the focus group participants said was essentially that "lunch has always been before recess. It's just the way that it's always been done." Many school administrators and teachers are simply reluctant to change a system that they perceive has worked perfectly well for them in the past. Even some parents chimed in that they had always had lunch before recess and it seemed to work out just fine for them, so why change it?

> *"If it ain't broke, don't fix it."*
> — Alice Joe Rainville, quoting the sentiments of focus group participants

  But, even among educators who are reluctant to change the current schedule, they are conscious that the current schedule is far from perfect. In fact, many educational professionals commented that they have learned to compensate for the reduced attention often shown by students after lunch by teaching the more concentration-intensive courses during the morning.

- **Logistical issues are a barrier to recess before lunch.**

  In many large schools, in practical terms it may prove difficult to coordinate recess before lunch for all students. This is because the limited facilities and resources would make it impossible to allow all students to eat lunch at such a time.

  This is particularly true considering that, in some schools, many children don't eat breakfast before school. Any effort that would result in these children being fed at a later time would meet with considerable resistance. Also, administrators, teachers, and school nutrition personnel voiced concerns about how to schedule for hand washing and the removal and storage of cold weather clothing if recess was held prior to lunch.

- **The barriers to recess before lunch are not insurmountable.**

  Despite the barriers, many study participants were impressed with the evidence in favor of recess before lunch. They were particularly impressed with the findings that children eat better and have fewer behavioral issues during the lunch period and the succeeding classroom sessions.

  It appears that the key to getting administrators to make a shift is to focus on the educational benefits of better-behaved children in the afternoon. If it can be conclusively demonstrated that lunch before recess is better for the children, school administrators are more likely to forego tradition and resolve the logistical concerns.

Other Important Points

- **More research.** In light of the findings through previous research and during the latest round of focus groups, FSMI is planning a nationwide study to gather additional data on exactly why schools are not implementing recess before lunch.
- **Words of wisdom.** For those who have had success shifting recess to take place before lunch, their advice is to communicate with stakeholders, plan effectively, and consider what is best for the children.

Appendix I

Scheduling Recess Before Lunch Proves Itself

New trends can be exciting but risky. Time-tested ideas are solid, but not revolutionary. Want both? Try Recess Before Lunch!



For years children have been gobbling down their lunch and racing to get to the playground. No child wants to sit at lunch while everyone else is outside and many of them have other agendas to attend to besides eating! So, how much of a difference can simply having recess before lunch make? It can make a big difference!

One of the first studies* conducted on "Recess Before Lunch" was Mary Jane Gettlinger's groundbreaking 1995 research. Subsequent studies and pilot programs have shown that Recess Before Lunch generates these impressive benefits:

- *Less plate waste:* So children are getting more nutrients and are less hungry when returning to class
- *Better lunchroom behavior:* Excess energy has been used up - kids are relaxed, quieter and ready to eat
- *Fewer classroom discipline problems:* Kids have settled down during lunch and are calmer
- *Improved classroom performance:* Students come back to the classroom ready to learn



Want to see the studies and programs in action? Thanks to the Web you can! The Montana Team Nutrition program, Indiana Action For Healthy Kids and others are generous about sharing their experiences. For links to the studies and programs, go to www.NutritionExplorations.org/SFS/Main.asp

*Gettlinger, M.J., et al: Food waste is reduced when elementary-school children have recess before lunch. JADA, Sept., 1996 v. 96 (9) p. 906-908

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