

## NOURISHING framework

### 0 Offer healthy food and set standards in public institutions and other specific settings

This table provides examples of the types of policy action that can be taken within this policy area, examples of where these policy actions have been implemented, and a brief description of what the action involves. It provides a global snapshot, largely of policies already implemented; it is not necessarily comprehensive. The examples were collated through a review of international reports of policy actions around the world, academic articles reporting on policy actions, and online government resources.

We welcome feedback. Please contact us at [policy@wcrf.org](mailto:policy@wcrf.org) if you would like to add any further examples of implemented policies, see the policy documents that we reference, or have any further questions or comments.

EXAMPLES OF POLICY ACTIONS	EXAMPLES OF WHERE IMPLEMENTED	WHAT THE ACTION INVOLVES
<b>Fruit &amp; vegetable initiatives in schools</b>	<b>Australia</b>	Crunch&Sip® is a vegetable and fruit programme in Australia promoting the consumption of fruit, vegetables and water during class time (“Crunch&Sip time”). It involves students bringing in fruit, vegetables and water from home. It was launched in 2005 in Western Australia, and is currently funded by Healthway (a government agency that funds activities related to the promotion of good health, with a particular focus on young people) as part of the Australian government’s Go for 2&5® fruit and vegetable campaign, and coordinated by the Cancer Council Western Australia. It has since been extended to New South Wales (through the Healthy Kids Association) and South Australia (through the South Australian Dental Service). Funding is currently provided by each of the state governments. Schools participating in Crunch&Sip® are required to ensure that at least 80% of classes and 70% of students participate in the daily fruit and vegetable break. Schools need to endorse a supportive school policy and are encouraged to implement a parent communication strategy and develop curriculum material.

		<p><b>Evaluations</b>  Myers G et al (2018). A process and outcome evaluation of an in-class vegetable promotion program. <i>Appetite</i> 125, 182-189.<sup>i</sup></p> <p>Nathan N, Wolfenden L, Butler M et al. (2011) Vegetable and fruit breaks in Australian primary schools: prevalence, attitudes, barriers and implementation strategies. <i>Health Education Research</i> 26, 722-731.<sup>ii</sup></p>
	<p><b>Canada</b></p>	<p>School fruit and vegetable programmes operate at the province level in British Columbia, Manitoba and Northern Ontario:</p> <ul style="list-style-type: none"> <li>- British Columbia’s School Fruit &amp; Vegetable Nutritional Program, launched in 2005 and administered by the British Columbia Agriculture in the Classroom Foundation, provides fresh local fruit or vegetable snacks to schools every other week, 13 times in the school year. In 2013, the programme expanded to deliver milk to students in kindergarten to grade two. It is administered by the British Columbia Agriculture in the Classroom Foundation, and funded by the British Columbia Ministry of Health in partnership with the Ministries of Agriculture and Education.</li> <li>- Ontario’s Ministry of Health and Long-Term Care launched the Northern Fruit and Vegetable Program (NFVP) in Northern Ontario in 2006, in cooperation with the Ontario Fruit and Vegetable Growers’ Association and the Ontario Ministry of Agriculture, Food and Rural Affairs. Elementary and intermediate school-aged children receive fruit and vegetable snacks at no cost, in combination with healthy eating and physical activity education, twice per week from January to June. NFVP is currently delivered in three regions of Northern Ontario, in partnership with the local health units, school boards, and elementary and intermediate schools.</li> <li>- Manitoba’s Vegetable &amp; Fruit Snack Program, launched in 2008, is funded by the Province of Manitoba and the Public Health Agency of Canada; the number of times pupils receive fruit and vegetable snacks per week depends on each school’s way of implementation.</li> </ul>
	<p><b>EU countries</b></p>	<p>The EU School Fruit Scheme, launched in the 2009-2010 school year, merged with the EU School Milk Scheme on 1 August 2017 into one legal framework based on the Regulation on the new School Fruit, Vegetables and Milk Scheme (Regulation EU No 2016/791). The scheme is funded through the EU’s common agricultural policy and supports the distribution of fruit, vegetables and milk and milk products to schools across the EU as part of a wider programme of education about European agriculture and the benefits of healthy eating. It provides financing to Member States based on the number of school children and level of development of the country. The implementation of the programmes is at the discretion of national or regional governments, but to receive funding, they must distribute fruit, vegetables and milk</p>

		<p>products in schools and implement educational measures, such as farm and market visits, educational material distributed to teachers and interactive games on education and nutrition, and regularly monitor and evaluate implementation. Foods containing added sugars, salt, fat, sweeteners or artificial flavor enhancers are exempt from the scheme: as an exception, limited quantities of added sugar, salt and fat are allowed if they are approved by the Member States' health/nutrition authorities. The Member States determine the frequency and duration of the distribution of the food.</p> <p><b>Evaluations</b>  European Commission, Directorate-General for Agriculture and Rural Development. Evaluation of the European School Fruit Scheme Final Report. Brussels, 2012<sup>iii</sup></p> <p>European Court of Auditors. Are the school milk and school fruit schemes effective? Special Report No 10. Luxemburg, 2011<sup>iv</sup></p>
	<p><b>Norway</b></p>	<p>In 2007, the Norwegian government introduced legislation requiring schools to offer one free piece of fruit or vegetables, five days a week to pupils in grades 1–10. This was repealed in autumn 2014. In its place, a subsidised programme that requires parents to subscribe has been expanded to all primary schools.</p> <p><b>Evaluation</b>  Øvrum A, Bere E (2013) Evaluating free school fruit: results from a natural experiment in Norway with representative data. <i>Public Health Nutrition</i> 17(6), 1224-1231<sup>v</sup></p>
	<p><b>UK</b></p>	<p>The School Fruit and Vegetable Scheme has operated in England since 2004. Children aged four to six who attend a fully state-funded infant, primary or special school are entitled to receive a free piece of fruit or vegetable each school day.</p> <p>In Scotland, the Free Fruit in Schools initiative provides one portion of fruit three times a week during term time to all Key Stage 1 and 2 pupils (primary school). It is implemented at the discretion of local authorities.</p> <p><b>Evaluations</b>  Fogarty AW et al. (2007) Does participation in a population-based dietary intervention scheme have a lasting impact on fruit intake in young children? <i>International Journal of Epidemiology</i> 36(5), 1080-1085<sup>vi</sup></p> <p>Wells L, Nelson M (2005) The National School Fruit Scheme produces short-term but not longer-term increases in fruit consumption in primary school children. <i>British Journal of Nutrition</i> 93(4), 537-542<sup>vii</sup></p>
	<p><b>US</b></p>	<p>The Fresh Fruit and Vegetable Program, piloted in the US from 2002 onwards and implemented nationwide in 2008 (based on the 2008 Farm Bill), makes funds available to elementary schools</p>

		<p>with at least 50% of students eligible for free or reduced price meals. Participating schools receive \$50–\$75 per child per year and are free to decide what fruit and vegetables to purchase.</p> <p><b>Evaluations</b>  Lin Y-C, Fly AD (2016) USDA Fresh Fruit and Vegetable Program Is More Effective in Town and Rural Schools Than Those in More Populated Communities. <i>Journal of School Health</i> 86(11), 769-777<sup>viii</sup></p> <p>Bartlett S et al. (2013) Evaluation of the Fresh Fruit and Vegetable Program (FFVP): Final Evaluation Report. US Department of Agriculture, Food and Nutrition Service, Alexandria, VA<sup>ix</sup></p>
<p><b>Mandatory standards for food available in schools, including restrictions on unhealthy food</b></p>	<p><b>Australia</b></p>	<p>There are no national mandatory standards in Australia (see below for details of national voluntary guidelines). However, six states and territories have implemented mandatory standards, which are either based on the national voluntary guidelines or nutrient and food criteria defined by the state: Australian Capital Territory (2015), New South Wales (2011), Northern Territory (2009), Queensland (2007), South Australia (2008), and Western Australia (2014). All of these states and territories identify “red category” food, which is either completely banned in schools or heavily restricted (eg offered no more than one or two times per term). The ACT Public School Food and Drink Policy is mandatory for government primary and secondary schools, but not for independent or catholic schools.</p> <p>Queensland’s Smart Choices school nutrition standards separate food and drinks into green, amber and red categories based on their energy, saturated fat, sugar, sodium and fibre content. Smart Choices ensures that “red” food and drinks are eliminated across the whole school environment.</p> <p>In February 2014, the Australian Capital Territory (ACT) announced the phasing out of sugary drinks for sale in school canteens by the end of 2014. The 2015 ACT School Food and Drink Policy prohibits the sale of sugary drinks in ACT public school canteens. ACT is working to ensure water is the easiest choice available, including the installation of two water refill stations in each public school.</p>
	<p><b>Bahrain</b></p>	<p>The Ministry of Health of Bahrain has developed a mandatory list of permitted, prohibited and conditionally allowed food for public elementary and secondary schools. According to the 2016/2017 Food Canteen List, only unsweetened 100% fruit juice, water, milk and milk drinks are permitted; fruit drinks and nectar, soft and energy drinks are prohibited. Permitted food includes fresh fruit and vegetables, while conditionally allowed food products have to comply with criteria such as not using trans fat, using low-fat cheese instead of cream cheese for sandwiches and limiting portion size. Banned food includes processed meat, potato chips, mayonnaise, puff pastries, sweets and candies (but not chocolate which is a conditionally allowed food).</p>

	<p><b>Bermuda</b></p>	<p>In 1997, Bermuda implemented the mandatory Healthy Schools Nutrition Policy which contains school food standards including the provision of fruit and vegetables in food service/cafeteria menus and all school events that provide food, limits on the use of food high in salt and sugar, provision of low-fat dairy products, leaner meats, whole grains, fruit and vegetables, the use of lower-fat cooking methods, the consumption of whole fruit and vegetables as preferable to the sole consumption of fruit and vegetable juices and school lunches are required to be consistent with the recommendations of Bermuda’s Daily Dietary Guidelines EatWell Plate.</p> <p>The Food Service Providers Contract, implemented in 2009 to strengthen the compliance of cafeteria, hot lunch and breakfast vendors in schools, mandates that food provided in schools must be consistent with the Healthy School Nutrition Policy. To monitor compliance, a form exists in which anyone at any school can rate various aspects of a meal provided by a food service provider (eg appropriateness of portion sizes, inclusion of four of five food groups, etc).</p> <p>The Ministry of Education also has a policy in which only fruit, yoghurt, cheese, crackers and vegetables can be eaten at morning recess.</p>
	<p><b>Brazil</b></p>	<p>Resolution no. 38 (16 July 2009) promulgated by the Brazilian Ministry of Education sets food- and nutrition-based standards for the food available in the national school meal programme (Law 11.947/2009 – Regulamento del Programa Nacional de Alimentação Escolar). Article 17 prohibits drinks of low nutritional value (eg soda), canned meats, confectionary, and processed food with a sodium and/or saturated fat content higher than a specified threshold.</p> <p>School “canteens” – kiosks and stores where food can be purchased for takeaway inside public schools – are covered by voluntary guidelines (see “O - Voluntary guidelines for food available in schools”).</p>
	<p><b>Bulgaria</b></p>	<p>In Bulgaria, the reduction of salt, fat and sugar content in food served in all canteens in schools, kindergartens and childcare centres was mandated by ordinances in 2009, 2011, and 2013 respectively. In addition, there are restrictions in place for certain unhealthful food and drinks in vending machines. The corresponding recipe books used by school caterers for school children and children aged 0–3 years were updated in 2012 and 2013, respectively, to reflect the ordinances’ requirements. The recipe book for kindergarten pupils is under revision. Compliance with the ordinances is monitored by the Regional Health Inspectorates who may fine offenders.</p>
	<p><b>Chile</b></p>	<p>In 2012, the Chilean government approved a Law of Nutritional Composition of Food and Advertising (Ley 20.606). In June 2015, the Chilean authority approved the regulatory norms required for the law’s implementation (Diario Oficial No 41.193), which came into effect on 27 June 2016. The regulatory norms define limits for calories, saturated fat, sugar and sodium content considered “high” in food and beverages. The law prohibits the sale of these “high in” food items and beverages in schools. See “N – Nutrition label standards and regulations on the</p>

		use of claims and implied claims on food” and “R – Restrict food advertising and other forms of commercial promotion” for the law’s labelling regulations and marketing restrictions to children.
	<b>Costa Rica</b>	Executive Decree No. 36910-MEP-S (2012) of the Costa Rican Ministries of Health and Education sets restrictions on products sold to students in elementary and high schools, including food with high levels of fats, sugars and salt such as chips, cookies, candy and carbonated sodas. Schools are only permitted to sell food and beverages that meet specific nutritional criteria. The restrictions were upheld by the Constitutional Court in 2012 following a challenge by the Costa Rican Food Industry Association.
	<b>Ecuador</b>	In October 2014, the Ministries of Public Health and Education in Ecuador implemented a regulation for school bars within the national education system (Reglamento de bares escalares del system nacional de educacion - Ministerial Agreement 5, Official Record 232). The regulation establishes mandatory nutrition requirements for food and drinks prepared and sold in school bars and cafeterias. Food and drinks must be natural, fresh, nutritious and healthy and it is prohibited to sell or advertise 1) processed foods and drinks with high concentrations of fats, sugars and salt (specified within regulation) 2) food and drinks containing caffeine and/or non-caloric sweeteners 3) energy drinks 4) processed drinks with less than 50% natural food.
	<b>Estonia</b>	In 2008, the Estonian Ministry of Social Affairs adopted updated regulations on nutrition requirements applicable to food served in school and pre-school canteens. These requirements contain upper limits for salt, sugar and fat content, and restrict (deep) fried products, sweet treats and soft drinks.
	<b>Fiji</b>	The Ministry of Education’s Food and Nutrition Policy requires all school canteen operators to comply with Fiji’s School Canteen Guidelines, developed by the National Food and Nutrition Centre in 2005 and revised in 2013. The guidelines outline how to prepare and provide healthy “everyday” food with recipes and nutrition guidelines. They are enforced by the Ministry of Education.
	<b>Finland</b>	In 2017, the Finnish National Nutrition Council updated their nutrition recommendations for school meals replacing the recommendations from 2008. The updated recommendations are based on Health from food – Finnish nutrition guidelines (2014) and Eating together – food recommendations for families with children (2016). The recommendations provide a basic plate model for individual energy expenditure. Food and nutrient recommendations for salt, fibre, fat, starch, and fat content are outlined for all of the components of the basic plate model. The recommendations state that drinks available at school meals should include fat-free milk/milk drinks and buttermilk, fortified with vitamin D. Other liquid dairy products and fermented milk products should be fat-free or low-fat products with a maximum fat content of 1%. Cheese products with a fat content of at most 17% and a maximum salt content of 1.2% should be selected. Fresh water should be available as the primary beverage at meals and must be available as the primary beverage to everybody during the whole school day. No soft drinks,

		<p>energy drinks or any other acidified beverages or beverages with added sugar are served at school.</p> <p>The Finnish Act on Early Childhood Education and Care, Section 2b (8.5.2015/580), Section 6 (8.5.2015/280) and Basic Education Act, Section 31(13.6.2003/477) outline that school-aged children shall be provided with healthy and necessary nutrition that fulfills their nutritional needs and provided a meal free of charge on every school day. Children at kindergarten/childcare are entitled to a meal each day and low-income populations are provided with a free meal.</p> <p>In 2009, legislation required products entitled to EU subsidies under the School Milk Scheme to meet nutritional criteria, including maximum levels of salt content. The criteria are set jointly by the Finnish National Nutrition Council and KELA, the Social Insurance Institution of Finland. In August 2017, the legislation was amended so that only fat-free milk and fat-free sour cream is subsidised, and cheese was removed from the subsidy.</p>
	<p><b>France</b></p>	<p>Decree No. 2011-1227 of 30 September 2011 (arising from Law No. 2010-874 of 27 July 2010 on the modernisation of agriculture and fisheries) regulates the nutritional quality of school meals in France, including the diversity and composition of meals, provision of water, portion sizes and restrictions on salt and sauces outside of prepared dishes. School canteen managers are required to keep record of menus for the previous three months at all times, including detailed information on food purchased from suppliers, and are required to identify clearly on menus seasonal ingredients in the composition of the meal. This follows from Interministerial Circular No. 2001-118 of 25 June 2001 which made recommendations on consuming a balanced diet in schools.</p>
	<p><b>Germany</b></p>	<p>Two German states have enshrined the voluntary guidelines on quality standards for school meals by the German Nutrition Society (DGE) in law: Berlin implemented the Law for quality improvements of school lunch meals in 2014 in all-day primary schools. The Law sets the DGE quality standards as a minimum requirement which schools have to adhere to, in addition to setting up a lunch meal committee that regularly conducts quality controls and supports the selection of appropriate food suppliers.</p> <p>The state of Saarland requires all-day primary and secondary schools to provide school meals that are in line with DGE quality standards (Article 8 of the Regulation of all-day primary and secondary schools).</p> <p>The DGE guidelines recommend that schools provide water and unsweetened herbal or fruit teas, and prohibit drinks that are high in sugar including juices and energy drinks. The guidelines contain a 20-day plan suggesting serving whole grains on at least four days and potato products a maximum of four days; salad, vegetables or legumes each day; fruit at least eight times; dairy products (ideally low-fat) at least eight times; fish at least four times and meat a maximum of 8 times; rapeseed oil is the only permitted oil.</p>

	<p><b>Hungary</b></p>	<p>Since 2012, food and beverages subject to the public health product tax (see “U – Use economic tools to address food affordability and purchase incentives” for details on the tax) may not be sold on school premises or at events organised for school children, including out-of-school events based on the Ministerial Decree 20/2012 (VIII. 31.) on the Operation of Public Education Institutions and the Use of Names of Public Education Institutions. Section 130(2) of the Decree requires the head of the educational institution to consult the school health service prior to entering into agreements with vending machine operators or food vending businesses. The school health service verifies whether the products to be sold meet the nutritional guidelines set by the National Institute of Pharmacy and Nutrition. Products that do not comply with the guidelines’ “healthy eating” requirements or that have a negative impact on the students’ attention or behaviour, such as those containing artificial colours found in sugary snacks and drinks, are prohibited.</p>
	<p><b>Iran</b></p>	<p>In 2008, the Iranian Ministry of Education and Ministry of Health developed the guideline for healthy diet and school buffets. In 2013, the guidelines’s nutrition part was updated. The guideline contains a list of healthy and unhealthy food, established by an expert committee based on their content of sugar, salt, fat, and harmful additives. It also includes guidance on proper food preparation and catering as well as maintenance of the physical environment in which food is prepared (kitchen, storage).</p>
	<p><b>Israel</b></p>	<p>In 2017, the Israeli Government implemented the Lunch-Program-Healthy Nutrition Regulation for food provided to children attending after school programmes. Foods that can be provided include fruits and vegetables, whole wheat products, lentils, low-fat poultry and fish, and cooked food with no added salt, sugar and fat. Foods with added sugar, beverages sweetened with both sugar and artificial sweeteners and foods that display a red label, cannot be provided. In August 2018, the Israeli Government passed the Healthy School Kiosk regulation that extends these guidelines to stipulate what foods must be offered in schools including all the above and also milk products.</p>
	<p><b>Jamaica</b></p>	<p><b>Added May 2019:</b> In November 2018, the Ministry of Health published mandatory nutrient guidelines for beverages sold/served within all public educational institutions for children (i.e. early childhood, primary level and secondary level). The guidelines prohibit sweetened beverages that exceed a maximum sugar concentration of: 6g/100ml ( effective 1 January 2019); 5g/100ml (effective 1 January 2020); 4g/100ml (effective 1 January 2021); and 2.5g/100ml (effective 1 January 2023). Prohibited beverages include soft drinks, sports drinks, energy drinks, sweetened waters, coffee and tea beverages if they are above the stipulated limits. All unsweetened beverages are permitted, such as plain or unsweetened flavoured/infused water, 100% juices, 100% coconut water, plain milk or unsweetened milk products, plain milk substitutes and unsweetened milk substitute products. The guidelines also caution against beverages containing &gt;10mg/serve of caffeine, discourage the use of artificial sweeteners and recommend beverage portions sold/served of &lt;12 ounces (not including water).</p>



	<p><b>Jordan</b></p>	<p>The Jordanian Ministry of Health has set food standards regulating which food may be sold to students in school canteens as part of the National School Health Strategy (2013–17), which was prepared in coordination with a multi-sectorial committee and approved in 2012.</p>
	<p><b>Kuwait</b></p>	<p>The Ministries of Health and Education of Kuwait introduced a ban of fizzy drinks, crisps and chocolates on school premises to reduce the intake of fat and sugar by pupils, and to increase their milk consumption; they also introduced fruit and vegetables in the breakfasts offered by tuck shops in schools. The ban is monitored by the Ministry of Education but compliance is not reported to be high.</p>
	<p><b>Latvia</b></p>	<p>In 2006, the Latvian government implemented legislation that prohibited the sale/availability of soft drinks, drinks with added colours, sweeteners, preservatives and caffeine on all school premises.</p> <p>In 2012, the government set salt levels for all food served in educational institutions. Levels may not exceed 1.25g of salt per 100g of food product; fish products may contain up to 1.5g of salt per 100g of product. The standards also apply in hospitals and long-term social care institutions (see below).</p>
	<p><b>Lithuania</b></p>	<p>In November 2011, the Lithuanian Ministry of Health approved Order V-964, which set catering standards for pre-schools, secondary schools and children’s social care institutions. Food and nutrient-based standards exist for lunches (eg obligatory vegetable and fruit offering, “oil-boiled” foodstuffs, sweets and savoury pastry are prohibited), drinking water must be provided and soft drinks are prohibited.</p>
	<p><b>Macedonia</b></p>	<p>In September 2014, the Macedonian Ministry of Education’s Rulebook on nutrition standards and meals in primary schools was implemented, setting limits on permissible salt, sugar and fat levels of food served in primary schools. Kindergartens and holiday camps are subject to the Ministry of Labour and Social Policy’s Rulebook on standards and norms for services provided by institutions caring for children, implemented in January 2014. It contains intake requirements on calories, carbohydrates, protein, fats, vitamins and minerals based on WHO recommendations. The nutrition standards for kindergartens are widely implemented. The implementation of the elementary school nutrition standards is reported to move at a slower pace, mostly because elementary schools use external catering services which take longer to adjust to the nutrient limits.</p> <p>In September 2016, the Macedonian Ministry of Education implemented the <i>Rulebook on nutrition standards and meals for the students living in student dormitories</i>. The nutrition standards, based on population-based nutrition guidelines of the Ministry of Health and Institute of Public Health, outline specific nutrient levels (for calories, carbohydrates, protein, fats, sugars, vitamins, minerals) which apply to meals served in all university student dormitories in both</p>

		public and private dormitories in Macedonia. The nutrition standards include recommended food and dishes for individual meals and recommended frequency of certain food categories.
	<b>Malaysia</b>	The Guide for Healthy School Canteen Management (2012), developed by the Ministry of Education and mandatory for public schools, categorises food items into those which may be sold, those which are not encouraged to be sold and those whose sale is prohibited in school canteens. Prohibited food includes sweets, preserved food, extruded snacks containing artificial flavours and colourings (which are snacks mainly based on corn flour or a combination of flours undergoing extrusion and then coating with a combination of vegetable oil and seasoning), and food and beverages containing alcohol. The list of prohibited food is under review (2016), in particular with respect to carbonated drinks.
	<b>Mauritius</b>	In 2009, a regulation was passed in Mauritius banning soft drinks, including diet soft drinks, and unhealthy snacks from canteens of pre-elementary, elementary and secondary schools.
	<b>Mexico</b>	In August 2010, the Mexican Ministries of Education and Health issued a set of mandatory food and beverage guidelines for elementary schools for roll-out in 2011–14. They were developed under the framework of the National Agreement for Healthy Nutrition. The guidelines promote the daily intake in schools of healthy food, such as fruit, vegetables and water; ban sodas; limit the availability of other soft drinks, whole milk, salty and sweet snacks, and desserts that comply with nutritional criteria to a maximum of two days per week; and prohibit completely products that do not comply with the nutritional criteria. The guidelines were updated in 2014. The revised guidelines extend the standards to secondary schools, include recommendations for food brought into schools from home, and increase the stringency of some of the nutrient criteria.
	<b>Peru</b>	In March 2015, Health Directive No. 063 Promotion of Healthy Kiosks and School Canteens was adopted in Peru. The Health Directive establishes recommendations for food provided in school kiosks and canteens, including the amount of energy to be supplied in lunches. School kiosks and canteens are evaluated twice a year at the regional level using a scorecard provided within the Health Directive. School kiosks and canteens that meet the indicators of the evaluation are graded as healthy and given a green pennant.
	<b>Poland</b>	In 2014, the Ministry of Health amended the Polish Act on Food and Nutrition Safety from 2006 (Journal of Laws, item 1225; amended by the Act of 28 November 2014 amending the Act on Food and Nutrition Safety, Journal of Laws, item 1256) to include rules for sale, advertising and promotion of food (based on a list of food categories) and nutrition standards for canteens in pre-schools, primary and secondary schools. The new regulation (Act of 28 November 2014 amending the act on food and nutrition safety), created by the Ministry of Health, outlines nutrition standards for food and beverages intended for sale: $\leq 0.12\text{g sodium } 100\text{g/ml}$ of product, $\leq 10\text{g sugar}/100\text{g/ml}$ (except breakfast cereals $\leq 15\text{g sugar}/100\text{g}$ ), and $\leq 10\text{g fat}/100\text{g}$ of

		product. The regulation also includes food category-specific restrictions. The new Act came into effect on 1 September 2015.
	<b>Romania</b>	Legislation introduced in Romania in 2008 sets maximum amounts for sugar, fat and salt in food sold in schools and pre-schools (Ministerial Order 1563/2008); the maximum levels amount to 15g sugar, 20g fat and 1.5g salt or 0.6g sodium per 100g of a food product. Soft drinks are prohibited and drinking water must be accessible.
	<b>Slovenia</b>	<p>All school meals must follow dietary guidelines as set out by Slovenia's Law on School Nutrition (2010, amended in 2013). The Act is complemented by dietary guidelines (including a list of food that are not recommended), recipe books, cross-curriculum nutrition education and food procurement standards available to all schools.</p> <p><b>Evaluation</b>  Gregorič M et al. (2015) School nutrition guidelines: overview of the implementation and evaluation. <i>Public Health Nutrition</i> 18(9), 1582-1592<sup>x</sup></p>
	<b>South Korea</b>	In South Korea, the sale of sugary drinks within school premises, along with other energy-dense and nutrient poor foods is prohibited. Originally enacted as an action of a Special Presidential Committee in 2007, it is now enforced by the Special Act on the Safety Management of Children's Dietary Life.
	<b>Sweden</b>	<p>The Swedish Education Act came into force 1 July 2011 requiring school meals to be nutritious and free of charge.</p> <p>The National Food Agency was commissioned to work with the Swedish National Agency of Education by the Ministry of Education and Research to develop school food guidelines. The Good School Meals guidelines, published in 2007 and revised in 2013, are for primary schools, secondary schools and youth recreation centres. The guidelines include age-specific reference values for energy and nutritional content in school lunches and portion sizes, and drinks are limited to water and milk. Ice cream, pastries and sweets are not provided by the school. The quality of school meals is monitored and assessed by an online tool (SkolmatSverige), and used by over three-quarters of schools in Sweden.</p>
	<b>Trinidad and Tobago</b>	In May 2017, the Trinidad and Tobago Ministry of Health introduced a ban on the sale or serving of sugar sweetened drinks at all Government and Government-assisted schools. Banned sweetened drinks include soft drinks, juice drinks, flavoured water, sports/energy drinks, tea and coffee and milk-based drinks with added sugars and artificial sweeteners. Only water, 100% juice, low-fat milk and blended vegetable or fruit drinks can be sold at schools. The changes were introduced in a phased approach and all cafeterias and canteens needed to be in full compliance by September 2017.

	<p><b>UAE</b></p>	<p>The School Canteen Guidelines for the Emirate of Abu Dhabi (2011–12) are set and revised by a joint committee of representatives from the Abu Dhabi Education Council, the Abu Dhabi Health Authority and the Abu Dhabi Food Control Authority. The guidelines set out the requirements vendors must meet to obtain a licence to operate in public and private school canteens. Parents may provide their children with their own packed meals as long as they are in line with the canteen guidelines. The guidelines include calorie requirements for each grade, sample menus, a list of permissible and banned food by category, and nutrient-based standards (eg limits on total fat and sugar content; minimum amounts of macro and micro nutrients). The standards restrict the serving of many energy-dense food, soft drinks and fruit punch, as well as trans fats, mono-sodium glutamate (MSG), preservatives, colours and artificial flavours, caffeine and hot and spicy sauces.</p>
	<p><b>UK</b></p>	<p>England, Scotland, Northern Ireland and Wales have mandatory nutritional standards for all food served in schools, including breakfasts, snacks, lunches and tuck shops. These standards apply to all state schools and restrict food high in fat, salt and sugar, as well as low-quality reformed or reconstituted food. The standards are as follows:</p> <ul style="list-style-type: none"> <li>– England: School Food Regulations 2014 (No. 1603), applicable to school lunches and food provided to students on school premises, came into force 1 January 2015 replacing the School Food Standards of 2007.</li> <li>– Scotland: Nutritional Requirements for Food and Drink in Schools Regulations 2008, applicable to any food served in schools were introduced in primary schools in August 2008 and in secondary schools in August 2009.</li> <li>– Northern Ireland: Nutritional Standards for School Lunches 2007, and Nutritional Standards for Other Food and Drinks in Schools 2008.</li> <li>– Wales: Healthy Eating in Schools (Nutritional Standards and Requirements) Regulations 2013 (No. 1984 (W.194))</li> </ul> <p><b>Evaluations</b></p> <p>Spence S et al. (2014) Did School Food and Nutrient-Based Standards in England Impact on 11-12Y Olds Nutrient Intake at Lunchtime and in Total Diet? Repeat Cross-Sectional Study. <i>PLoS ONE</i> 9(11): e112648<sup>xi</sup></p> <p>Adamson A et al. (2013) School food standards in the UK: implementation and evaluation. <i>Public Health Nutrition</i> 16(6), 968-981<sup>xii</sup></p> <p>Spence S et al. (2013) The Impact of Food and Nutrient-Based Standards on Primary School Children’s Lunch and Total Dietary Intake: A Natural Experimental Evaluation of Government Policy in England. <i>PLoS ONE</i> 8(10): e78298<sup>xiii</sup></p>

## US

The US Healthy, Hunger-Free Kids Act (HHFKA) of 2010 sets nutrition standards in the National School Lunch and School Breakfast Programs which were implemented in July 2014 based on an interim final rule published in June 2013. A final rule on nutrition standards for all food sold in schools as required by the HHFKA was published in July 2016, introducing minor changes based on comments received on the interim final rule. The standards for total fat are retained as "interim" in the final rule and may be amended in the future. The Act also establishes guidelines for "competitive food" in the Smart Snacks in School Program. Standards include limits on the amount of fat, saturated fat, salt and added sugars permitted in food. Beverages are also restricted to water, low-fat or non-fat milk. Calorie-free carbonated beverages are permitted in high schools.

There are also many state-level rules in place. Some states, including California and Colorado, have restrictions specific to trans fats. For example, in 2008, California adopted Senate Bill No. 1498 which prohibited, as of 1 July 2009, elementary, middle and high schools from making artificial trans fats available through vending machines or school food service establishments during school hours and up to 1/2 hour before and after school hours. In Colorado, Senate Bill 12-086 (2012) prohibits a public school or institute charter school from making available to a student a food item that contains any amount of industrially produced trans fat.

States also have a range of different rules on "à la carte lines" (ie food options that supplement the school lunch programme choices and stores inside schools). For example, Arizona, Rhode Island and Florida have bans on "à la carte lines" in elementary schools. 17 other states have strict restrictions (eg specific lists of restricted food or nutritional criteria) that apply at "à la carte lines" in elementary schools. 15 states have strict restrictions on food available at "à la carte lines" in middle schools, while 11 states apply strict restrictions at high school level.

Arizona, District of Columbia, Florida and Texas have complete bans on school stores in elementary schools, and 13 states have strict restrictions on the food available in stores in elementary schools. 11 states have strict restrictions on the food available in school stores in middle schools, while 8 states apply restrictions at high school level.

For more details see link to "State Laws for School Snack Foods and Beverages" at end of page.

### Evaluations

Johnson, DB et al. (2016) Effect of the Healthy Hunger-Free Kids Act on the Nutritional Quality of Meals Selected by Students and School Lunch Participation Rates. *JAMA Pediatr* 170(1):e153918<sup>xiv</sup>

Minaya S, Rainville AJ (2016) How Nutritious Are Children's Packed School Lunches? A Comparison of Lunches Brought From Home and School Lunches. *Journal of Child Nutrition and Management* 40(2)<sup>xv</sup>

		<p><b>Added May 2019:</b> Ickovics JR et al (2019). Implementing school-based policies to prevent obesity: cluster randomized trial. American Journal of Preventive Medicine 56(1), e1-e11<sup>xx</sup></p>
	<p><b>Uruguay</b></p>	<p>In September 2013, the government of Uruguay adopted Law No. 19.140 on “healthy eating in schools”. It mandated the Ministry of Health to develop standards for food available in canteens and kiosks in schools, prohibited advertising for these same food items, and restricted the availability of salt shakers. The school food standards were elaborated in March 2014 in two further documents: Regulatory Decree 60/014 and the National Plan of Health Promoting Schools. The standards aimed to promote food with “natural nutritional value” with a “minimum degree of processing” and to limit the intake of free sugars, saturated fat, trans fat and sodium. Limits are set per 100g of food, 100ml of drink and also per 50g portion. Prohibited food includes sugary beverages and energy drinks, confectionery, salty snacks, cakes and chocolate. The school food standards and restrictions on advertising began to be implemented in public schools in 2015 and are being monitored for compliance.</p>
	<p><b>Vanuatu</b></p>	<p>Vanuatu’s Sweet Drink Policy, introduced in October 2014 as part of the Vanuatu Health Promoting School Program and in the context of regulation order No. 44 of 2005 on health and safety requirements in schools, came into effect on the first day of Term 1, 2015. The policy bans the sale, consumption and advertising of sugary drinks and instead promotes water, plain milk and fresh coconut water.</p>
<p><b>Mandatory standards for food available in schools and in their immediate vicinity</b></p>	<p><b>South Korea</b></p>	<p>In 2010, the South Korean Special Act on the Safety Management of Children’s Dietary Life incorporated provisions to improve the nutritional quality of school meals and sets nutrition and food-based standards for other food on sale in schools. Additionally, this Act establishes Green Food Zones, banning the sale of energy dense and nutrient poor foods including fast food and soda within school premises and stores within 200 metres of schools. In 2017, Green Food Zones existed at over 10,515 schools (over 90% of schools). The provisions were implemented in 2009–10.</p>
<p><b>Voluntary guidelines for food available in schools</b></p>	<p><b>Australia</b></p>	<p>In 2011, Australia introduced the voluntary school food guidelines “National Healthy School Canteens: guidelines for healthy food and drinks supplied in school canteens” (NHSCGs). The guidelines, updated in 2013, are based on the Australian Guide to Healthy Eating and the 2013 Australian Dietary Guidelines. The guidelines include three components: a national food categorisation system for school canteens, training materials for canteen staff and an evaluation toolkit. The food categorisation system uses a traffic light system to distinguish food categories that should be promoted and those that should be limited based on their nutritional value: red (not recommended), amber (select carefully) and green (always available). The guidelines provide examples of food within each category and additional nutrient criteria to assist the categorisation of food, mainly in the amber category. Food in the green category should be actively promoted. Food in the red category, such as sugar- and artificially sweetened drinks, food high in sugar, fat and/or salt and food containing excessive energy, should not be sold in</p>

school canteens. Implementation of the guidelines is at the discretion of each state or territory government.

The Australian Capital Territory (ACT), Northern Territory (NT) and Tasmania have implemented the national guidelines in full (ACT Public School Food and Drink Policy 2015, NT Canteen, Nutrition and Healthy Eating Guidelines 2013 and Tasmania School Canteen Handbook – a whole school approach to healthy eating 2014) while other states and territories have incorporated components of the guidelines within their own system:

- The Queensland “Smart Choices – Healthy food and Drink Supply Strategy 2004” closely reflects the Australian Dietary Guidelines and the NHSCGs.
- The “South Australia Right Bite, Easy Guide to Healthy Food and Drink Supply for South Australian Schools and Preschools” is based on the Australian Dietary Guidelines and uses a traffic light food categorisation system similar to the NHSCGs.
- The Victorian “Go for Your Life – Victorian Health Canteen Policy – School Canteens and other school food services policy 2006” is largely consistent with the NHSCGs except for a few minor nutrient classifications introduced to reflect the evolving food supply. The policy also includes “School Confectionery Guidelines” which categorise confectionery and high sugar content soft drinks as BLACK. The Victorian Government funds the Healthy Eating Advisory Service to support schools to implement the canteen guidelines.
- The Western Australian “Healthy Food and Drink Policy 2014” is based on the Federation of Canteens in Schools nutrient criteria which has been recently revised to include traffic light coding in line with the NHSCGs.

New South Wales (NSW) has taken a different approach. The “NSW Healthy School Canteen Strategy 2017” is based on the Australian Dietary Guidelines and classifies food and drinks as either “everyday” (healthy) or “occasional” (less healthy). The strategy also uses the Health Star Rating (see “N – Nutrition label standards and regulations on the use of claims and implied claims on food) to guide users in selecting healthier versions of ‘occasional’ packaged food.

#### **Evaluation**

Dick M et al. (2012) Evaluation of implementation of a healthy food and drink supply strategy throughout the whole school environment in Queensland state schools, Australia. *European Journal of Clinical Nutrition* 66, 1124-1129<sup>xvi</sup>

**Added May 2019:** Myers G, Sauzier M, Ferguson A, Pettigrew S (2019). Objective assessment of compliance with a state-wide school food-service policy via menu audits. *Public Health Nutrition*, 1-8<sup>xxi</sup>

#### **Austria**

The Unser Schulbuffet (Our School Buffet) programme, launched in 2012, is overseen by the Austrian Ministry of Health. The programme provides guidelines for school canteens to follow, including restrictions on certain food including fried products, sweet treats, crisps and savoury

		snacks, which also apply to vending machines. The guidelines are food-based and informed by the Austrian Food Pyramid. Beyond providing guidelines on nutritional aspects, the guidelines contain advice on the presentation and promotion of healthy options.
	<b>Belgium</b>	Flanders (2008) and Wallonia (2013) both have voluntary guidelines with food-based standards for food available in schools, including restrictions on (deep) fried food, sweet treats and soft drinks.
	<b>Brazil</b>	Mandatory standards are in place for the national school meal programme in Brazil (see "O - Mandatory standards for food available in schools, including restrictions on unhealthy food"). For "school canteens" – kiosks and stores where food can be purchased for takeaway inside public schools – there are voluntary guidelines. The Healthy Schools Canteens Manual, published by the Ministry of Health in 2010, contains voluntary guidelines for the operators of school canteens on how to promote healthy eating in canteens. In 2012, a self-learning course was made available to support canteen managers implement the manual, as part of the Cooperation Agreement signed by the Ministry of Health and the Private Schools National Federation. The Agreement sets out to plan, implement and evaluate strategies that promote health in private schools at a national level (particularly in the areas of healthy eating and the prevention of obesity related non-communicable diseases). A website monitors actions taken by schools and promotes learning between them.
	<b>Canada</b>	In 2013, the Federal, Provincial and Territorial Group on Nutrition (FPTGN), a working group consisting of representatives from all Canadian provinces and territories, released a Guidance Document for the development of Nutrient Criteria for Foods and Beverages in Schools. The Guidance contains nutritional guidelines on food served in schools, classing food products into four groups – vegetables and fruit, grain products, milk and alternatives, meat and alternatives – and two categories – Choose Most Often and Choose Sometimes. The guidelines suggest maximum levels for fat, sugar and salt, with the reference quantities being largely based on Health Canada's Canada Food Guide. The Guidance is not mandatory, but is intended to guide the provinces and territories in their development of new and revision of existing school nutrition policies, and to support the food industry in developing and reformulating products sold in and to schools.
	<b>Germany</b>	The German Nutrition Society (DGE) has set voluntary guidelines on quality standards for school meals in Germany. The guidelines recommend that schools provide water and unsweetened herbal or fruit teas and prohibit drinks that are high in sugar including juices and energy drinks. The guidelines contain a 20-day plan suggesting serving whole grains on at least four days and potato products a maximum of four days; salad, vegetables or legumes each day; fruit at least eight times; dairy products (ideally low-fat) at least eight times; fish at least four times and meat a maximum of eight times; rapeseed oil is the only permitted oil.



		<p>Many local school authorities (Schulträger) contractually require food suppliers to adhere to DGE quality standards.</p> <p>Two German states, Berlin and Saarland, have enshrined the voluntary guidelines in law (see above under Mandatory standards for food available in schools, including restrictions on unhealthy food).</p>
	<b>Hong Kong</b>	In 2006, the government's Centre for Health Protection in Hong Kong issued guidelines for tuck shop operators in primary schools, as well as parents and school personnel, to guide the types of food and drink items to be allowed and promoted in the school environment for the benefit of children's health. They were revised to include secondary schools in 2010.
	<b>Malta</b>	In Malta, public schools have to comply with a list of permissible and prohibited food and beverages based on the 2014 Healthy Lifestyle (Reducing Obesity) Act and Food and Beverage Standards for food consumed in schools (set by the Education Division of the Ministry of Education, Youth and Employment in 2007 and amended in 2015). The standards include nutrient-based guidelines for food and drink providers with limits for fats, sugar and salt per 100g or ml. The standards are mandatory in public schools and voluntary in most private schools, with public schools monitored for compliance.
	<b>Poland</b>	In 2008, the Polish National Institute of Food and Nutrition issued School Food Guidelines that are recommended by the Ministry of Health. The guidelines set out nutrient-based standards for food served in schools.
	<b>Singapore</b>	In 2011, the Health Promotion Board of Singapore, in collaboration with the Ministry of Education, launched the Healthy Meals in Schools Programme, which was formerly the Model School Tuckshop Programme, launched in 2003. The programme enhances the availability of healthier food and beverage choices in schools through an integrated programme that involves teachers, canteen vendors and students. Canteen vendors from participating schools are expected to follow food service guidelines which aim to reduce the amount of saturated fat, sugar, and salt in school meals and make available whole grains, fruit and vegetables as part of a balanced meal. The Health Promotion Board supports schools by organising culinary and nutrition training for canteen vendors (see "G – Give nutrition education and skills"), and engages nutritionists and dietitians to assess participating schools to ensure compliance to the HMSP criteria. Educational resources are also provided as part of the programme to encourage students to eat a healthy diet. Revised food service guidelines came into effect on 1 January 2016.
	<b>South Africa</b>	The South African Department of Basic Education, in cooperation with the Provincial Education Departments, runs the voluntary National School Nutrition Programme (NSNP), which evolved out of the Primary School Nutrition Programme introduced in 1994. The Programme provides one daily meal which is based on the South African Food Based Dietary Guidelines (2012). Fresh

		<p>fruit and vegetables should be served every day and soya no more than twice a week. As part of the school nutrition programme, voluntary guidelines for Tuck Shop Operators (2014) were developed which advise to only sell healthy food (eg fresh fruit, nuts, fish, brown bread sandwiches) and beverages in containers not exceeding 250ml (eg plain water, 100% fruit juice, unsweetened milk). Schools are encouraged to set up vegetable gardens to teach children to grow food and use the harvested produce for school meals. NSNP is implemented in the neediest public schools, and most schools use the opportunity offered to them.</p>
	<p><b>Spain</b></p>	<p>In 2011, the Spanish Parliament approved a Law on Nutrition and Food Safety (Ley 17/2011) that prevents kindergartens and schools from selling food and beverages high in saturated fat, trans fat, salt and sugar. To determine food and drinks allowed in schools, including products available in vending machines, regional authorities can use recommended nutritional criteria outlined in the 2010 Consensus document on food in education centres.</p>
<p><b>Bans specific to vending machines in schools</b></p>	<p><b>Thailand</b></p>	<p>In 2008, the Thai Department of Health, in collaboration with the Ministry of Education’s Office of the Basic Education Commission (OBEC), announced a voluntary ban of soda and sugary packaged snacks in elementary and secondary schools under OBEC. It has been implemented by the majority of schools under OBEC.</p> <p>The voluntary Thai School Lunch Programme was implemented in 1999, recommending schools to provide meals and snacks in line with the nutrient standards of the Thai Recommended Daily Intake (RDI) (last amended 2003). Three RDIs exist for different age groups: 3–5 years (1,200kcal), 6–12 years (1,550 kcal) and 13–18 years (2,000 kcal). School meals and snacks should make up 40% of the RDI, and recommend a distribution ratio of 55–60% carbohydrates, 10–15% protein and 25–30% fat. In addition, the RDIs set maximum levels of protein, fat, total carbohydrate and cholesterol, and contain recommended levels of vitamins (A, B1, B2, C), folate and calcium. The guidelines are intended to prevent both undernutrition and overweight/obesity. In 2013, the budget per lunch per pupil was increased from 13 Thai Baht (about US\$0.4) to 20 Thai Baht (about US\$0.6) to increase the quality of school lunches. Due to a lack of monitoring and evaluation capacity of the Ministries in charge of the programme (Ministry of Education, Ministry of Public Health, Ministry of Interior), it is unclear how widely the RDIs are implemented.</p>
	<p><b>Australia</b></p>	<p>In February 2014, the Australian Capital Territory (ACT) government announced the removal of vending machines from ACT public schools. The 2015 Australia Capital Territory’s Public School Food and Drink Policy prohibits food and drink vending machines on public school premises.</p>
	<p><b>Bermuda</b></p>	<p>In 2006, Bermuda implemented the Healthy Schools Vending Machine and Cafeteria Policy which bans sodas and snacks from vending machines on school premises. Only plain, unsweetened water and/or 100% fruit juice is permitted.</p>

	<p><b>France</b></p>	<p>Based on the French Public Health Act of 2004 (Law No. 2004-806, Article 30), vending machines containing drinks and snacks are not allowed in schools since 1 September 2005. Fruit and bottled water must be made available.</p> <p><b>Evaluation</b> Capacci S, Mazzocchi M, Shankar B. (2018). Breaking habits: the effect of the french vending machine ban on school snacking and sugar intakes. <i>Journal of Policy Analysis and Management</i>. 27(1): 88-111.<sup>xvii</sup></p>
	<p><b>Slovenia</b></p>	<p>In 2010, Slovenia adopted a ban on vending machines on school premises (since incorporated into the 2013 School Nutrition Law). It was introduced to reduce consumption of unhealthy food, but also to decrease possible marketing space on the exterior of vending machines.</p>
	<p><b>US</b></p>	<p>Arkansas, the District of Columbia, Florida, Indiana and Texas have had bans on vending machines in elementary schools since 2008–09.</p> <p>13 states have restrictions (either lists specifying restricted food or nutritional criteria) on the content of vending machines in middle schools. Nine states have restrictions that apply in high schools. For more details see link to “State Laws for School Snack Foods and Beverages” at end of page.</p>
<p><b>Standards in social support programmes</b></p>	<p><b>Bermuda</b></p>	<p>Since 2008, Healthy Schools in Bermuda has partnered with a charity that provides healthy breakfasts to at-risk school-age children. The milk served in this programme must be low in fat. For more information about Healthy Schools see “O - Mandatory standards for food available in schools, including restrictions on unhealthy food” (above).</p>
	<p><b>Mexico</b></p>	<p>In order to support efforts of the Mexican government to reduce obesity, Liconsa, the government-owned company that purchases and distributes subsidised milk to low-income households, switched two-thirds of its milk supply to low-fat milk in 2013.</p>
	<p><b>US</b></p>	<p>In January 2015, the US Healthy Food Banking Wellness Policy was adopted and put into effect by the Community Action Partnership of San Bernardino County (CAPSBC). The policy aims to increase the amount of healthy, nutritious and locally grown food obtained and provided by the CAPSBC Food Bank, which provides emergency food to agencies throughout the county. The Healthy Food Banking Wellness Policy provides guidelines to help with the procurement of healthful food, including fruit and vegetables (fresh or canned with no sugar added), whole grains, low-fat, unsweetened dairy products, protein (lean meats, eggs, nuts, seeds, pulses), healthy beverages (water, 100% juice and low-fat, unsweetened milk or milk substitutes) and where possible, locally produced food. The policy has resulted in a significant increase in the amount of produce procured.</p>

**Standards in other specific locations  
(eg health facilities, workplace)**

**Australia**

Governments in all Australian states and territories implement mandatory (ACT, WA, SA and NT) or voluntary government endorsed guidelines (NSW, Qld, Vic and Tas) to assist healthier food and drink choices in health facilities (and public sector workplaces in Tas and the ACT). Queensland Health was the first to adopt these guidelines in health facilities in 2007. In all jurisdictions, the guidelines are based on the National Health and Medical Research Council's Australian Dietary Guidelines and Guide to Healthy Eating. Most use a traffic light system to distinguish food that should be promoted, and those that should be limited based on their nutritional value: red (limit), amber (choose carefully) and green (best choices). NSW classifies food and drinks as either "everyday" (healthy) or "occasional" (unhealthy). To varying degrees, the guidelines in each jurisdiction cover: the types of products available for sale through retail outlets and vending machines; product advertising and promotion; use of products for fundraising, rewards, incentives, prizes and giveaways; catering for meetings and events; and sponsorships. The most comprehensive guidelines make explicit that:

- green products must make up at least 50% of products for sale (ACT, Qld, Vic, WA, NT), "everyday" food and drinks to make up at least 75% of the offering (NSW)
- red products (eg food and drinks high in sugar, fat and/or salt) cannot make up more than 20% of products for sale (ACT, Qld, Vic, WA, SA, NT), "occasional" food and drink cannot make up more than 25% of the offering (NSW)
- portion size limits apply to some "everyday" and all "occasional" food and drinks (NSW)
- only green products (ACT, Qld, WA, NT) and "everyday" food and drinks (NSW) can be promoted or advertised
- green products must be most prominently displayed (ACT, Qld, Vic, WA, SA, NT, Tas)
- prominent locations in a food outlet, value pricing and promotional activities only highlight "everyday" food and drinks (NSW)
- red products are not to be used for fundraising, incentives, rewards or giveaways (ACT, Qld, WA, Vic, SA, NT)
- catering should consist mostly of green products and not contain red products (ACT, Qld, Vic, WA, SA, Tas, NT)
- the government's logo cannot be displayed alongside red or amber products (ACT, Vic)
- sugary drinks (drinks with any sugars added during processing, excluding milks drinks) are not to be sold (NSW – phased approach by December 2017)

The Murrumbidgee Local Health District in New South Wales passed an internal directive in April 2016 banning the sale of sugary drinks at their health facilities by December 2016. The majority of the sites had implemented the ban by September 2016. Sugary drinks include any drink with sugar added during processing with the exception of diet soft drinks, diet energy drinks, 99–100% fruit juices and flavoured milk drinks.

Since November 2015, the Western District Health Service (WDHS) in Victoria prohibits the sale of sugary drinks, including fruit juices, in cafeterias and vending machines from its hospitals and health centres on a voluntary basis; all their campuses have implemented the ban. The only

		<p>permitted beverages are water and low-fat flavoured milk in containers not exceeding 300ml. In June 2016, 12 other health services in South-Western Victoria agreed to implement such a sugary drinks ban over a two year period.</p> <p><b>Evaluations</b>  Miller J et al. (2014) Implementation of A Better Choice Healthy Food and Drink Supply Strategy for staff and visitors in government-owned health facilities in Queensland, Australia. <i>Public Health Nutrition</i> 18(9): 1602-1609<sup>xviii</sup></p> <p>Queensland Health. A Better Choice – Healthy Food and Drink Supply Strategy for Queensland Health Facilities: Evaluation Report. Brisbane, 2010<sup>xix</sup></p>
	<b>Bermuda</b>	<p>In 2008, the Government Vending Machine Policy was implemented in government offices and facilities in Bermuda to ensure access to healthy snacks and beverages for staff. The policy requires that all food and beverages in vending machines on government premises meet specific criteria based on levels of total fat, saturated fat, trans fat, sodium and sugar. The criteria exclude nuts and 100% fruit juices.</p>
	<b>Brazil</b>	<p>In July 2016, the Brazilian Ministry of Health implemented procurement guidelines for any food served or sold for purchase in the Ministry and its entities (Ordinance No. 1.274 of 7 July 2016). The guidelines are based on the Food Guide for the Brazilian population. At least one seasonal fruit has to be offered, and sugar-sweetened juice, soft drinks or sweets cannot be sold or served. Ultraprocessed food may only be used in exceptional cases if it is used in meals which are prepared from mostly unprocessed or minimally processed food. Ultraprocessed food is defined by the Ordinance as food which is mainly produced from substances extracted from whole food and/or food components derived from materials synthesized from organic matter, and which contain <math>\geq 1</math>mg of sodium per 1kcal, <math>\geq 10\%</math> of total energy from free sugars, <math>\geq 30\%</math> of total energy from total fat, <math>\geq 10\%</math> of total energy from saturated fat and <math>\geq 1\%</math> of total energy from trans fat (in alignment with PAHO's Nutrient Profile Model). The Ordinance also mandates sufficient chairs and tables are provided for employees to eat their food.</p>
	<b>Finland</b>	<p>The Finnish government Decree 564/2003 on supporting meals at universities requires meals to meet specific nutritional criteria in order to qualify for government subsidies. Nutrition recommendations were first published in 2003, revised in 2008 and updated in 2011. The Finnish National Nutrition Council and KELA, the Social Insurance Institution of Finland, jointly set the updated recommendations. They include compulsory meal components, nutritional criteria for all meal components (total fat, saturated fat, salt, fibre), consumer advice and guidance for healthy choices, rotation of menus, number of meals that have to meet the criteria for nutritional quality and criteria adherence guidelines. The updated nutrition recommendations came into effect on 1 January 2013.</p>
	<b>Germany</b>	<p>The German Nutrition Society (DGE) developed various voluntary guidelines on quality</p>

		<p>standards for meals in specific settings as part of IN FORM – Germany’s initiative to promote healthy diets and more exercise (<a href="http://www.in-form.de">www.in-form.de</a>). Core elements of the DGE quality standards are criteria for optimal food choices, the frequency of serving various food groups, and menu planning and preparation to optimise the nutrient content of the offered food. In all settings, rapeseed oil is the standard cooking oil, and water as well as unsweetened herbal or fruit teas are the recommended beverages.</p> <p>For nurseries (age 0–6) (2009, revised in 2014), the guidelines prohibit drinks that are high in sugar, including juice and soft drinks as well as energy drinks. They contain a 20-day lunch plan suggesting serving whole grains on at least four days and potato products a maximum of four days; salad, vegetables or legumes each day; fruit at least eight times; dairy products (ideally low-fat) at least eight times; fish at least four times and meat at a maximum of eight times. To date, around one-third of all nurseries act in accordance with the DGE standard.</p> <p>For canteens in the workplace, the guidelines (2008, revised in 2014) contain a five-day lunch plan suggesting serving whole grains at least once and potato products not more than once; salad, vegetables or legumes each day; fruit at least twice; dairy products (ideally low-fat) at least twice; fish at least once and meat at a maximum of two days.</p> <p>For meals in hospitals (2011, revised in 2014), rehabilitation centres (2011, revised in 2014) and care homes for elderly (2009, revised in 2014), the guidelines contain a seven-day meal plan for three meals and according to requirements two additional snacks per day suggesting serving whole grains at least 14 times and potato products a maximum of two times; salad, vegetables or legumes three times each day; fruit two times each day; dairy products (ideally low-fat) at least two times a day; fish at least twice a week and meat at a maximum of three times a week.</p> <p>For meals on wheels (2010, revised in 2014), a service providing meals for persons aged 65+ living in their own homes, the guidelines contain a seven-day lunch plan suggesting serving whole grains at least once and potato products no more than once; salad, vegetables or legumes each day; fruit three times; dairy products (ideally low-fat) at least three times; fish at least once a week and meat at a maximum of three times a week. The guidelines do not include recommendations for beverages, as they do not form part of the standard meal service (but will be provided upon request).</p>
	<p><b>Guam</b></p>	<p>On 17 November 2011, the Guam Government enacted “Policy in Favor of Healthy Food and Beverage Products in all Vending Machines Located within Government Facilities” (22420.1) by amending various sections of the Guam Code. The Act stipulated that by January 2012 at least 50% of all food and beverages offered in government-contracted vending machines within government institutions need to adhere to the new guidelines. The guidelines were then amended on 27 November 2013. The guidelines outline that at a minimum all vending machine food must display calorie, fat, sugar and sodium content labelling. At least 50% of beverages offered must contain one, or a combination of, water, coffee or tea, nonfat or reduced-fat milk,</p>

		<p>100% fruit/vegetable juice, fruit-based drinks containing 100% fruit juice, other non-calorific beverages and sports drinks with less than, or equal to, 100 calories. 50% of the food offered must not contain more than 250 calories; 35% of the calories from fat; not more of 10% of the calories from saturated fat; any trans fat (hydrogenated oils or partially hydrogenated oils); more than 35% of the total weight from sugar or sweeteners; and more than 360mg of sodium. At least one item must have less than 140mg of sodium and a food option that contains at least 2g of fiber must be present. The Act also states that the Government will inspect vending machines for compliance with the guidelines.</p>
	<p><b>Latvia</b></p>	<p>In 2012, the Latvian government set salt levels for all food served in hospitals and long-term social care institutions. Levels may not exceed 1.25g of salt per 100g of food product; fish products may contain up to 1.5g of salt per 100g of product. The standards also apply to educational institutions (see above).</p>
	<p><b>Malaysia</b></p>	<p>In 2010, the Malaysian Ministry of Health developed the voluntary guidelines on Healthy Menu Provision During Meetings. All government departments are encouraged to implement these guidelines to provide healthy meeting catering, including the provision of plain water, low-fat milk and unsweetened hot beverages (though sugar remains available separately), serving fruit and vegetables, and calorie labelling.</p> <p>From 2008 onwards, the Healthy Cafeteria Initiative encouraged the promotion of healthier food options in cafeterias operated in government health facilities. In 2012, a circular by the Director General of Health made the requirements of the Initiative mandatory. In order to receive Healthy Cafeteria recognition, cafeterias need to display the energy content of food items, information on the Recommended Daily Nutrient Intake and a poster or food replica of one food serving containing less than 500 calories. They also have to provide smaller portion sizes for any food items/dishes exceeding 500 calories, sell at least one type of fresh fruit, plain water, and low-sugar drinks. They are not allowed to sell junk and processed food, sweets, premixed drinks, carbonated drinks and alcohol, as well as pickles preserved in salt, sugar and vinegar. The premises have to be smoke-free. In addition, cafeteria operators have to complete the Healthy Catering training (see “G – Give nutrition education and skills” for more information). As of December 2016, 98% of cafeterias in government health facilities have obtained Healthy Cafeteria status.</p> <p>Since 2012, the Clean, Safe, Healthy Initiative (BeSS) promotes clean, safe and healthy food in food outlets. In order to obtain BeSS recognition, food outlets have to fulfil some of the same criteria as the Healthy Cafeteria Initiative: plain water as default option, low-sugar drinks upon request; at least one type of fresh fruit sold; condiments to be served separately; display of information on dietary intake recommendations and posters/replicas of food items containing less than 500kcal; smaller serving sizes for food containing more than 500kcal promoted; calorie labelling for a minimum of 10 food items, and calorie information displayed for sugar, sugar syrups, creamer and condensed milk. Operators can voluntarily attend the Healthy Catering</p>

		training. 1,520 food outlets have received BeSS recognition by October 2016.
	<b>New Zealand</b>	Local public health service units oversee the WorkWell programme, launched in New Zealand in 2011. WorkWell helps businesses improve their employees' health by supporting the improvement of the working environment and organisational systems. It includes a focus on healthy eating by providing companies with the WorkWell for Healthy Eating Toolkit. The Toolkit contains a step-by-step approach, including how to write a healthy eating policy for the company and ideas to change the food environment at the workplace (for example providing drinking water and low-fat milk, changing the caterer to a healthier option). Other tools provided are guidelines for workplace vending machines, guidelines for snack boxes, Food ideas for work meetings and Drinking water guidelines.
	<b>Portugal</b>	In effect since January 2017, the Portuguese government bans the sale of a variety of unhealthy food and drink products at Ministry of Health and National Health Service institutions (Order No. 7516-A/2016). Banned products include salted products, cakes and pastry, breads with sweet fillings, delicatessen items, sandwiches with sauces, biscuits and cookies with more than 20g of sugar and/or with more than 20 grams of fat, soft drinks, sweets, sweet desserts, quick meals such as hamburgers or pizzas, alcoholic beverages, chocolates in portions with more than 50 grams and "snacks" defined as maize strips, chips, sweet or salty popcorn. The institutions were given six months from the date of the Order to remove the products, including negotiating contracts with vending machine companies. This law was later (December 2017) extended to cafeterias and buffets of the Ministry of Health and National Health Service institutions, by the publication of Order No. 11391/2017.
	<b>Singapore</b>	The National Workplace Health Promotion Programme, launched in Singapore in 2000, is run by the Health Promotion Board. Both private and public institutions are encouraged to improve the workplace environment by providing tools and grants. Grants are awarded to help companies start and sustain health promotion programmes. Tools include a sample Healthy Workplace Nutrition Policy, a sample Healthy Workplace Catering Policy, and a detailed Essential Guide to Workplace Health, setting out ways to transform the workplace into a health-supporting work environment by providing a guide on how to improve the nutritional environment in the work place (for example training for canteen providers, engaging a nutritionist).
	<b>Thailand</b>	Since 2012, restaurants and food stores in public hospitals are encouraged to comply with the Department of Health's Healthy Food Menu policy, which includes the Healthy Menu and the Fatless Belly Menu' The Healthy Menu requires the dish to be cooked using vegetable oil and providing protein (in the form of meat, nuts, or eggs), carbohydrates (rice or noodles), various vegetables and fresh fruit. To comply with the Fatless Belly Menu, the dish should not exceed 400kcal, 15g of fat, 2g of sugar and 600mg of salt, and it should consist of 50% vegetables, 25% low-fat meat and 25% rice or a starchy carbohydrate. In 2000, the Ministry of Public Health, in collaboration with the Ministry of Education, introduced the voluntary Childcare Centre Standard. Childcare centres are encouraged to comply with



		<p>nutrition guidelines for children aged 1–3 years and 4–5 years (last updated 2013); the latest survey, conducted in 2014, showed that 61.4% of childcare centres across Thailand met the Standard. The Standard prohibits sugar-sweetened beverages, meat high in fat, the use of salty seasonings (such as fish and soy sauce) and sugar in dishes, and snacks high in sugar and salt, including a ban to bring such snacks to the centres. They include recommendations on portion size for underweight, normal and overweight children as well as the frequency of food groups and meals. In addition, childcare centres have to comply with the Thai Recommended Daily Intake (RDI) (last amended 2003) for 3–5 year olds which are based on 1,200kcal/day and recommend a distribution ratio of 55–60% carbohydrates, 10–15% protein and 25–30% fat. The RDI sets maximum levels of protein, fat, total carbohydrate, and cholesterol, and contains recommended levels of vitamins (A, B1, B2, C), folate and calcium. The Standard and RDI are intended to prevent both undernutrition and overweight/obesity.</p>
	<p><b>UK</b></p>	<p>Vending machines dispensing crisps, chocolate and sugary drinks are prohibited in National Health Service hospitals in Wales. The Welsh government issued a guidance defining what is allowed and not allowed, and has liaised with major vending providers to find ways to introduce healthier food and drink options (Health Promoting Hospital Vending Directions and Guide 2008). In 2008, the Scottish government issued guidelines to chief executives of the National Health Service on the provision of competitively priced fruit and vegetables in hospital settings and the removal of all soft drinks with a sugar content &gt;0.5g per 100ml from vending machines (unsweetened fruit and vegetable juices are exempt). The 2012 update of the guidelines relaxed this requirement to 70% of drinks having to comply with the sugar limit of 0.5g per 100ml (but some hospital boards choose to retain the complete removal of sugary drinks), and mandated that vending machines must contain prominently positioned water, unsweetened fruit juice and/or low-fat milk. In addition, the guidelines require that at least 30% of snacks/confectioneries and 70% of refrigerated food in hospital vending machines meet the specified criteria of “healthier choices” which set limits on the permissible content of fat, saturated fat, sugar and salt/sodium.</p>
	<p><b>US</b></p>	<p>New York City’s Food Standards (enacted with Executive Order 122 of 2008, revised in 2014) set nutritional standards for all food purchased or served by city agencies, which applies to prisons, hospitals and senior care centres. The Standards include: maximum and minimum levels of nutrients per serving; standards on specific food items (eg only no-fat or 1% milk); portion size requirements; the requirement that water be offered with food; a prohibition on the deep-frying of food; and daily calorie and nutrient targets, including population-specific guidelines (eg children, seniors). As of 2015, 11 city agencies are subject to the NYC Food Standards, serving and selling almost 250 million meals a year. The Food Policy Coordinator has the responsibility of ensuring adherence with the Food Standards. Self-reported compliance with the standards is 96%. New York City’s Health Code also contains regulations on sweetened beverages and 100% fruit juices served in children’s camps and children’s day care centres. In camps, beverages containing caffeine, artificial sweeteners and non-nutritive sweeteners are banned, and maximum calorie levels and serving portions set. In day care</p>

centres, drinks with added artificial and natural sweeteners are banned, and children may only be served a maximum of 4 ounces (118ml) of 100% juice per day; children younger than two do not receive juice.

Based on Executive Order 509 (2009), the Massachusetts State Agency Food Standards set standards per category for all food purchased by state agencies and their contractors. The Standards include targets for nutrient requirements, including guidelines for specific populations (ie children, elderly). The Standards contain a ban on trans fat and deep-frying, and maximum levels of sodium in food and calorie levels of beverages. They are applicable to food served to agencies' clients and patients (ie hospitals, prisons, childcare services); food served for sale, and to agencies' employees is excluded.

In effect since October 2011, Boston's Healthy Beverage Executive Order directs city departments to eliminate the sale of sugar-sweetened beverages on city property and to adhere to the City of Boston's Healthy Options Beverage Standards (developed by the Boston Public Health Commission) in all vending machines, and city-managed food and beverage services programmes, contracted food or beverage services, food or beverage procurement, leases and other agreements for food or beverage concessions in or around city-owned buildings. The Healthy Options Beverage Standards outline the requirements for beverages that can be sold: no calorically-sweetened cold beverages; fruit and/or vegetable beverages must be 100% juice and where possible servings shall not exceed 8 ounces or 150 calories and be low-sodium varieties; milk, soy milk and other milk substitute offerings are limited to 1% or skim milk, not exceeding 12 ounces in volume with <25 g of total sugars per 8 ounce serving; diet or other non-calorically sweetened beverages should be less than one third of total beverage offerings. In addition, only products that qualify as Healthy Options Beverages are permitted to be promoted on vending machines (eg sides, front graphic panel, etc). When the Executive Order was issued, the Healthy Options Beverage Standards were visualised on point-of-decision education materials through a traffic light system (eg "drink rarely, if at all" (red), "drink occasionally" (yellow), and "drink plenty" or "healthy choice" (green).

In effect since December 2016, San Francisco's Healthy Vending Machine Policy (Ordinance No. 91-16) requires that food and drinks sold in vending machines on City property must meet specified nutrition standards, and calorie labelling requirements. Nutritional standards for prepackaged food include: <200 calories per serving, <35% of calories from fat, <1g of saturated fat per serving, no trans fat or partially hydrogenated oil on the ingredient list, <35% of weight from total sugars, <240 mg of sodium per serving and no candy except for sugar-free mints and gum, no chips except for baked chips and pretzels. No sugary drinks (defined as any non-alcoholic beverage sold for human consumption that has one or more added caloric sweeteners and contains >25 calories per 12 ounces) are permitted in vending machines, with the following exemptions: 100% fruit juice with no added sugars or sweeteners, <230 mg of sodium per serving and <120 calories per 8 fluid ounces; low-fat (1%) or fat-free milk; and 25% of drinks sold/offered may be labelled as "diet" or sweetened with artificial sweeteners. Calorie

labelling must be clear, conspicuous and must be visible in, on or adjacent to the vending machine. In effect since September 2015, a separate policy (Ordinance No. 99-15) bars City Departments from purchasing and city contractors or grantees from selling, serving or distributing sugar-sweetened beverages.

In 2014, Good Food, Healthy Hospitals (GFHH) was launched by the Philadelphia Department of Public Health (PDPH) together with The Common Market (a non-profit working to improve food access to vulnerable populations), and the American Heart Association. GFHH is an initiative to promote healthy food and beverages for patients, staff and visitors in Philadelphia hospitals. GFHH invites hospitals to voluntarily adopt five food standards across five hospital food environments: purchased food and beverages, cafeteria meals, patient meals, catering, and vending machine operations. The GFHH team engages hospital staff from food service, purchasing, clinical, wellness, and administrative departments to create a cross-disciplinary approach to providing healthier food and beverage options. They also provide technical assistance and resources to support their efforts. As of December 2017, 16 hospitals signed the pledge to adopt GFHH.

Philadelphia's Comprehensive Nutrition Standards (enacted with Executive Order 4-14 of June 2014) set nutritional standards for all food and beverages purchased, prepared or served by all City agencies. They provide both required and recommended guidelines around food purchased, meals and snacks served, and vending machines as well as best practice guidelines for special occasions, sustainability, concessions, and catering. The Standards are based on the USDA's 2015 Dietary Guidelines for Americans. The Philadelphia Department of Public Health (PDPH) provides technical assistance to City Agencies to help implement the Nutrition Standards, which entails collecting menus and nutrition analysis and assessing changes, creating individualized implementation plans for the departments to come into compliance, drafting contract language, and engaging vendors to increase the availability and accessibility of products that meet our nutrition standards. PDPH has also partnered with Health Promotion Council, a non-profit organization, to provide group and one-on-one nutrition and cooking trainings to department staff to help implement the standards (See "G – Give nutrition education and skills). Each year, the City serves or sells over 20 million meals and snacks to almost 64,000 Philadelphians.

#### **Evaluations**

Cradock AL et al. (2015) Evaluating the impact of the Healthy Beverage Executive Order for City Agencies in Boston, Massachusetts, 2011 – 2013. *Preventing Chronic Disease* 12:140549.<sup>1</sup>

Lederer A et al. (2014) Toward a Healthier City: Nutrition Standards for New York City Government. *American Journal of Preventive Medicine* 46(4): 423-428.<sup>2</sup>

---

<sup>1</sup> [https://www.cdc.gov/pcd/issues/2015/14\\_0549.htm](https://www.cdc.gov/pcd/issues/2015/14_0549.htm) (accessed on 19/05/2017)

<sup>2</sup> [http://www.ajpmonline.org/article/S0749-3797\(13\)00633-8/fulltext](http://www.ajpmonline.org/article/S0749-3797(13)00633-8/fulltext) (accessed on 23/11/2017)

A number of other organisations provide access to policy databases. Some are listed below:

### **International**

[WHO Global Database on the Implementation of Nutrition Action](#)

[WHO Noncommunicable Disease Document Repository](#)

### **Europe**

[WHO Europe Database on Nutrition, Obesity and Physical Activity](#)

### **US**

[Robert Wood Johnson Foundation – State Laws for School Snack Foods and Beverages](#)

[The Rudd Center for Food Policy and Obesity – Legislation Database](#)

[National Association of State Boards of Education – State School Health Policy Database](#)

[National Cancer Institute – Classification of Laws Associated with School Students](#)

[Centers for Disease Control – Chronic Disease State Policy Tracking System](#)

### **Canada**

[Prevention Policies Directory](#)

---

<sup>i</sup> <https://www.sciencedirect.com/science/article/pii/S0195666317313193> (accessed on 12/10/2018)

<sup>ii</sup> <https://academic.oup.com/her/article-lookup/doi/10.1093/her/cyr033> (accessed on 13/09/2017)

<sup>iii</sup> [http://ec.europa.eu/agriculture/sites/agriculture/files/evaluation/market-and-income-reports/2012/school-fruit-scheme/fulltext\\_en.pdf](http://ec.europa.eu/agriculture/sites/agriculture/files/evaluation/market-and-income-reports/2012/school-fruit-scheme/fulltext_en.pdf) (accessed on 17/02/2017)

<sup>iv</sup> [http://ec.europa.eu/agriculture/sites/agriculture/files/sfs/documents/cdc\\_en.pdf](http://ec.europa.eu/agriculture/sites/agriculture/files/sfs/documents/cdc_en.pdf) (accessed on 20/02/2017)

<sup>v</sup> <https://www.cambridge.org/core/journals/public-health-nutrition/article/evaluating-free-school-fruit-results-from-a-natural-experiment-in-norway-with-representative-data/68531FDB20C27FFB06EDEF3CE971A6> (accessed on 20/10/2016)

<sup>vi</sup> <http://ije.oxfordjournals.org/content/36/5/1080.long> (accessed on 20/10/2016)

<sup>vii</sup> <https://www.cambridge.org/core/journals/british-journal-of-nutrition/article/the-national-school-fruit-scheme-produces-short-term-but-not-longer-term-increases-in-fruit-consumption-in-primary-school-children/C68EB91C33DFDAF22DB31E066EEF2F39> (accessed on 20/10/2016)

<sup>viii</sup> <http://onlinelibrary.wiley.com/doi/10.1111/josh.12432/abstract> (accessed on 06/01/2017)

<sup>ix</sup> <https://www.fns.usda.gov/sites/default/files/FFVP.pdf> (accessed on 06/01/2017)

<sup>x</sup> [http://journals.cambridge.org/download.php?file=%2FPHN%2FPHN18\\_09%2FS1368980014003310a.pdf&code=a8992ad8b52eccc990e75cf703ee45](http://journals.cambridge.org/download.php?file=%2FPHN%2FPHN18_09%2FS1368980014003310a.pdf&code=a8992ad8b52eccc990e75cf703ee45) (accessed on 20/10/2016)

- 
- <sup>xi</sup> <http://journals.plos.org/plosone/article/file?id=10.1371/journal.pone.0112648&type=printable> (accessed on 20/12/2016)
- <sup>xii</sup> <https://www.cambridge.org/core/services/aop-cambridge-core/content/view/88EEABD3080F1D41DC307D69515041FF/S1368980013000621a.pdf/div-class-title-school-food-standards-in-the-uk-implementation-and-evaluation-div.pdf> (accessed on 04/01/2017)
- <sup>xiii</sup> <http://journals.plos.org/plosone/article?id=10.1371/journal.pone.0078298> (accessed on 20/10/2016)
- <sup>xiv</sup> <http://jamanetwork.com/journals/jamapediatrics/fullarticle/2478057> (accessed on 05/06/2017)
- <sup>xv</sup> [http://schoolnutrition.org/uploadedFiles/5\\_News\\_and\\_Publications/4\\_The\\_Journal\\_of\\_Child\\_Nutrition\\_and\\_Management/Fall\\_2016/HowNutritiousAreChildren.pdf](http://schoolnutrition.org/uploadedFiles/5_News_and_Publications/4_The_Journal_of_Child_Nutrition_and_Management/Fall_2016/HowNutritiousAreChildren.pdf) (accessed on 21/12/2016)
- <sup>xvi</sup> <http://www.nature.com/ejcn/journal/v66/n10/full/ejcn2012108a.html> (accessed on 11/04/2017)
- <sup>xvii</sup> <https://onlinelibrary.wiley.com/doi/full/10.1002/pam.22032> (accessed on 14 June 2018)
- <sup>xviii</sup> <https://www.cambridge.org/core/journals/public-health-nutrition/article/implementation-of-a-better-choice-healthy-food-and-drink-supply-strategy-for-staff-and-visitors-in-government-owned-health-facilities-in-queensland-australia/7B3E41605C4B68EF2019CC87437B9B9F> (accessed on 05/06/2017)
- <sup>xix</sup> [https://www.health.qld.gov.au/\\_\\_data/assets/pdf\\_file/0018/441261/abc-final-report.pdf](https://www.health.qld.gov.au/__data/assets/pdf_file/0018/441261/abc-final-report.pdf) (accessed on 17/02/2017)
- <sup>xx</sup> <https://www.sciencedirect.com/science/article/pii/S0749379718322700?dgcid=coauthor> (accessed on 05/04/2019)
- <sup>xxi</sup> <https://www.cambridge.org/core/journals/public-health-nutrition/article/objective-assessment-of-compliance-with-a-statewide-school-foodservice-policy-via-menu-audits/EBC2BD5689E1C18F1BE30AA181C18F6E> (accessed on 05/04/2019)