

# Sodium Reduction in Communities



Reducing sodium intake to levels consistent with the *2010 Dietary Guidelines for Americans* is a priority for the Centers for Disease Control and Prevention (CDC). The agency is working in multiple areas to reduce sodium intake by (1) promoting local, state, and national nutrition strategies; (2) enhancing the monitoring of sodium intake and changes in the food supply; and (3) expanding the practice-based and scientific literature on sodium.

To promote local and state sodium reduction strategies, in 2010 CDC launched the **Sodium Reduction in Communities Program (SRCP)**, a 3-year demonstration program to help reduce sodium intake at the local level. This program provides funding and technical assistance to six communities across the United States to put into action sustainable strategies to reduce sodium intake in the population and to build practice-based evidence around effective strategies.

High sodium consumption is a major contributor to high blood pressure, a leading cause of stroke, coronary heart disease, heart attack, and heart and kidney failure in the United States. The *2010 Dietary Guidelines for Americans* recommend limiting sodium to less than 2,300 milligrams (mg) per day. Individuals aged 51 years and older and those of any age who are African American or who have hypertension, diabetes, or chronic kidney disease should limit intake to 1,500 mg of sodium per day. These specific populations account for about half of the U.S. population and the majority of adults.

Studies show that on average, U.S. adults consume more than 3,300 mg of sodium per day. An estimated 77% of sodium in the American diet comes from processed and restaurant foods. Reducing dietary sodium intake to 2,300 mg per day could reduce hypertension by as many as 11 million cases annually. Further reductions in sodium intake to 1,500 mg per day could reduce hypertension by 16.4 million cases annually.

## Increasing Choice at the Local Level

The majority of the sodium Americans eat is already in processed and restaurant foods, so reducing personal sodium intake can be difficult, even for motivated persons. Local-level public health strategies that aim to increase availability of lower sodium options in settings where individuals make food-purchasing decisions will increase consumers' control of how much sodium they choose to eat. Creating healthful food environments in key venues may reduce sodium intake across the population.

In the program's first 2 years, SRCP funded communities have demonstrated that a variety of community-level interventions can improve availability of and access to lower sodium foods. Communities are working in various venues, including government and private worksites, independent restaurants, schools, congregate meal programs, grocery stores, and hospitals, to increase availability of lower sodium products and decrease sodium intake. Each SRCP community collaborates with complementary nutrition and chronic disease prevention programs to increase impact while maximizing resources and preventing duplication of efforts.

# What Are Communities Doing?

Building on existing community-level strategies to improve nutrition and lower blood pressure, each funded community is implementing and evaluating sodium reduction strategies. Each community works with the media to increase public awareness of the harms of high sodium intake and increase demand for lower sodium choices. Together, these efforts will improve access to and availability of lower sodium options and contribute to the evidence base for effective community-based sodium reduction efforts. Examples of sodium reduction activities in each CDC-funded site are outlined below.

## California (Shasta County)

- Work with independent restaurants to reduce sodium in menu items.
- Work with local governmental entities to establish sodium guidelines for foods sold in government facilities.
- Work with school districts to carry out sodium reduction strategies for school lunch menus and to incorporate sodium standards into local school wellness policies.

## Kansas (Shawnee County)

- Work with city and county government departments and private employers to adopt and implement procurement strategies that result in lower sodium content of foods sold or provided in worksites.
- Work with convenience stores to establish environmental supports that promote low sodium foods and to increase purchase of fruits and vegetables.

## Los Angeles County

- Work with county agencies to implement strategies to improve nutrition of foods purchased and sold, including incorporating gradual sodium reduction.
- Work with the Los Angeles Unified School District to adopt and carry out new breakfast and lunch menus that meet sodium targets set by the Institute of Medicine.

## New York City

- Reduce the sodium content of food purchased and served by New York City's independent restaurants and work with suppliers to provide lower sodium options.
- Create and put into action food standards for retail food venues in New York City hospitals.

## New York State

### Broome County

- Increase availability, identification, and sales of lower sodium products in grocery stores.
- Work with school districts to reduce the sodium content of school meals and competitive foods.
- Reduce sodium content in meals served at senior centers.

### Schenectady County

- Reduce sodium content in meals served at senior centers, through home-delivered meal service, and at senior residential facilities.
- Increase the availability and sales of lower sodium items at independent restaurants.

