



Introduction

Parents, students, teachers, school administrators, foodservice staff, and concerned citizens across the nation are taking action to promote healthy eating in schools. Their motives are simple. They know that many American children have poor eating habits that are contributing to the epidemic of childhood overweight and other health problems. They understand that good nutrition is essential to help children:

- Stay healthy now and into the future,
- Reach their full academic potential, and
- Be fully prepared for athletics and other activities, in and out of school.

Since the U.S. Department of Agriculture (USDA) began the School Meals Initiative for Healthy Children in 1995, the quality of school breakfasts and lunches has improved substantially. Today's school meals:

- Have less fat and saturated fat,
- Include more fruits and vegetables, and
- Continue to satisfy program standards for key nutrients.¹

Meanwhile, the number of students participating in school meals has stayed about the same.¹

However, concerns about the nutritional quality of other foods and beverages sold in schools have increased.^{2,4} Students today have greater access to snack foods and beverages high in fat and/or added sugars that are not part of Federally regulated school meal programs.^{4,5} Many schools have come to rely

on profits from à la carte offerings, vending machines, student stores, canteens, snack bars, and fundraisers to support a variety of activities.^{6,7}

The good news is that many schools and districts across the United States are improving their nutrition environments—while maintaining a profitable bottom line.^{8,9} *Making It Happen!* tells the stories of schools—urban, suburban, rural, elementary, middle, and high schools—that have successfully implemented innovative approaches to offer and sell more nutritious foods and beverages to students and staff.

The 32 success stories in *Making It Happen!* show:

- The types of changes made by schools and school districts,
- How they made the changes, and
- The results of the changes.

Each story is unique, just as each school is unique. Together, these stories provide inspiration—and a wealth of practical ideas—for anyone who wants to make healthy nutrition environments happen for students and schools everywhere.

Making It Happen! describes six specific approaches for improving the nutritional quality of “competitive foods,” the foods and beverages schools offer other than the meals served through the USDA’s school meal



Lessons from the *Making It Happen!* Success Stories

Although no two schools or districts made exactly the same changes or followed exactly the same path in making their changes, several themes emerge from their stories.

Students will buy and consume healthful foods and beverages—and schools can make money from healthful options.

Schools across the country have proved that they can make money by selling more nutritious foods and beverages. Of the 17 *Making It Happen!* schools and districts that reported sales data, 12 made more money and four made the same amount of money after making nutrition improvements.

programs. These approaches evolved as a result of input from schools and school districts on the types of changes they were making. The approaches are complementary; schools can use one or two approaches—or all six.

The Six Approaches

- 1 Establish nutrition standards for competitive foods**
- 2 Influence food and beverage contracts**
- 3 Make more healthful foods and beverages available**
- 4 Adopt marketing techniques to promote healthful choices**
- 5 Limit student access to competitive foods**
- 6 Use fundraising activities and rewards that support student health**

Anyone can be a champion for changing school nutrition environments—anyone can make it happen!

The “champions” for change varied from school to school and district to district; they included parents, students, foodservice managers, teachers, principals, and superintendents. The reasons for change also varied. They included concerns about food waste at lunch time, childhood obesity statistics, and the types of foods available in school. Many were motivated by materials such as *Changing the Scene*¹⁰ or presentations funded by the USDA Team Nutrition Initiative.

Teams are essential for creating healthy school nutrition environments.

Every success story involved a group of people who worked together, often with helpful support from principals and superintendents and often with student input. Although the idea for change might have originated with an individual, it was a group of people with diverse skills and backgrounds that made it happen.

Assessing the current environment is the first step to changing school nutrition.

A common first step was for schools and districts to assess their current situation and use the results to create awareness and a plan of action. Some schools gathered information using surveys or focus groups with students, parents, and staff.

Change is a destination, and a process.

Adopting a nutrition policy does not guarantee that it will be implemented. A successful marketing campaign one year does

not guarantee the same level of sales in subsequent years. Ongoing attention to school nutrition is needed to achieve and sustain change.

Change is occurring at all levels: school, district, State, and national.

Although the impact of these *Making It Happen!* stories is at the school and district level, increasingly States are working to improve the nutrition environments of schools, and a variety of Federal programs support change. The *Making It Happen!* stories can inform nutrition initiatives at all levels.

Data are needed to document the impact of change.

Most of the changes reported in the success stories were made recently, making it difficult to assess their impact. More work is needed to collect data before and after changes are made to document their effects on eating behaviors, revenues from food and beverage sales, and the overall impact on children’s health.

What’s in Making It Happen!?

Making It Happen! provides the following background information:

- *Why a Healthy School Nutrition Environment is Important* (pages 16-21) provides data on eating behaviors of young people and the types of foods and beverages available at schools.
- *Tips for Making It Happen!* (pages 22-23) features guidance on how to implement change.
- *Nutrition Policies* (pages 24-26) provides tips on how to develop and implement school nutrition policies.

The remaining sections feature the success stories from schools and districts and introduce six approaches that they used to make changes. Supporting documents for the stories are found on pages 187-350. A form follows that invites readers to send in their success stories for future online editions of *Making It Happen!* And, finally, a User Response Card to send back to Team Nutrition after you have used *Making It Happen!*.

The Quick Reference Guide on page 179 lists each approach and all of the stories in which the approaches were used. This list is helpful because most cases used more than one approach. The guide also lists each of the stories that exemplify other characteristics of interest, such as stories that reported information on school revenue, stories with significant parental or student involvement, and stories in which nutrition policies were developed.

The success stories featured in *Making It Happen!* were collected between September 2002 and October 2003 and were identified through a scan of media coverage, responses to queries on electronic listservs, and recommendations from the project contractor, CDC and USDA staff, and members of the *Making It Happen!* advisory panel. Stories were updated in the spring of 2004. The information included is self-reported and based on interviews with the key contact(s) for each case.

Why a Healthy School Nutrition Environment Is Important

What is a healthy school nutrition environment?

USDA's *Changing the Scene*¹⁰ tool kit identifies six components of a healthy school nutrition environment:

- A commitment to nutrition and physical activity
- Quality school meals
- Other healthful food options
- Pleasant eating experiences
- Nutrition education
- Marketing healthful foods and beverages

A healthy school nutrition environment gives students consistent, reliable health information and ample opportunity to use it.

What are American children eating today?

Good nutrition during the school years is vitally important for helping children grow strong, succeed in school, and establish healthy habits for a lifetime. Sadly, the current eating habits of some American children are falling short of the mark.

- More than 60 percent of children and adolescents in the United States eat too much fat and saturated fat and not enough fruits and vegetables.¹¹
- Only 39 percent of children eat enough fiber (found in fruits and vegetables, whole grains, and legumes such as lentils, chick peas, and black beans).¹²

- 85 percent of adolescent females do not consume enough calcium.¹³ During the past 25 years, consumption of milk, the largest source of calcium, decreased 36 percent among adolescent females.¹⁴ At the same time, average daily soft drink consumption almost doubled among adolescent girls, increasing from 6 to 11 ounces, and almost tripled among adolescent boys, from 7 to 19 ounces.^{11,15}
- Between 18 and 20 percent of calories consumed by children and adolescents come from added sugars.¹⁶ The Dietary Guidelines for Americans express concern that consuming excess calories from foods high in added sugars may “contribute to weight gain or lower consumption of more nutritious foods.”¹⁷

What are the effects of poor eating habits?

Poor eating habits may prevent American children from reaching their full potential. For example, research suggests that skipping breakfast can affect children’s intellectual performance.^{18,19} Studies also have shown that students who participated in a school breakfast program were more likely to improve their school grades, classroom behavior, and psychological well-being than their peers who did not participate in the program.¹⁹

Poor eating habits, along with physical inactivity, contribute to obesity and other serious health problems. Almost 9 million children and adolescents in the United States are overweight.²⁰ The prevalence of overweight among children aged 6 to 11 years has more than doubled in the past 20



years, increasing from 7 percent in 1980 to 16 percent in 2002. Overweight among adolescents aged 12 to 19 years has tripled in the same time period, rising from 5 percent to 16 percent.²⁰ African American and Hispanic American children and adolescents have even higher rates.²¹

Health consequences of poor eating habits include:

- Overweight children have higher rates of type 2 diabetes, high levels of blood lipids, high blood pressure, early maturation, bone and joint problems, and are more likely to experience discrimination and low self-esteem.²²
- Overweight children and teens are more likely to become overweight or obese adults, who are at increased risk for heart disease, high blood pressure, stroke, diabetes, some types of cancer, and gallbladder disease.²³
- Type 2 diabetes, normally seen among adults, is increasingly found in children, especially among African American, Hispanic American, Native American, and Asian American populations.²⁴
- Atherosclerosis, the most common cause of heart disease, begins during childhood and is related to blood cholesterol levels, which can be affected by what children eat.²⁵

- Young people who do not get enough calcium are at greater risk for later development of osteoporosis.¹³
- Too many young people are adopting unsafe or harmful weight loss practices, such as inducing vomiting, using laxatives, or smoking.²⁶
- It has been estimated that as many as 7 to 8 percent of females in the United States suffer from anorexia nervosa and/or bulimia nervosa in their lifetime.²⁷ These two eating disorders can cause many severe complications and have among the highest mortality rates for any psychiatric disorder.²⁷
- Poor eating habits can contribute to dental caries, which remains a major cause of school absences.²⁸

Why focus on nutrition changes in schools?

Schools alone cannot solve the nutritional problems of children. It will take the combined efforts of families, schools, communities, government agencies, health providers, the food industry, and the media to make significant progress. Schools, however, have especially critical roles to play.

- More than 97 percent of young people are enrolled in schools.²⁹
- Based on USDA Fiscal Year 2002 data, on a typical day, 53 percent of students in the 93,388 public and private schools that participate in the National School Lunch Program (NSLP) ate an NSLP lunch; and 19 percent of students in the 71,147 public and private schools that participate in the School Breakfast Program (SBP) ate a SBP breakfast.

- Research shows that well-designed educational programs can improve the eating habits of students.^{30,31}
- Schools provide a valuable opportunity for students to practice nutrition skills in an environment supported by nutrition education and positive role modeling by adults.³²

What are the Federal regulations on competitive foods and beverages in schools?

USDA has many regulations on the foods and beverages offered as **part of school meals**.³³ However, the only Federal limit on the sale of foods and beverages apart from school meal programs (e.g., foods or beverages sold à la carte or in vending machines) is the following:

- Schools cannot sell foods of minimal nutritional value (FMNV) in foodservice areas during meal periods.³



FMNV can be sold during the entire school day, including meal periods, anywhere else on campus, including right outside the cafeteria doors.³

FMNV are defined as items that provide less than 5 percent of the U.S. recommended daily allowance (RDA) per serving for each of eight essential nutrients.³⁴ FMNV include:

- Carbonated soft drinks
- Water ices
- Chewing gum
- Certain candies made largely from sweeteners, such as hard candy and jelly beans

The term FMNV does not include foods such as potato chips, chocolate bars, and doughnuts, which can be sold in the cafeteria or elsewhere in the school at any time. States, districts, or schools can impose additional nutrition standards; as of fall 2002, 21 States had done so.³⁵ It is unclear to what extent the Federal and State regulations are enforced at the local level.

Table 1: Types of foods offered in school vending machines or stores³⁶

Food	Percent of schools*
High-fat salty snacks	64
High-fat baked goods	63
Low-fat salty snacks	53
Non-chocolate candy	53
Chocolate candy	47
Fruits or vegetables	18

* Among the 61 percent of schools with a vending machine or store

Foods and beverages sold outside of school meal programs, regardless of their nutritional value, are sometimes called “competitive foods,” because they compete with school meals.³

What foods and beverages are currently available at schools?

The Centers for Disease Control and Prevention’s (CDC) School Health Policies and Programs Study (SHPPS), conducted in 2000,³⁶ found that U.S. students could purchase foods and beverages from vending machines, school stores, canteens, and/or snack bars in:

- 98 percent of high schools,
- 74 percent of middle/junior high schools, and
- 43 percent of elementary schools.

The types of foods and beverages most commonly available in school vending machines or stores are shown in Tables 1 and 2.

Table 2: Types of beverages offered in school vending machines or stores³⁶

Beverages	Percent of schools*
Soft drinks, sport drinks, and fruit drinks	76
100% fruit juices	55
Bottled water	49
Vegetable juices	13

* Among the 61 percent of schools with a vending machine or store

The USDA's School Nutrition Dietary Assessment Study II,¹ conducted in 1998-1999, found that at lunch time more than 9 out of 10 schools sold foods or beverages à la carte (individual items sold by school foodservices that are not part of school meals).

SHPPS 2000³⁶ found the following foods were most commonly sold à la carte:

- Fruits or vegetables (73 percent of schools)
- 100% fruit or vegetable juice (63 percent)
- Cookies or other baked good that were not low in fat (59 percent)
- Pizza, hamburgers, or sandwiches (56 percent)

Several studies at the local level have documented that the majority of food and beverage items sold in vending machines or à la carte settings are high in fat and/or added sugars.^{5, 37, 38}

The portion size of food and beverage snack items is also a concern. For example, between 1977 and 1996 the average portion size of salty snacks (e.g., potato chips) increased by 60 percent and the size of soft drinks by 52 percent.³⁹

The Massachusetts Action for Healthy Kids developed the *Massachusetts A La Carte Food & Beverage Standards to Promote a Healthier School Environment* (see page 309). It includes guidelines for elementary schools and for secondary schools as well as a reference list for their standards.

How much money do schools make from à la carte and vending machine sales?

Many public schools are facing budget crises. This is one obvious reason why selling foods

and beverages for profit is so common in American schools. Earnings from these sales vary greatly from one school district to another.

During a typical week in the 1998-99 school year, à la carte sales in public schools that participated in the National School Lunch Program generated:

- \$375 per 1000 students for elementary schools,
- \$1,760 per 1000 students for middle schools, and
- \$1,985 per 1000 students for high schools.¹

A survey conducted in 2000 in California school districts with high schools found that à la carte items contributed up to 70 percent of all food sales in the school districts surveyed.⁴⁰

Studies have shown that, as income from à la carte sales increases, student participation in meal programs decreases.¹ Child nutrition officials are concerned that the increase in à la carte sales may result in stigmatizing participants in meal programs if it is perceived that the programs are targeted to poor children rather than seen as a nutrition program for all children.³

No national data are available on the income that schools earn from selling food and beverage items in vending machines. A 2003 survey of all 1,256 school districts in Texas, conducted by the State's Department of Agriculture,⁴¹ estimated that the total annual income from vending machines was over \$54 million. However, sales of competitive foods resulted in up to \$60 million dollars in lost income from school meals. In 2001, the total deficit for school food operations in these Texas school districts was \$23.7 million, which had to be subsidized from other district funds.⁴¹

Who gets the profit from food and beverage sales, and how is it used?

Food and beverage sales at school generate profit not only for schools and districts but for community-based businesses, and regional and national food and beverage companies. As *Making It Happen!* demonstrates, schools and businesses can make money selling **healthful** items (see Quick Reference Guide, page 182 for stories that report revenue).

In a 2001 national survey, 832 school principals⁶ reported using income from beverage sales in six key areas:

- Sports and physical education equipment (66 percent of principals),
- After school student activities (59 percent),
- Instructional materials (48 percent),
- Field trips (46 percent),
- Arts and theater programs (44 percent), and
- Computers/technology equipment (42 percent).

Profits from food and beverage sales are usually under school and school district control. Groups most likely to manage the money earned include district administrators, foodservice managers, principals, teachers, athletic directors, parent groups, and student councils.

National nutrition groups have expressed concern about the sale of competitive foods and beverages in schools and their effects on student health. According to a joint position paper² from the American Dietetic Association (ADA), Society for Nutrition Education (SNE), and American School

Food Service Association (now School Nutrition Association):

Schools' child nutrition programs should serve as a learning laboratory for developing healthful eating habits and should not be driven by profit-making ventures that may undermine nutrition goals.

What resources can help “make it happen” in every school?

- USDA's *Changing the Scene: Improving the School Nutrition Environment*, a tool kit that addresses all aspects of the school nutrition environment, including school meals, the nutritional quality of other foods, nutrition education, and nutrition marketing. www.fns.usda.gov/tn/Resources/changing.html.
- CDC's *School Health Index*, a self-assessment and planning tool that helps school groups identify strengths and weaknesses of their health programs and develop a plan for change. www.cdc.gov/healthyouth/SHI/.
- The National Association of State Boards of Education's *Fit, Healthy, and Ready to Learn*, a school health policy guide that features sample policies for school nutrition and supportive information. <http://nasbe.org/healthyschools/fithealthy.mgi>.
- The School Nutrition Association (SNA), formerly American School Food Service Association's *Keys to Excellence*, a self-assessment tool for child nutrition programs available in document form at www.schoolnutrition.org/childnutrition/keys/downloads/keysclassic.pdf. SNA members can access an on-line version at: www.schoolnutrition.org/keys/.

Tips for “Making It Happen!”

Create a team.

Change often starts when one person sees a need for change and is willing to take action. An effective first step is to bring together a group of interested people and discuss shared concerns. It may be most efficient to start with an existing team such as a school health committee or parent-teacher group.

Assess the existing situation.

Learn more about the strengths and weaknesses of the existing school environment by asking the following questions:

- Do nutrition standards and/or policies exist at the school, district, or State level?
- Is there an existing food and/or beverage contract? When does it expire?
- What nutritious foods and beverages are available, and how are they currently marketed?
- What approaches are used to limit students’ access to high-fat/high-sugar foods and beverages?
- What foods, beverages, and other items are used as fundraisers and rewards?
- Who is already taking action, and are there other key players who need to become involved?

Plan for change.

Local schools and/or districts are well-positioned to select the changes needed and to develop a plan that works for their situation. A team can provide direction for change and help build awareness of the need for change.

Implement change.

No absolutely wrong or right way exists to implement changes in school foods and beverages. The situation in each school or school district will be different. Here are some important aspects to consider.

Timing: Students may be less resistant to change if new items are added before taking away old favorites. For this reason, an easy first step may be to add and promote a variety of nutritious items. It may then be easier to eliminate items during a school break (such as summer vacation), so that memories of “what was” will be less vivid.

Pace of change: Some schools may opt to make changes all at once, while others may opt to implement change gradually.

Communication: To minimize misunderstandings, inform students, school and foodservice staff, parents, and the community about the changes and the reasons for making them. Ideally, the decision to change will not come as a big surprise, because all key stakeholders will have participated in planning the changes.

Student involvement: Ongoing student participation is critical to gaining students' acceptance of changes. Ways to involve students include:

- Ask for their help in identifying foods that meet nutrition criteria.
- Involve them in tasting potential food and beverage items.
- Discuss their concerns openly and thoroughly.
- Get their feedback on the packaging, pricing, and placement of the new foods.

Patience: Change takes time, and time means patience. Students often need to see and taste new items several times before they begin to choose them readily.

Links with education: Linking classroom education to school nutrition changes is a valuable way to get student buy-in to changes. For example, teachers can involve students in helping to analyze the nutritional quality of various food and beverage items—and to design promotional materials for new items.

Modeling healthy eating: School administrators and staff can “walk the talk” by choosing and enjoying the more nutritious choices; foodservice staff can promote the changes with a positive “try it” attitude.



Monitor the changes.

It is always important to collect baseline information before the changes occur and to measure the reaction to changes by:

- Tracking sales of individual food/beverage items,
- Collecting student opinions about individual items, and
- Assessing the impact on school meal program participation and revenues.

Adjust as needed.

A school nutrition action committee, a school health council, or another interested group can help oversee adjustments and help sustain the change. It is useful to continue to obtain input and feedback from students and others, so that key players feel involved.

Celebrate success along the way.

Celebrating successes, big and small, is a way to motivate people to keep up their good work—and to maintain the momentum for change!

Nutrition Policies

What is a school nutrition policy?

A nutrition policy is a written document that provides the rationale, goals, and standards for the activities that a school, district, or State will implement to promote healthy eating among students and staff. Policies may outline the responsibilities of individuals and the institution, budgetary requirements, and the rules of operation.

Several of the schools and school districts featured in *Making It Happen!* adopted nutrition policies (see Quick Reference Guide, page 181). A review of these and other nutrition policies reveals some important facts:

- No two nutrition policies are the same. The most effective policies are those tailored to the specific needs of a school, district, or State. Policies vary from brief to comprehensive. Some contain detailed guidance on many aspects of school nutrition; others provide general guidance and an overall vision; still others focus on specific areas such as nutrient standards for foods and beverages.
- School nutrition policies change over time. They may start with a few simple goals and later expand. In the best-case scenario, a school nutrition policy is aligned with policies related to physical activity—and becomes part of a coordinated school health policy.
- Political influence is a consideration. The potential influence of groups with an interest in nutrition policies should be considered throughout the policy process.

Why develop a school nutrition policy?

A school nutrition policy helps create an environment in which nutritious choices are easy choices for students and staff. It offers a framework for coordinating all aspects of the school nutrition environment.^{30,42}

In addition to improving the health and well-being of students and staff, school nutrition policies can do the following:

- Make change less dependent on individual “champions.”
- Demonstrate support for nutrition in a tangible way.
- Summarize need-to-know information about school nutrition in a single document.
- Serve as a marketing tool for change, as the policy is “sold” to supporters and opponents throughout the school and community.
- Focus attention on health concerns and provide leverage for nutrition advocates.
- Increase the priority given to nutrition by making it part of the overall policy infrastructure of schools, districts, and/or States.
- Provide concrete direction, guidance, and accountability for food and nutrition-related decisions.
- Serve as a basis for continuous evaluation and improvement.

Who can develop a school nutrition policy?

The process may be led by a State education agency, school district, or individual school staff; administrators or school board members; a school health or nutrition committee; community advocates; parents; and/or students. The team that develops a policy should include representatives from both education and public health agencies. It may also be helpful to involve representatives from the private sector.

What should be included in a school nutrition policy?

Policies are comprehensive documents and can address **all** aspects of school nutrition, including the six approaches described in *Making It Happen!* In addition to providing a rationale for the policy, policies can address the following:

- Coordination of nutrition education, school foodservices, nutrition-related health services, staff wellness, family and community outreach, and other components of coordinated school health programs (e.g., physical education and activity).
- Nutritional quality of food in schools, including meals and all other outlets where food is available.
- Links that extend nutrition education beyond the classroom to meal programs and other food and beverage outlets, families, and communities.
- Support for school meal programs to enable them to provide access to nutritious food for all children.

- Quality of the school dining experience (e.g., length of meal times and cafeteria environments).
- Marketing activities to promote healthy eating.
- Food-related practices within the school (e.g., use of food as a reward or punishment).
- Use of food and beverages for fundraising and healthful alternatives.
- Contracts related to food and/or beverage sales.
- Protocols for addressing student nutrition problems, such as referrals to nutrition and health professionals in the community.
- Staff training to support implementation of the policy.

Fit, Healthy and Ready to Learn: A School Health Policy Guide,⁴² published by the National Association of State Boards of Education (www.nasbe.org/HealthySchools/fithealthy.mgi), provides a sample, comprehensive nutrition policy and background information to support it.

Even the most comprehensive policy cannot mandate all aspects of good nutrition without the support of the school community. The best situation is one in which schools understand and implement the letter *and* the spirit of the policy.

What are the key steps in creating a school nutrition policy?

Timing is an important consideration. While some schools might develop a policy as a first step, others find it useful to begin with a simpler task, such as an assessment of the school's existing policies and practices.

Assessment tools include CDC's *School Health Index*⁴³ and USDA's *Changing the Scene*.¹⁰

These actions can help a team learn more about working together before tackling policy development.

The process of policy development described in *Fit, Healthy, and Ready to Learn* identifies the following series of inter-related steps:

- **Lay the groundwork** to prepare for a policy initiative by determining what policies already exist and clarifying the need for a new policy.
 - **Build awareness and support** for policy goals and strategies by involving groups likely to be affected by the policy in making the case for change.
 - **Draft the policy** and advocate for approval. Anticipate sources of opposition, likely arguments to be made against it, possible responses to the arguments, and begin to plan for policy implementation.
 - **Adopt the policy** by presenting it to the policymaking group and by providing support during the adoption process.
 - **Administer the policy** by implementing it and promoting it to others.
- Implementation can be one of the most challenging steps in the policy process.

- **Monitor the entire process and evaluate the impact of the policy.** Evaluation may lead to a revised policy or to additional interventions to improve student nutrition.

The policy-creation “dance” may involve compromise and failure. Compromise may sometimes be necessary to move forward. If failure occurs at some point, it may be necessary to enlist additional partners. In the policy process, it is important to learn that no means no for now, not forever.

The following publications from the National Association of State Boards of Education contain more information on influencing the school policy making process:

- *Fit, Healthy, and Ready to Learn: A School Health Policy Guide*⁴² www.nasbe.org/HealthySchools/fithealthy.mgi
- *How Schools Work and How to Work with Schools: A Primer for Education Professionals*⁴⁴ www.nasbe.org/Educational_Issues/Safe_Healthy.html

Additional publications may also be useful.

- The California School Board Association offers a guide, *Successful Students Through Healthy Food Policies: Act Now for Academic Excellence*.⁴⁵ www.csba.org/PS/hf.htm.
- *Comprehensive School Nutrition Policy*, developed by the Comprehensive School Nutrition Policy Task Force, 1201 Chestnut Street, 4th floor, Philadelphia, Pennsylvania 19107. (215-568-0830), (www.thefoodtrust.org/policy.html).