POLICY AT-A-GLANCE





Healthier Food Options for Public Places

The American Heart Association's Position

- Develop policies that incorporate established healthy dietary guidance, including elimination or reduction of sugary drinks and trans fats; limits on sodium and saturated fat; choose minimally processed food, availability and promotion of consumption of vegetables, fruits, legumes, nuts, seeds^{1,2}, fiber-rich whole grains, lean proteins and fish; and availability and promotion of reduced-portion options.
- When possible use one of the national nutrition standards—American Heart Association Food and Beverage Toolkit, Food Service Guidelines for Federal Facilities, National Alliance for Nutrition and Activity Healthy Vending Guidelines, National School Lunch Program, Smart Snacks, or Child and Adult Care Food Program—instead of creating new location-specific standards.

Fast Facts:

- Healthier food options for public places policies can support health by increasing access to healthier food and beverages and making those options more affordable and appealing.³
- 2. Employers can help their employees live healthier through providing more nutritious food and beverages in cafeterias and vending machines.³
- Supporting employee health can benefit employers through lower health care costs and staff missing fewer days of work due to illness.⁴
- 4. About half of all calories consumed from vending machines come from sugary drinks and candies.⁵
- Nearly a quarter of working adults obtain food while at work and those foods are likely to be high in empty calories, sodium, and refined grains, and low in whole grains and fruit.⁶
- Incorporate behavioral design principals, like menu labeling or pricing, placement, and promotion strategies, to encourage healthy food consumption.
- To help with implementation, the nutrition standards should be included in the policy, request for proposals, and contract.
- Incorporate compliance provisions, like dedicated staff time for monitoring, required compliance checks by reviewing sales data or inspections, or fines or other penalties in contracts for non-compliance, to help ensure successful implementation.
- Evaluate the implementation and outcomes of these policies. Ideally, assessment tools will be developed from examples such as WellSAT, used to help employers and government agencies assess the strength and impact of their policies.
- Identify implementation barriers and revise strategies accordingly.
- Allow for regular review and update of standards to accommodate emerging science.

Progress to Date

The American Heart Association has been engaged in healthier food option for public places campaigns across the country. As of March 2019, this work resulted in close to 30 policies in the following locations: Fayetteville, Little Rock, Rogers, and Springdale, AR; San Francisco, CA; Washington, DC; St. Petersburg, FL; Savannah, GA; Louisville, KY; Jefferson Parish and New Orleans, LA, and Louisiana; Baltimore City, Baltimore County, Montgomery County, and Prince George's County, MD; Jackson, MS; Kansas City, MO; Albuquerque, NM; Mecklenburg, NC; Oklahoma City and Tulsa, OK; Philadelphia, PA, Charleston, Columbia, and Spartanburg County, SC; Dallas County, TX; and Madison, WI.

For more information and resources from the American Heart Association's policy research department and nutrition policy positions please visit: https://www.heart.org/policyresearch

Policy At A Glance: Healthier Food Options in Public Places

Updated: 02/2022

¹ Van Horn, L., Carson, J., Appel, L., Burke, L., Economos, C., Karmally, W., Lancaster, K., Lichtenstein, A., Johnson, R., Thomas, R., Vos, M., Wylie-Rosett, J. and Kris-Etherton, P. (2016). Recommended Dietary Pattern to Achieve Adherence to the American Heart Association/American College of Cardiology (AHA/ACC) Guidelines: A Scientific Statement From the American Heart Association. *Circulation*, [online] 134(22). Available at: https://www.ahajournals.org/doi/10.1161/CIR.00000000000000462 [Accessed 5 Apr. 2019].

² Arnett et al. 2019 ACC/AHA Guideline on the Primary Prevention of Cardiovascular Disease http://www.onlinejacc.org/content/early/2019/03/07/j.jacc.2019.03.010?_ga=2.38422371.1945635874.1554169478-931007957.1538167525

³ Centers for Disease Control and Prevention. Improving the Food Environment Through Nutrition Standards: A Guide for Government Procurement. U.S. Department of Health and Human Services. February 2011.

⁴ Gardner CD, Whitsel LP, Thorndike AN, et al. Food and beverage environment and procurement policies for healthier work environments. Nutr Rev. 2014; 72: 390-410.

⁵ Chapman LS. Meta-evaluation of worksite health promotion economic return studies: 2012 update. Am J Health Promotion. 2012;26:TAHP1-TAHP12. Available at: http://chapmaninstitute.com/articles/05_TAHP_26_4_Meta_Evaluation_2012.pdf.

⁶ Onufrak SJ, et al. Foods Consumed by US Adults From Cafeterias and Vending Machines: NHANES 2005 to 2014. American Journal of Health Promotion, Jan. 2019, doi:10.1177/0890117118821846

⁷ Onufrak, SJ, et al. Foods and Beverages Obtained at Worksites in the United States. Journal of the Academy or Nutrition and Dietetics. 2019; https://doi.org/10.1016/j.jand.2018.11.011