S

chools today are under intense pressure to help combat the childhood obesity crisis plaguing our country, and they are doing everything they can. Every day at lunch and breakfast, nutritious meals are prepared and served with cartons of milk in the hope that students will get the nutrients and energy they need to focus on learning. But the hope and the reality are not always the same. Kids eat food they like, and one way to get them to make healthier choices in food and drink is to make those choices more attractive. For example, industry studies have shown that by packaging milk in a variety of flavors in fun, kid-friendly containers, milk consumption in school increases.

IN BRIEF
As schools try to combat childhood obesity by providing more nutritious meals, there has been an increasingly successful effort by the dairy industry to draw children away from sugary sodas and fruit drinks. Two recent large-scale pilot programs have shown that school milk consumption increases when it is offered in a variety of flavors and attractive containers.

An old favorite is making a comeback in schools with new flavors and packaging.

Michelle Albee Matto
The Importance of Milk in Students’ Diets

From a health and nutrition perspective, milk is an ideal beverage for children. According to the Dietary Guidelines for Americans 2005, issued by the U.S. Department of Agriculture and the U.S. Department of Health and Human Services, adults and children over the age of 8 should consume three cups per day of fat-free or low-fat milk or equivalent milk products.

Let’s look at milk’s nine essential nutrients and their benefits:

**Calcium** helps build and maintain strong bones, and is vital for nerve function, muscle contraction, and blood clotting. Each eight-ounce serving of milk provides 300 milligrams of calcium, about a third to a fourth of the daily calcium requirement for children.

**Protein** is important for a number of bodily functions and is vital to brain development and the growth of body tissues.

**Vitamin A** maintains normal vision and skin. It also helps regulate cell growth and the integrity of the immune system.

**Vitamin B-12** is essential for the growth and health of the nervous system. It is linked to normal activity of folic acid and is involved in blood formation.

**Vitamin D** promotes the absorption of calcium and phosphorus, and influences the strengthening of bones.

**Potassium** regulates the body’s fluid balance and blood pressure. It is also needed for muscle activity and contractions.

**Phosphorus** helps generate energy in the body’s cells and influences the strengthening of bones.

**Niacin** keeps enzymes functioning normally and helps the body process sugars and fatty acids. It is also important for the development of the nervous system.

**Riboflavin** helps produce energy in the body’s cells and plays a vital role in the development of the nervous system.

But just because milk is one of the most complete combinations of vitamins and nutrients doesn’t mean that kids will drink it. There are a lot of other pleasing but less nutritious drinks being heavily marketed to kids today, and even though the milk industry has been working to make milk more appealing to kids, with new flavors and fun packaging, studies show that students switch from milk to sugary sodas and juice as they head into...
adolescence. Other studies show that childhood obesity among kids has tripled in the past two decades and recent research suggests that beverage choices play as great a role in this pandemic as food does.

How About Flavored Milk?

A study published in the Journal of Adolescent Health (Frary et al. 2004) found that children ages 6–17 who consumed more than six to eight ounces of flavored dairy products, such as chocolate milk, yogurt, ice cream, and pudding each day had better diets than those who regularly drank sodas and sweetened drinks.

Marlene Pfeiffer, supervisor of the Parkway School District Food Services in St. Louis, encourages schools to consider milk in a variety of flavors, such as chocolate, strawberry, and vanilla. “Offer milk in flavors kids like and keep it really cold (at or below 39 degrees) and they’ll finish it,” she says, noting that flavored milk has all of the vitamins and minerals as white milk.

Studies have found that children who consume flavored milk do not have higher intakes of added sugars or total fat in their overall diet in comparison to children who don’t consume flavored milk (Johnson et al. 2002). Furthermore, the added sugar in flavored milk totals less than 2 percent of total added sugar in a typical teen diet, compared to more than 50 percent provided by sodas and fruit drinks.

Increasing Milk Sales and Meal Consumption

Industry studies have proved that offering milk in a variety of flavors and sizes through breakfast programs, in the a la carte lunch line, and after-school programs can be a wise choice for both the financial health of your school and the physical health of your students by encouraging increased consumption as well as increased meal participation.

In 2000–2002, the School Milk Pilot Test was conducted by the School Nutrition Association and the National Dairy Council in 146 schools serving 100,000 students in 18 school districts. Using high-visibility displays and fresh new packaging, adding more flavors in a variety of sizes, and offering milk on lunch lines, a la carte lines, and in vending machines increased overall milk consumption by 35 percent. Elementary schools experienced a 15 percent increase in unit sales, and a 1.5 percent increase in meal participa-

Dr. John W. Harris Was A Pretty Cool Guy

By founding The National Beta Club in 1934, Dr. Harris created an organization that has grown to serve millions of students over the years. Though he wouldn’t have used the term, Dr. Harris believed that promoting academic achievement, service learning, and character development were some of the “coolest” things that teachers and administrators could do for their students.

While he wasn’t a media celebrity or a cultural icon, we believe that Dr. Harris’ vision for young people made him one pretty cool fellow.
tion—all adding up to increased school revenues.

A similar test in 290 St. Louis area schools in 2004–2005 featured the use of enhanced carton packaging and a variety of improved milk flavors. The test, sponsored by the Milk Processor Education Program, the St. Louis Dairy Council, and a local milk processor, resulted in milk sales increases of more than 34 percent in a quarter of the schools and an overall average increase of 12.2 percent.

To learn more about how schools like yours have improved their milk programs and increased sales, visit www.milkelivers.com.

References


Michelle Albee Matto is a registered dietician and regulatory affairs manager for the International Dairy Foods Association. Her e-mail address is matto@idfa.org.
Support Your School Nurse

School nursing has existed in the United States for more than 100 years, but the scope and definition of the nurse’s role has changed greatly. Today, the school nurse plays a key role in supporting school attendance and learning by children with disabilities, chronic medical conditions, and complex mental health issues, as well as those affected emotionally and physically by changes in family structures, health care, or economic stresses. Many schools recognize this role in budgeting for school nurses in their buildings. In addition, federal regulations mandate that schools provide nursing services for qualified students with special needs.

However, having a health professional in an educational setting can be a managerial challenge for principals. How do you supervise a staff member whose discipline is outside of your expertise? How can you provide professional support?

Here are some specific ways principals can build a positive professional relationship with school nurses:

**Acknowledge nurses as professionals.** “Nurse” is their appropriate job title—not “health aide” or “health clerk.” Nurses are professionals who are usually required to hold an RN and bachelor’s degree, and must participate in continuing education to maintain nursing licensure. In addition, many states require specialized school nurse certification. Listing the school nurse with other professional staff in your school directory, rather than with office staff, indicates to parents that their children are receiving professional care.

**Ensure adequate staffing ratios.** The National Association of School Nurses recommends at least one full-time school nurse per building and no more than 750 regular education students per nurse. Special education students usually require more intensive nursing services.

**Utilize their health expertise.** When developing health, safety, wellness, nutrition, or crisis management policies, seek your nurse’s input. When interviewing a new nurse, include a current nurse on the interview and hiring committees.

**Use nurses only for nursing.** Do not assign your school nurse to bus duty, lunch counts, or attendance phone calls. Unlike teachers, nurses do not have scheduled blocks of uninterrupted time or planning periods. Even if not actively working with students, there is always follow-up work and medically related paperwork to tend to.

**Encourage nurses to attend team meetings.** This includes special education, faculty, and other staff meetings. Nurses need to be aware and informed of what is going on in the school in order to best serve the students.

**Allow your nurses to team with other district nurses.** It is challenging to function as the only health professional in a school building. The support and information of other nurses is crucial. Arrange for your nurse to attend district nursing department meetings. Doing this also creates consistent health services across the district.

**Allow nurses to pursue continuing education.** This applies to opportunities both inside and outside your district. This may involve arranging for a substitute nurse. If so, do not use nonprofessionals. This is like asking someone to practice nursing without a license and makes your school potentially liable.

**Provide adequate workspace.** At the very minimum, the nurse’s office should be equipped with a handicapped-accessible bathroom, a sink with hot and cold water, a small refrigerator with a freezer, a phone with an outside line, cots, a desk, a computer, and a quiet, enclosed area for health screenings or confidential conversations.

**Pay your nurse as you would a teacher.** Nurses require the same level of education as teachers and have additional credentials as well. Their salaries should also reflect nursing credentials as well. Their salaries should also reflect nursing experience in other settings.

**Keep communication channels open.** Observe nurses and provide them with feedback just as you would for teachers. If you are not sure how to address nursing concerns, work together with your nurse. Your priorities are the same—to support and encourage the educational process while meeting the needs of students and their families in every way possible.

Wendy Doremus, RN
School Nurse
Armstrong Elementary School
Westborough, Massachusetts
w.doremus@comcast.net