

# TEXAS PUBLIC HEALTH COALITION



Physicians Caring for Texans



## **Senate Education Senate Bill 317 by Sen. Carlos Uresti March 5, 2013**

Good morning Chair and members of the committee. I'm Lisa Swanson, MD, a pediatrician in Mesquite, and member of the Texas Medical Association's Committee on Child and Adolescent Health. Today I'm testifying on behalf of the Texas Medical Association (TMA), Texas Pediatric Society (TPS), and the Texas Public Health Coalition, which consists of more than 20 organizations dedicated to advancing core public health principles at the state and community levels. Thank you, Senator Uresti, for your interest in child nutrition. We would like to express our support for Senate Bill 317, as well as our concerns.

In Texas, 4 million young people attend school for approximately six hours a day. Schools are in a unique position to help improve the health status of children and adolescents. We appreciate your commitment to ensuring the choices our children make at school are healthy. As physicians, we know it's more expensive to treat an obese adult than provide primary preventive care for children. It's important to teach children healthy behaviors at a young age so they grow up fit and healthy.

We appreciate the intent of this bill and recognize Texas as a leader in school nutrition policy. In fact, some of the provisions of SB 317 are already in place in Texas, and in some cases, are more specific than what is outlined in this legislation. For example, state guidelines implemented in 2007 promote fruits and vegetables and allow only a certain portion size of beverages that are 100-percent fruit and vegetable juices.

In addition, Texas schools continue to implement Healthy, Hunger-Free Kids Act of 2010 requirements, such as increasing whole grain, fruit, and vegetable options, and shifting dairy offerings to low-fat options. Federal rules on competitive foods recently drafted include specific recommendations on calorie and portion size.

Sugar-sweetened beverages are the largest source of added sugars in the diet of adolescents in the United States. Added sugars mean added calories contributing to weight gain and obesity. We support the provisions of Senate Bill 317 promoting consumption of water, low-fat milk, and 100-percent fruit and vegetable juices. However, we want to ensure pieces of SB 317 do not take steps backward in promoting healthy habits for our students as schools are making healthy changes thanks to both Texas Public School Nutrition Policy and federal rules. We encourage you to consider these requirements in SB 317 to be in line with or stronger than the Texas public school policy.

Further, we have concerns that SB 317 would allow for even zero calorie sports drinks at schools. Electrolyte replacement beverages often contain carbohydrates, minerals, sodium, potassium, calcium, and magnesium. While certain competitive athletes may find benefit to consuming these drinks, they are unnecessary for the average student involved in physical activity.<sup>1</sup> Additionally, Texas elementary schools currently do not allow sports drinks, and this legislation would allow for sports drinks at all levels. Many children are already drinking less than the recommended amount of milk, and we have concerns that by making any type of sports drink readily available, those will replace water and milk in children's diets.

With these concerns addressed, TMA and TPS offer our support for SB 317. TMA and TPS again would like to thank Senator Uresti for his efforts to promote healthy eating among children.

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<sup>1</sup> American Academy of Pediatrics. Clinical report — sports drinks and energy drinks for children and adolescents: Are they appropriate? *Pediatrics*. 2011. Accessed online at <http://pediatrics.aappublications.org/content/early/2011/05/25/peds.2011-0965.full.pdf+html>.