

2010 Nutrition Summit

Changing the Food Environment: Making it Happen

US Department of Health & Human Services and Department of Agriculture

April 28, 2010

Federal Government Initiatives

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You know, many agencies have teamed up to really focus attention to the heavy toll that diet-related chronic diseases take on Americans. So, it's an indication of how many leaders are really focused on the issues dealing with food and nutrition and how connected it is that we all feel to health. And it's not just a question of health costs, although that is staggering, and the costs continue to rise every year. It's really a question of national security. We cannot be a prosperous nation or a productive nation with a work force that isn't healthy. And given the health status of our children currently, we are in serious jeopardy in the future. So, this is an issue, I think, that we need to focus attention on because it has to do with the future of our nation and I think is often the silent crisis that needs some focus and attention. In 2000, the last time this joint summit occurred, there was a lot of conversation about changes that needed to be made and that individuals really needed to step up and take some responsibility. Unfortunately in the last decade those stats have gotten even worse than they were ten years ago. So, that while some focus and attention has been brought to this issue, I think it's high time that we met together and had an opportunity to relook at what works and what doesn't work and to refocus our attention.

But it's tough to make a lot of personal changes if you have an environment that isn't very supportive. Most food sold on shelves and stores has high-end calories and trans fats, salt and sugar, and very difficult often for consumers to make choices and make informed decisions. It's difficult to get accurate nutritional information as a parent or as a shopper or someone who is trying to figure out what works and what doesn't work. That nutritional information is hard to come by. And too many schools and workplaces really don't offer healthy choices. So, workers and our children in school don't have an option to make choices that might put them in healthier condition. There is no question the problem is urgent. We have a situation right now, which is becoming all too familiar, where one in three of our children are overweight or obese. And two-thirds of American adults are overweight or obese. It absolutely puts people at risk of a long series of diseases and chronic conditions. And I think the most alarming presentation I've heard about this in a long time was from Dr. Judith Palfrey, who is a pediatrician and the head for the next two years of the American Academy of Pediatrics. And what I had thought was a warning sign for children that

conditions would appear later in life if you were obese and overweight. She described what those conditions are like for a ten-year-old, and the fact that the toll is taken very early in life, that there are some significant health risks, even for the youngest children who are in unhealthy conditions, and that that begins to appear very early on; and not only causes problems later in life, but really show up at a much earlier stage. We think on a conservative average that about \$150 billion was spent last year just on the health-related costs of obesity in adults. A significant amount of money and almost 50 percent more than we spend on all cancer conditions put together to put it in some kind of a perspective. So, it's a significant health cost. We know that chronic disease is preventable. And we need to change the food environment to help make the changes that we need to make in lifestyle more sustainable. And it requires really, not only the Department of Agriculture and the Department of Health and Human Services working with our partners and stakeholders in the food industry and in the grocery industry, but it really requires an effort that reaches across government and across the private sector involving industry and employers, schools, all levels of government.

And so the summit, I think, is an appropriate focus to talk about collective action that we all need to take so that everyone can lead healthier lives. The problems are pretty obvious. A lot of parents are rushed trying to juggle jobs and kids and balancing difficult schedules, and it's difficult in that kind of timed environment to cook food from scratch, to think about getting fresh ingredients, having them on hand, making meals from scratch, and unfortunately that then the default position is often a quick drive-thru or buying something that's easier to prepare and pre-package which often is loaded with ingredients that aren't nearly as healthy as starting with fresh ingredients. We know that children eat most of their calories outside the home. About 80 percent of calories that children consume come from outside of their home environment. So, even if there is an effort and focus on carrot sticks and celery instead of Twinkies at home, there are -- most calories are consumed someplace else. So, having healthier foods in school cafeterias and in lunches, having options even at quick shops for healthier choices and beginning to, I think, focus and educate our kids about what it is that they are doing to their bodies is an important part of this entire exercise. There are entire sections of cities and rural communities which are food deserts. And the Department of Agriculture, I know, is engaged in a process right now of mapping out those deserts. But way too many people, millions of Americans, live in areas where there is no ability to buy fresh fruit or vegetables, fresh produce, within easy distance of their homes. I actually visited a store in Louisville two weeks ago. One of the cities where that got a grant from the communities putting prevention to work. And one of the strategies that was employed was a store that was a dollar-

plus store in a neighborhood with a significant public housing project. And the store owner had added racks of fresh fruits and vegetables and part with the subsidy from the city. The kids of the housing project had designed a banner called "Healthy In A Hurry." And it was being promoted in schools. And the shop owner told me that it was really quite a successful venture, that the grocery stores -- the closest grocery stores were two miles to the south and five miles to the north in terms of getting any kind of other produce and really not walkable, if you've got a couple of bags of groceries. So, that this really was an option that provided a number of people in this neighborhood and was going to be used as a footprint to spread throughout Louisville. And it was one of the strategies that's being used to deal with food deserts.

But I think it's too common in our neighborhoods throughout America that people actually cannot find healthier food choices. And it's fine to recommend to parents that they turn off the TV and their kids go outside and play. But if there isn't any place safe to play, if there isn't any safe or secure area to go outside, it's kind of hollow language. So, these efforts really involve more than our two agencies. We have got to get the Department of Transportation involved looking at walkable streets and sidewalks, talking to our partners at Housing and Urban Development about when housing is located, what is nearby, how we can maximize the kind of livable environment that people really need to live a healthier lifestyle. And certainly the environmental impacts of where you are living have a huge impact on health. So, there is a lot of strategy about this initiative that has to be across government. In terms of finding healthy food choices and shopping using the nutrition panels that are often on the backs of packages, the good news is that the Food and Drug Administration has identified that more than 50 percent of Americans in all 50 states in the District of Columbia report really trying to check those facts, looking for nutritional information. And I think that's very good news. The bad news is that the nutrition facts haven't been updated in 20 years, that often the recommendations on the back of the package deal with serving sizes that no one recognizes in terms of what they are actually serving themselves and what's recommended on the back of packages. And the panels are, frankly, pretty tough to use and pretty tough to identify. And for old folks like me, unless you have your micro-glasses on, they are impossible to see. So, that we have some work to be done in terms of food packaging and food labeling. I think it's one of the reasons that manufacturers, knowing that people were looking for information, began, you know, a process of self-labeling, putting green checks or easy-to-see markers on the front of packages and making some attempt to label healthier foods. And I think that the Food and Drug Administration recognizes the need to actually give consumers much better information, updated

information, easier-to-read information, and working in conjunction with the food industry. We hope to move to a front-of-package labeling that is far easier to use.

But based on scientific evidence and based on nutritional facts that actually give people information about what it is that they are consuming, FDA has actually put manufacturers on notice that we will take seriously, under the False Claims Act, attempts to mislabel or give information that isn't particularly accurate in terms of nutritional value. But more importantly, I think it's that we move to strategies which have been successful in other parts of the world that give consumers information that they are clearly looking for and make it easier for people to make careful choices. When Tom Frieden was the New York commissioner, he led an initiative to require restaurants to post calories in the meals that they served. And New York became a leader in that effort. The good news is that the recently passed Affordable Care Act follows that example from New York and will require chain restaurants to label choices with calorie counts; again, a strategy to let people make informed choices. They don't necessarily have to follow those choices. But if they don't have them at all -- and I don't know about the rest of you -- but I am often surprised when I read something that does a calorie comparison. Because what you think may be the healthier choice often turns out not to be as healthy as something that one thinks is a less healthy choice. So, at least on a personal basis, that would be enormously helpful, to give accurate labeling information and then let people make choices for themselves.

No question that the First Lady's initiative, having the most famous vegetable garden in the world, lead a childhood obesity initiative is enormously helpful. It not only has the attention of Americans, but I can tell you from meeting with health ministers from countries around the world, it has the attention of health ministers from various nations who are really hoping that they can learn from our efforts here in the United States, learn from the strategies that we are going to try and put in place with our communities, putting prevention to work grants, and efforts to really work with schools, and city planning groups to look at strategies to reduce this obesity epidemic. Because it isn't just in the United States, it's really appearing in most developed countries. And a lot of people throughout the developed world are really looking for strategies that we can work on together. There are millions of dollars for chronic disease reduction in cities in our 2011 budget and initiative, again, under the umbrella of the Centers for Disease Control. But following up on some of the investments made in the recovery act, we hope to put some strategies in place in the ten largest cities in America and figure out ways that we can really deal with chronic disease in a much more effective strategy, that community transformation grants for parks and gardens are part of the Affordable Care Act along with the calorie labeling, so, again, an initiative that can help with an

environment that puts people in a healthier area. The Recovery Act has significant investments and first-time investments in prevention efforts. There's been a lot of conversation for years -- and I would say since this group met for the first time a decade ago -- a lot of conversation about the need to spend money on prevention and wellness, but very few dollars directed to that. And, in fact, the money spent right now is about \$.75 of every health dollar focused on chronic disease, and about \$.08 of every health dollar on any kind of prevention or wellness strategy. And one could argue that, by shifting those resources a bit and intervening at a much earlier stage, you may well lower the dollar spent on chronic diseases in spite of what the congressional budget office may or may not agree with. I think it's a strategy that -- that makes some real sense. So, for the first time ever in the Recovery Act last year, there was almost a billion dollars put forward for a whole variety of wellness and prevention strategies: \$650 million in terms of putting money into communities to really see what strategies move the need or what can work in larger or smaller communities in tribal areas and rural towns; and then what can we learn from that and take to scale around the country so that we that have some workable strategies that work.

I've mentioned the Louisville "Food Fight" campaign, which has a whole series of strategies in place across the town. Seattle is working with food retailers to create a variety of menus of affordably priced healthy food choices. We have got Minnesota which is fighting health disparities with nutritious breakfasts and lunches for students who get free and reduced price meals and focusing on their school efforts. And those efforts are really springing up in areas throughout the United States, and strategies at the grass roots that can teach us all what really works and how we use our resources in the most strategic way possible. President Obama has really said from the outset that he wants all of us at the cabinet to work together to tackle big problems to leverage the assets and resources that we have. And I think that those strategies on this kind of initiative are so critically important. We are working right now with the Department of Housing and Urban Development on adding service components to public housing, recognizing that too often, if you want to deal with an issue like homelessness, it takes more than the house or the living space to move people off the street. It takes a wrap-around service component, and that working together HUD and HHS have come up with some joint efforts to focus on homelessness. We are working with the Department of Transportation on various ways to fund bike trails and walking paths, sidewalks and green spaces so that, again, we have environments that are conducive to healthier lifestyles and conducive to our children getting off the couch, turning off the television, turning off the computer, and actually going outside and enjoying but learning about outside exercise. Working certainly with our great partners at the Department of Agriculture to improve the health of

school age children, looking at everything from the kinds of foods served in cafeterias that exercise that they too often don't get any longer in schools. And so the Department of Education is part of this triumvirate to look at reintroducing physical education. We are redoing the physical education guidelines under the President's Council on Physical Education, and revamping the kind of nutritional guidelines for school lunches. We are looking at our own programs of Head Start and Early Head Start in terms of foods and snacks that are served. And, again, since Head Start and Early Head Start have such a significant parent component, it's a great way to start again with education of parents about what's working and not working, working together certainly on the very important initiative to reauthorize the Child Nutrition Act this year. And it gives a great opportunity to have this discussion but then put some framework around the language in the legislation to make sure that we can drive these initiatives.

So, the resources, the attention of agencies across government, the attention of the President and the First Lady, and the energy from leadership in local communities throughout the country is certainly mobilized to work on this effort together. I know that the private industry in discussions about everything from voluntarily taking soft drinks out of school vending machines to working with us on food labeling strategies is very much at the table and very engaged in this effort and dialogue. And I think that's very good news. So, we have an opportunity again to restart this effort in 2010 to commit ourselves to a healthier and more prosperous America. And I don't think anything could be more important in the discussion about the future prosperity of our country than making sure that the next generation is in healthier shape than they are right now. So, the work that you are going to do over the course of this food nutrition summit is important. But more important are the ideas and energy that you take out of this summit and the work that we continue to do together to end up with a healthier nation. Thank you.

Janey Thornton, MS, PhD
Deputy Under Secretary, Food, Nutrition, and Consumer Services
U.S. Department of Agriculture

On behalf of Secretary Tom Vilsack, I would like to join Secretary Sebelius in thanking all of you, and especially our speakers, for carving out a little bit of time from your busy schedules to be here with us today to participate in discussions about important issues that are before us. The nutrition summit emphasizes the administration's focus on joining forces and working across departments and agencies and with public and private groups to address critical issues. And I know that we all agree that promoting good nutrition is one of the most critical issues facing our nation today. All of us at USDA are fired up and ready to go to work together with all of you to improve diets and promote the health and well-being of our nation's people. I know that Secretary

Vilsack wishes that he could be here today, because those of you that know him know that he is passionate about these issues, and it's a central part of USDA's mission. His insights, his energy his commitment to keep us motivated at the department to do all that we can to advance that mission every day is foremost. Though he is unable to attend in person, he prepared and recorded some remarks to present to you to share his vision for the summit and the administration's nutrition agenda. Throughout his distinguished career of public service as mayor, state senator and governor of Iowa, Tom Vilsack has a remarkable record of making positive change in the lives of those he served. Already as the 30th Secretary of the United States Department of Agriculture, Secretary Vilsack has worked to implement President Obama's ambitious agenda to turn around the economy and put Americans back to work. In the tough economy of 2009, USDA supported struggling farmers and ranchers, provided food aid to one in five Americans, and implemented the Recovery Act to create jobs and build a foundation for future economic growth. Under the Secretary's leadership, USDA is working to conserve America's forests and private working lands and to clean our water supply. At home, USDA is strengthening the American agriculture economy and promoting agriculture production and exports. Globally we are working to combat hunger and to help individuals grow the foods that they need. President Obama and Secretary Vilsack are committed to improving the health of America's children by providing them with nutritious and balanced meals, encouraging increased physical activity and improving our food safety system. And Secretary Vilsack's USDA is implementing new strategies to revitalize America's rural communities so they have thriving economies and growing populations. Ladies and gentlemen, I am proud to present to you a statement from Secretary of Agriculture, Tom Vilsack.

Thomas Vilsack
Secretary, U.S. Department of Agriculture
(Pre-recorded comments provided by video)

This is Agriculture Secretary Tom Vilsack, and I am sorry I can't be with you today, but I am traveling with President Obama. But I wanted to talk to you today about some of the exciting work going on in the administration at USDA to bring change to the food environment in communities across the nation. But before I do, I want to thank some of my partners in this effort. Over the past months through the President's childhood obesity task force, we have sought out interdepartmental synergies that will pay real dividends in the years to come. Secretary Sebelius and our team at HHS, CDC and FDA have played an incredible role, and the folks at the Treasury Department have also stepped up to do great work. Of course, this is all truly been driven by the leadership of Michelle Obama, whose tireless work has us all looking at new and creative policies and advocacy efforts to raise a healthier generation of children in America. I believe these are exciting times for

food and nutrition in America. Across the Obama administration, we are in the midst of taking some very important steps to improve the health and nutrition of America's children, and I believe we will have a lasting impact for generations. Here at USDA, we focused our efforts on the food environments and 100,000 schools across the country. That is why I outlined a vision for reauthorization of the Child Nutrition Act but looks to increase participation in the program while improving the nutritional value of the meals being served to our children. This will include updating the meal standards with the latest science, lowering barriers to participation in our school meal program, as well as child care and summer feeding programs, and getting junk food out of our schools to make healthy choice, the easy choice for our nation's children. We consider this bill the legislative centerpiece of the administration's effort to ensure the health of our youngsters. We appreciate the work, help and support that so many of you in the audience have offered in developing this proposal, and we continue to believe that Congress will work to pass a robust bill that supports the President's \$10 billion-dollar budget request. We are waiting for this process to move forward. We cannot move quickly enough to make changes in our schools. That is why we are encouraging schools to participate in the healthier U.S. school challenge, a USDA program which recognizes schools that do an exceptional job in improving the health of the whole school environment. These schools are working to improve meal quality, offering nutrition education, and encouraging physical activity. But to date, only 650 schools across the country have met this high bar. So, we have streamlined the application process, and we are working with a host of partners, including the First Lady's "Let's Move" initiative, the School Nutrition Association and community groups across the country to meet our goal of reaching 3,000 healthier U.S. challenged schools over the next three years. USDA has planned trainings on the healthier U.S. school challenge for 26 states over the next few months and already we are seeing a rise in applications to the program.

So, we are doing all we can to ensure that children can be the healthiest and best-educated generation in our nation's history. And I don't think it's hyperbole to suggest that the health of our nation, of our economy, of our national security, of our communities, depends in large part in the health of our children. But it also goes without saying that our efforts cannot concentrate solely on the school environment. And USDA is involved in a host of other efforts to improve food environments across the country coordinating with HHS and the Treasury to move forward with President Obama's Healthy Food Financing Initiative. Now, this plan will fund some very promising approaches to confronting food deserts and create jobs in communities across the country by developing grocery stores and other retailers that will promote nutritious foods. Today I am pleased

to announce another step forward in improving access to nutritious foods in low income communities. Next month, USDA will launch an online SNAP store locator tool that will help SNAP recipients find local stores where they can redeem their benefits. This locator tool, which will provide store information and locations and names on a map, will be particularly useful to the millions of Americans who have become eligible to participate in SNAP in the past year as well as to community organizations and others helping SNAP recipients. I hope that you will have a chance to discuss all of these issues today and many more because they all represent important elements of a coordinated Federal response to hunger and obesity in a crisis which we face in both in our nation. The truth is that the Obama administration understands that we can only be one piece of a larger puzzle in confronting these challenges. Your energy, your support, your ideas and your partnership are critical to shaping a stronger food environment and a healthier future for our great nation. Thanks so much for your concern and your commitment and for your attention.

Thomas Frieden, MD, MPH
Director, Centers for Disease Control and Prevention

Everyone has a responsibility to try to address the obesity epidemic: Policy makers, governments at all levels, food companies, schools, and parents. The First Lady's "Let's Move" campaign aims to cut obesity in a generation, engages all sectors to influence child health and focuses on healthier choices, healthier foods in schools, increasing physical activity, and improving access to healthy food choices. Dr. Bauer leads the Chronic Disease Center, which is leading the communities putting prevention to work initiative: 44 communities, 30 of them focusing on reducing obesity. How do we find ourselves in the middle of an epidemic? With the average American as 23 pounds overweight, where childhood obesity has tripled in just a single generation, and where, if you go with the flow in America, you will end up overweight or obese as two-thirds of adults in this country are. We eat too many calories, too much salt, too much fat and too much sugar. We don't get enough physical activity. And with Segways and electric toothbrushes, we have pretty much engineered all of the last physical activity out of our lives, especially in some poor neighborhoods. It's easier to buy high-calorie foods with little nutritional content than it is to buy fresh produce. And our children are inundated in advertising promoting unhealthy foods that will shorten their life span. This environment is taking its toll on America's health and on our economy. The cause of the obesity epidemic is not that people have changed, it's that our environment has changed. And it's only by changing our food environment again can we reverse the epidemic.

Obesity is dangerous and costly. As you know, it affects just about every organ of the body. It leads to high rates of heart disease, stroke, diabetes, depression, liver disease, pancreatitis and

cancer. \$150 billion dollars a year is spent to treat obesity-related conditions. And we know that if we could substantially reduce obesity, we could drive down health care costs significantly. We need to change the food environment so that healthy decisions are the default value. This is going to require coordinated effort at the federal level, to develop scalable evidence-based interventions that promote good nutrition, increased physical activity and preventive health. In short, we have to walk the walk, talk the talk, and eat the meals. We have to walk the walk because only about one in six of our students get even moderate physical activity, and among adults, when you ask on surveys, about 40 percent say they get the recommended level of activity. But when you hook them to accelerometers, it's about four percent get recommended physical activity. And, of course, physical activity is the wonder drug. It increases just about everything you would want to increase, and decreases just about everything you want to decrease. And if you don't lose any weight with physical activity, you still live longer, reduce your blood pressure, and reduce your risk of cancer and diabetes. So, physical activity is something that we need to try to engineer back into our lives. Active children are likely to become active adults. Currently, not only is there too little physical education in our schools, but there's too little physical activity in our physical education. If you look at the amount of time that kids are active in physical education classes, it's only about a third. Increasing that modestly to half or more could make a significant difference without even increasing the expenditures or the amount of time in phys-ed class, which we would like to see increased.

We also need to change our communities to encourage walking and active recreation, looking at how we structure our streets, mixed development, public transit, sidewalks, bike lanes, lighting, parks, and safety, whether it's in the stairwell of the parks or the people feel safe to go outside. We need to talk to talk. And Dr. Hamburg will talk about some of the potential to improve our menu labeling and more effective labeling of packages. What we know from New York City's experience is that menu labeling is effective at greatly increasing consumer awareness, that it led to at least many restaurants adding new lines of products which would lower calorie and better choices for people. That in many change led to significant decreases in the number of calories consumed per meal, but that it was easily overwhelmed by financial incentives. So, when Subway went to a \$5 for a foot long, the amount of calories consumed per purchase increased substantially even with more prominent labeling.

In terms of talking the talk, we also have to look carefully at the issue of advertising. Five years ago the Institute of Medicine called for the food industry to establish and adhere to a strong voluntary restriction on marketing of unhealthy foods to children. Current marketing environment

really does threaten the next generation of children. In 2007, two years later, the children's food and beverage advertising initiative with more than a dozen of the nation's largest companies representing about two-thirds of advertising budget publicly promised to improve the nutritional quality of products advertised. Unfortunately, it's been found by a recent study that the food industry has failed to follow through on many of those promises. Three out of four foods advertised to children on television are unhealthy choices; and it's not just television, it's moved to movies, it's moved to the Internet, it's moved to many other venues in which children are inundated with information that is threatening to their health. Commercials for fruit and vegetables account for only one percent of all food advertising to children; and by one estimate, if there were no fast food television ads during children's programming, there would be a substantial decline, about 15 percent in childhood obesity. And we need to eat the meals. Increasing the availability of healthy, affordable food and beverage choices, changing the relative price of healthy and unhealthy foods, increasing exposure to healthy foods, and improving the geographic availability of supermarkets, particularly under served areas, removing junk foods from our schools, from our health care facilities and from government institutions, offering cool water instead of sugar-sweetened beverages. Child soda consumption, like obesity, has also tripled since the 1980s. A third of teens and 10 percent of toddlers and preschoolers drink at least one sugared beverage every day. And each additional daily serving of sugared soda increases a child's risk of obesity by 60 percent. Water is an effective alternative to soda in schools, childcare centers and youth settings.

Second, we can eliminate artificially trans fat. It's a realistic goal. It has significant health benefits with the phase-in. There are no significant supply, cost or taste issues. Third, we can address sodium. Excess sodium is a big public health problem and potentially one of the most significant public health threats. In 2005, Americans -- only about one in ten Americans consumed within their recommended limit. Most Americans consumed doubled the recommended limit, and on average we consume about eight times our physiological need for salt. The result is an epidemic of high blood pressure and approximately a hundred thousand preventable deaths each year. Restaurant and processed food accounts for more than three quarters of sodium consumed. And the content is so high that the daily limit is often exceeded before the food comes out of the kitchen or reaches the table. It's a lot easier to put as much salt onto your food than it is to take salt out of it once it comes to your table. We want to ensure that American consumers are empowered to choose how much salt they want -- they eat and that's possible by substantially reducing the amount of salt in our foods. The American Medical Association, the American Public Health Association and many other organizations have called for a 50 percent reduction over ten

years. We are optimistic by working with food manufacturers and restaurants it will be possible to significantly reduce sodium content.

Monitoring is also critically important tracking obesity prevalence and selected risk factors at state and national level and, at some local areas, tracking diet and physical activity, policy and programs, better understanding what's actually happening in the marketing environment. The community focus and the state focus of the communities putting prevention to work activities, which is investing \$119 million in state activities to promote comprehensive wellness and prevention and \$373 million in communities to reduce obesity, increased physical activity, and improved nutrition and decrease smoking, will bring projects, including locally produced foods, land use and active transportation policy, physical activity in schools and much more. The challenge to all of us is to reverse the epidemic of obesity. Moving forward, it will be essential to partner with the food industry. Unlike tobacco, food is necessary although some food products have little or no nutritional value. Significant parts of the food industry have an economic interest in healthier foods, and most of the food industry is now attuned to help outcomes doing research on healthier products. Voluntary action is possible in many areas. Even small changes can have a big impact. An hour of exercise class can burn 300 calories. Walking to school can burn 30 calories. Drinking water instead of sugar can reduce calorie consumption by several hundred calories a day. Switching to one percent or skim milk can save about 30 to 40 calories a day. Walking a couple of flights of stairs can burn off about a pound a year.

The most effective way to change the food environment is through community-wide action. Every community needs a core package of interventions to reduce obesity and promote nutrition. That may include limiting unhealthy food availability in public places, ensuring healthy food in schools, active physical education in schools, promoting breast-feeding, getting television out of children's bedrooms, having safe routes to schools so children can go back to walking to school, having effective media work to encourage healthy nutrition, working to change the relative price of healthy and unhealthy foods and rigorously monitoring how we are doing. Everyone has a role to play: Federal, state and local levels, government and private sector. Given the facts and given healthy choices, most people want to live healthy lives. It's our job to empower them to make that choice. Thank you very much.

Margaret Hamburg, MD
Commissioner, U.S. Food and Drug Administration

It's really a pleasure to participate in this summit and to have the opportunity to work with such terrific colleagues as those up on the stage and also so many of you out in the audience. Secretary Sebelius and Dr. Frieden have described for you this morning the toll that diet-related, chronic diseases take on American lives. We know that some 65 percent of all Americans are obese or overweight and 17 percent of those under 20 are obese. We know that the dangers of heart disease, stroke, and diabetes are indisputable for millions in this country. And we know, most importantly, that much of this is preventable. So as I bring this opening session to a close, I will try to be brief—but I want to clear about the magnitude of the problem we face. Diet-related chronic disease, including obesity, is a defining public health issue of our time. Which means we have a lot of work to do. And a high bar to reach. To be truly successful, the progress we make in this new decade must resonate for generations to come.

It's no surprise that the way we eat today is different from our parents and grandparents. Times have changed and not entirely for the better. But now it is our responsibility—our burden—to ensure that the way we eat will be different from our children and grandchildren, too. Only this time, it must be for the better. No one person in this room—or any single organization represented here today—can possibly do everything needed to “change the food environment,” as we are being called on today to do. No one person or organization can possibly tackle all the scientific, economic, and societal causes of diet-related disease. But working together, I think it is a whole different story.

It will take industry and consumer groups; it will take government...from the very highest levels to the most local. And it will take resources, brainpower and commitment from all of us—on this stage and in this room, and millions of people throughout this country. But together, we can shift the paradigm. We will swing the pendulum from the reality of crisis to the promise of change. And it is up to those of us in this room today to lead the way. Certainly the fight against obesity and diet-related chronic disease is one of FDA's top priorities—and one of mine. As a regulatory agency with a mission to protect the public's health, FDA has a unique responsibility in this effort. We are committed to helping consumers get the information and products they need to make healthier choices every day. Much of the Federal government's effort to improve nutrition, and combat obesity and preventable disease, is focused on one central premise: Americans must be able to make healthier choices. But Americans can't make good choices without good information and options.

As the First Lady has said, there's nothing wrong with occasionally eating ice cream or

hamburgers, and even French fries. Those foods are part of a normal lifestyle. It's when people go overboard, or don't understand how to put together a healthful diet overall, that they can get into serious trouble. Americans need a clear, effective and—above all—easy way to get information about their food choices. We at FDA are committed to playing a leadership role in giving consumers the information they need to make healthier choices every day.

That's what the Nutrition Facts panel developed by FDA and USDA in the early 1990s was created to do. For the first time, basic nutrition information was placed on the back or side panel of virtually all packaged foods...which meant consumers had access to accurate, relatively complete information on all their processed foods. Studies showed that people grew accustomed to the label: they liked it; they used it; and they trusted it. Still, in 2010, the limitations of the Nutrition Facts label have become clear...as Secretary Sebelius noted. It takes time to read and digest the information on the label. But today, Americans expect quick, easy answers. In addition, people are being bombarded with all kinds of additional messages and claims.

Everyone in this room knows this is true. Because we've all experienced it. When we're rushing through the supermarket on the way home, gathering things for dinner, we have limited time and energy to make choices...especially if we need to find food items for specific dietary requirements like low-fat, limited sugar or low-sodium. For better or for worse, I think we all want to be able to scan and absorb nuanced information about our food as quickly as we scroll through e-mail on our BlackBerrys. Something that we have probably gotten far too practiced at... But the food industry figured out our wants and our needs years ago—and responded with short, eye-catching claims on the front of their packaging. Symbols labeled products as “heart healthy”; snack foods advertised their calorie totals; and lower-fat versions of popular items declared themselves “lite.”

Then, right around the time I was sworn in as Commissioner last year, industry started to move toward a new, more standardized approach. Many companies had signed onto a program called “Smart Choices.” A “Smart Choices” checkmark was intended to denote foods that met certain nutritional criteria. But, as most of you know, these criteria were called into question—and with some gentle urging from the FDA, the program was suspended pending further research and consideration. This particular program may not have been the answer, but it is clear that a lot of people in a lot of places believe that it is really important to devise ways to give consumers simple, easy-to-understand nutrition information on the front of food packages.

With that in mind, we at FDA have been spearheading an effort with our colleagues in government and outside to develop a system for front-of-pack nutrition labeling that will be

evidence-based, easy to read...and provide clear and consistent guidance for making healthy food choices. It's about simplicity and accuracy...and we're working in partnership to engage everyone involved. We're working with food manufacturers and marketers, with consumers and academics. We've studied existing front-of-package label programs, such as summary symbols that provide an overall index of diet and more detailed approaches, such as the "traffic-light" system in England that indicates sodium, sugar, and saturated fat content with green, yellow, or red circles. And we're also working with the Institute of Medicine and others to provide further advice on existing front-of-pack symbols and algorithms. In addition, we've opened a docket at FDA for industry, academics, consumer groups, the general public and others to submit relevant findings and ideas.

Consumers deserve the most accurate information possible. Toward that end, we have also stepped up some of our efforts to clarify existing labels and nutritional claims. As you may know, we have sent advisories to a host of food companies about problems with their current labeling. And to ensure that other package information for consumers wasn't confusing or misleading, we have also sent notices to a number of companies about certain products. I am pleased to say that most have agreed to modify their labels and product information to conform to current rules. But specifically on front-of-package labeling, as of now, we have made no decisions—not even tentative or preliminary ones—about what the labeling will look like. So I hope that everyone here will give us their best thinking about what will work for American consumers... for you and for me, and for our friends and families. We intend to bring the best science to bear on this challenge, and we want to engage everyone who has ideas.

And though still in formulation, we do have clear parameters for success. The labels must be based on the standardized nutrition criteria in the Dietary Guidelines for Americans... They must be widely adopted by food retailers and manufacturers... They must appear in a standard format that consumers will easily recognize... And they must be accessible to consumers with a wide range of literacy, education level and age. I should note that much of the work in this area is being performed by our nutritionists, consumer researchers and other experts in FDA's Center for Food Safety and Applied Nutrition. They have been working really hard for months to gather the necessary data and to develop guidelines for an improved nutrition labeling approach. So I want to take this opportunity to publicly thank them for all they have done to further this effort. I would also like to recognize the food manufacturers who have demonstrated a strong interest in working with us on a universal front-of-pack symbol. This kind of cooperation was not always the case.

When Don Kennedy was FDA Commissioner back in the 1970s, he, in conjunction with the Department of Agriculture and the Federal Trade Commission, proposed that all foods be required

to have nutrition labeling. As I understand it, there was such opposition at the time from the food industry that scores of trade associations and companies wrote to Congress requesting that the pay of those three agency leaders be cut as a message of disapproval. Today, the industry is working constructively with us toward the development of an effective front-of-pack system...and I've heard no calls to dock my pay just yet. And I look forward to working with them on other nutrition initiatives at FDA.

Menu labeling, for example. When President Obama signed the health care reform legislation last month, it included several new requirements. Chain restaurants must post calorie information for all menu items and have additional nutrition information available upon request. And vending machines must also post nutrition information for each item sold. FDA is charged with overseeing this labeling. The truth is consumers are besieged by tough food choices in a variety of environments. Approximately one-third of all meals are consumed outside the home and the prevalence of high-calorie menu items in popular restaurants has been well documented. We hope that by providing calorie information on menu boards in addition to labeling on the front of packages healthy decision-making will become a part of the daily lifestyle.

Finally, I'm sure you've heard a lot recently about sodium—and, this morning, Secretary Sebelius and Dr. Frieden have both talked about this morning. There will be a great deal more focus on this important public health issue, including a briefing from my friend and former FDA Commissioner Jane Henney, on the recent IOM study on strategies to reduce sodium intake. Dr. Thomas Farley will also be talking about the pioneering work of the NYC Department of Health and Mental Hygiene to reduce salt. I might add that we too share a job in common... We have a lot to learn from these efforts and there is much to be done. There can be no down that sodium is a critical concern and we have to make progress. Reducing salt in the diets of Americans is a hugely important public health concern, and a priority for our agency. We know that there is no single action that will solve the problem. It is a complex issue that will require a unified, national approach to be effective and sustained. Many options will be discussed, and we look forward to working closely with our partners in government, other stakeholders and most importantly with the industry to achieve substantial reductions in the levels of salt in foods and in our diets.

As I began my remarks this morning, I commented on FDA's fundamental public health mission...and I want to come back to that idea as I close. Our agency was created in 1906, largely in response to Upton Sinclair's book *The Jungle*, an exposé of the horrific working and sanitary conditions of the meatpacking industry. The Pure Food and Drug Act was enacted at that time to protect the public against, among other things, "misbranded, or poisonous or deleterious foods." A

lot has changed since then, yet Americans are still at risk because of a food environment that can be harmful to their health. We can change that—if we work together. And only together can we fully harness the public health roots on which our agency...and many of yours...were founded. Only together can we take the steps needed to change today's food environment. Only together can we deliver simple, effective, long-lasting solutions for the American people. This is the task before us. Thank you.