UNIVERSITY OF CALIFORNIA
Agriculture and Natural Resources | Nutrition Policy Institute

2022 White House Conference on Hunger, Nutrition and Health

Issue: Children's access to drinking water in schools and childcare

Problem: Too many children lack good ("effective") access to drinking water throughout the school day.

Pillars: *Improve food access and affordability; Empower all consumers to make and have access to healthy choices; Supports physical activity for all*

Recommendation 1: Ensure that all public K-12 schools have at least one water bottle filling station in a high-traffic area accessible throughout the day, with filtration if needed, and provide funding for water bottle filling station equipment and installation costs.[1]

Recommendations 2 & 3: In School Nutrition Programs (NSLP, SBP, SFSP, CACFP Afterschool Snack/Supper) and Child and Adult Care Food Program (CACFP), boost drinking water access by using Administrative Review and CACFP monitoring more effectively. Request that USDA report to Congress on how they have added specific checkpoints to on-site Administrative Review (AR) and CACFP monitoring to ensure that there is effective oversight of drinking water access. [Note: this set of recommendations has been provided to USDA FNS and highlighted in letters to Congressional CNR committees.[2,3]]

- **NSLP:** On-site AR procedures should be revised to provide instruction to ascertain that students have effective access to "free water … available for consumption," for example:
  - Water source meets standards for accessibility and maintenance
  - Water source has adequate and appropriate water flow or water level
  - Refillable water bottles are permitted and/or cups are provided
  - Promotional/educational material for drinking water is placed near drinking water sources
- **CACFP:** The program's drinking water provisions are excellent, but USDA should ensure that monitoring guidance and technical assistance are provided to ascertain compliance with all provisions for access, including USDA guidance specifying "throughout the day" and "offer and serve."[4]
  - Note, studies show less compliance with CACFP water provision requirements than with other beverage requirements, suggesting more monitoring and technical assistance may be needed[5,6]

Why does it matter? Underhydration is a common problem for U.S. children, with disparities by race and gender; hydration status can impact learning and health. Many schools do not have effective access to drinking water. A summary of the science, together with citations, is provided in the Appendix of a letter to Congressional CNR committees.[7,8] Outside of home, children spend most of their time in schools and childcare facilities. All children should have ready access to more than sips of water during the school day.[9]

These recommendations are supported by three recent reports.

The National Clinical Care Commission (NCCC) Report to Congress, December 2021, "Leveraging Federal Programs to Prevent and Control Diabetes and Its Complications"[10] states,

> NCCC Recommendation 4.4: The National Clinical Care Commission recommends that all relevant federal agencies promote the consumption of water and reduce the consumption of sugar-sweetened beverages in the U.S. population, and that they employ all the necessary tools to achieve these goals, including education, communication, accessibility, water infrastructure, and sugar-sweetened beverage taxation.
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> - 4.4b. **Child nutrition programs should be a conduit for education to promote consumption of water and reduce consumption of sugar-sweetened beverages. USDA should encourage hydrating with water instead of sugar-sweetened beverages** and provide safe water education in WIC nutrition education and in childcare settings. **Congress should harness the Child Nutrition Reauthorization Act to strengthen existing water provisions for school nutrition programs.**

The Bipartisan Policy Center's January 2022 report "Strengthening the Child Nutrition Programs,"[11] Policy Recommendation 2, "Strengthen nutrition in the school nutrition programs" includes, "Address school drinking water safety and accessibility" as follows,

> To further support a healthy school environment, federal policy could **address school drinking water safety and accessibility**. A 2017 GAO survey found that 41% of school districts had not tested for lead within the last year. Of the 43% who reported testing for lead, 37% found elevated levels. Testing for lead in all schools, as well as any necessary remediation, could be required and funded. Testing could be done on all taps used for drinking and cooking, including in school cafeterias, kitchens, and water fountains. **To encourage healthy beverage consumption, at least one water bottle filling station could be installed in a high-traffic area in every school.** The bipartisan Infrastructure Investment and Jobs Act enacted in December 2021 dedicated $55 billion to expand access to clean drinking water for households, businesses, schools, and childcare centers. These funds could be used for lead testing and remediation in schools, child care centers, and other youth-serving facilities.

The Robert Wood Johnson Foundation October 2021 report, "From Crisis to Opportunity: Reforming Our Nation's Policies to Help All Children Grow Up Healthy"[12] says,

> States and local districts should **make safe, appealing drinking water free and available to all students by ensuring that every school has at least one water bottle filling station in a high-traffic area that is accessible throughout the day, with filtration if needed.**

Local, state, and federal governments should work together to ensure safe drinking and cooking water in all schools, including by requiring and funding testing and remediation for lead in school cafeteria and kitchen tap water, and requesting that **USDA report to Congress on specific checkpoints USDA has added to on-site administrative review to ensure that there is effective oversight of drinking water safety and access.**

Who can act? Congress, USDA, DHSS; federal, state and public-private partnerships, e.g., with public water utilities, local banks, local professional sports teams, for bottle filling station installation, maintenance and water promotion.

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[1] Cost information for water bottle filling stations:

- Detroit Public Schools replaced all drinking fountains with hydration stations; individual station and installation costs were estimated at $1600 per unit based on Detroit labor rates; abatement costs, premium labor rates and finishing supplies increased each unit to about $3000 per station. Annual filter replacement costs also increased each unit by $60 (p.c. Machion Jackson, Assistant Superintendent of Operations, Detroit Public Schools Community District; 4/13/19)
- California CDPH estimate: $2,500 for equipment + $2,500 for labor = $5,000 total per installation (p.c. Jessie Gouck, California Department of Public Health; 4/15/21)

[2] National Drinking Water Alliance. 2021. *Letters to Senate Agriculture Committee and House Education and Labor Committee*. See, https://ucanr.edu/sites/NewNutritionPolicyInstitute/files/368453.pdf

[3] National Drinking Water Alliance. 2022. *Letters to Senate Agriculture Committee and House Education and Labor Committee*. See, https://ucanr.edu/sites/NewNutritionPolicyInstitute/files/365141.pdf

[4] National Drinking Water Alliance. *From Statute to Tap in the Child and Adult Care Food Program.* At, https://static.wixstatic.com/ugd/9c073b_5f3c42fd1db546179e26fa607767d5b9.pdf

[5] Cotwright CJ, Bradley H, Celestin N, Drake S, Love K, Birch L. Beverage Policy Implementation by Child and Adult Care Food Program Participation and Program Type: A Statewide Examination in Georgia. *Child Obes.* 2019 Apr;15(3):185-193.

[6] Lee DL, Gurzo K, Nhan LA, Vitale EH, Yoshida S, Hecht K, et al. Status of Beverages Served to Young Children in Child Care After Implementation of California Policy, 2012–2016. *Prev Chronic Dis* 2020;17:190296.

[7] National Drinking Water Alliance. 2021. *Op cit.*

[8] National Drinking Water Alliance. 2022. *Op cit.*

[9] Kenney EL, Gortmaker SL, Carter JE, Howe MC, Reiner JF, Cradock AL. 2015. Grab a Cup, Fill It Up! An Intervention to Promote the Convenience of Drinking Water and Increase Student Water Consumption During School Lunch. *Am J Public Health* 105(9):1777-83.

[10] National Clinical Care Commission. 2021. *Report to Congress on Leveraging Federal Programs to Prevent and Control Diabetes and Its Complications*. At, https://health.gov/about-odphp/committees-workgroups/national-clinical-care-commission/report-congress , pages 38-41.

[11] Bipartisan Policy Center. 2022. *Strengthening the Child Nutrition Programs*. At, https://bipartisanpolicy.org/download/?file=/wp-content/uploads/2022/01/BPC_Strengthening-the-Child-Nutrition-Programs.pdf , page 23.

[12] Robert Wood Johnson Foundation. 2021. *From Crisis to Opportunity: Reforming Our Nation's Policies to Help All Children Grow Up Healthy*. At, https://media.stateofobesity.org/wp-content/uploads/2021/10/12132618/State-of-Childhood-Obesity-10-13-21-Final-WEB.pdf , see page 27.

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