Middle Schools Have Less Nutritional Food and Beverage Choices than High Schools, in one Utah School District

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Objectives: The purpose of this study was to evaluate the nutritional value of foods and drinks that compete with the school ala cart lunch program for one Utah school district. This baseline assessment will inform the districts USDA mandated school wellness policy.

Setting: Jordan School District, the largest school district in Utah, which consists of 17 middle and 12 high schools. Each school has from 7-31 vending machines, on campus. Each school also offers an ala cart snack line, directly regulated by the district.

Methods: During January-February 2006, 13 University of Utah Master’s program student-interviewers completed food and drink inventories of all vending machines and ala cart lunch items. Interviewers spent an average of two hours evaluating each school. The data was entered into an online survey. Nutrition analysis was performed on all the unique food (n=328) and drink (n=122) items. This study was approved by the district.

Results: Middle schools’ ala cart food calories (mean=357.7) and ala cart beverage calories (mean=20.8) exceed high schools’ ala cart food calories (mean=302.5) and ala cart beverage calories (mean=7.6). Middle schools had ala cart food serving sizes significantly larger (mean=125.6g versus 110.4g) than high schools. Middle schools also had notably a higher percent of calories from fat for beverages on the ala cart snack line (mean=23.4% versus 15.1%) than high schools; the greatest contributors were the assorted milk products. High schools and middle schools exceeded the USDA’s recommendation for percent calories from saturated fat (from +1.5% to +3.6%), for both vending and ala cart foods. Nachos with cheese and chocolate chip cookies contributed the most to total calories, fat calories and saturated fat calories from foods. Shakes and regular chocolate milk contributed the most from beverages.

Conclusion: Childhood and adolescent obesity rates, an ever growing concern for community and school health advocates, are continually rising. This study illustrates the prevalence of poor food choices available to children in public schools. The results described in this abstract are clinically significant. For example, by reducing an individual’s fat intake by 1-3%, heart disease incidence can decrease by 31,000 events and type II diabetes can be reduced by 50%. School health advocates have a vital responsibility in promoting and controlling a healthy food environment available to Utah students.