



April 28, 2017

To: MCPS Superintendent Jack Smith, COO Andrew Zuckerman, CAO Maria Navarro and the MCPS Regulatory Review Committee

Excess sugar in the diets of our children is one of the primary drivers of the epidemic of childhood obesity and type 2 diabetes, which one in three children born in 2000 or later will suffer from at some point in their lives if we do not slow this epidemic.<sup>1</sup> One recent study at the population level showed that for every extra 150 calories of sugar consumed per day, there was a 1.1% rise in the rate of diabetes.<sup>2</sup>

However, a second recent study provided evidence that removing added sugar from children's diets can quickly improve their health. The study replaced all the added sugar with starches in the diets of 43 children between the ages of 9 and 18 who were obese and had at least one other chronic metabolic disorder, such as hypertension, high triglyceride levels or a marker of fatty liver. After 9 days of food that had the same fat, protein, carbohydrate, and calorie levels as their previously reported home diets, virtually every symptom of metabolic syndrome, which precedes type 2 diabetes, had improved.<sup>3</sup>

Students in Montgomery County have two primary sources of sugar at school: school food, especially breakfast and a la carte items, and vending machines selling sodas and sports drinks half an hour after the end of the school day. Giving access to so much sugar to children in schools is not consistent with the MCPS Strategic Plan that seeks to have MCPS students "Make constructive and healthy decisions that promote hope, personal well-being, and social behavior."

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<sup>1</sup> Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion. (2009). *The Power of Prevention: Chronic disease . . . the public health challenge of the 21st century*. <http://www.cdc.gov/chronicdisease/pdf/2009-Power-of-Prevention.pdf>

<sup>2</sup> Basu, S., Yoffe, P., Hills, N., & Lustig, R. H. (2013). *The relationship of sugar to population-level diabetes prevalence: An econometric analysis of repeated cross-sectional data*. *PLoS One*, 8(2) <http://journals.plos.org/plosone/article?id=10.1371/journal.pone.0057873>

<sup>3</sup> Bunim, J. (2015). *Obese Children's Health Rapidly Improves With Sugar Reduction Unrelated to Calories: Study Indicates That Calories Are Not Created Equal; Sugar and Fructose Are Dangerous*. UCSF News Center. <https://www.ucsf.edu/news/2015/10/136676/obese-childrens-health-rapidly-improves-sugar-reduction-unrelated-calories>

The 2015-2020 Dietary Guidelines for Americans recommend that no more than 10% of daily calories come from added sugar.<sup>4</sup> Based on USDA calorie guidelines for school breakfasts, this would allow for 35-50 calories from sugar at the elementary level and up to 45-60 at the high school level. Current sugary breakfasts in MCPS contain between 120 and 192 calories from added sugar, if chocolate milk is selected. These breakfasts are offered 4 out of 5 days a week, according to the MCPS elementary breakfast menu, and served universally and free in the classroom in over 75 schools.

Soda vending machines, in addition to offering products that are detrimental to student health, contradict the educational messages students are receiving in their health classes and undermine the educational mission of the schools. Schools<sup>5</sup> and public parks<sup>6</sup> that stock vending machines with healthier options have reported little or no loss or even a gain in revenue.

We, the undersigned, ask you to include the following provisions in the new MCPS Wellness Regulation:

1. That all food (including meals and a la carte snacks) served or sold to any child in MCPS during any breakfast or lunch period contain no more than 10% of its calories from added sugars by August 1, 2018.
2. That beginning in school year 2017-2018, all beverages sold in vending machines in MCPS at all hours be compliant with MCPS' wellness policy for drinks sold during the school day (i.e., no soda, full calorie sports drinks or heavily sugar-sweetened beverages).

Sincerely,

Lindsey Parsons, Executive Director, Real Food for Kids – Montgomery

José Andrés, Chef/Owner, ThinkFoodGroup & minibar by José Andrés

Christie Balch, Executive Director, Crossroads Community Food Network

Stefania Clerici, Chair, Health and Safety Committee, MCCPTA

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<sup>4</sup> U.S. Department of Health and Human Services and U.S. Department of Agriculture. (2015). 2015 – 2020 Dietary Guidelines for Americans. 8<sup>th</sup> Edition. <http://health.gov/dietaryguidelines/2015/guidelines/>.

<sup>5</sup> Center for Science in the Public Interest. (2004). Schools and School Districts That Have Improved School Foods and Beverages and Not Lost Revenue. <https://cspinet.org/resource/schools-and-school-districts-have-improved-school-foods-and-beverages-and-not-lost-revenue>

<sup>6</sup> Mason, M, Zaganjor, H, Bozlak, CT, Lammel-Harmon, C, Gomez-Feliciano, L, Becker, AB. (2014). Working With Community Partners to Implement and Evaluate the Chicago Park District's 100% Healthier Snack Vending Initiative. *Prev Chronic Dis* 11:140141. <http://dx.doi.org/10.5888/pcd11.140141/>

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