

Sodium Reduction in Communities



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 who are 51 and older and those of any age who are African American or have hypertension, diabetes, or chronic kidney disease should limit intake to 1,500 mg of sodium per day. These groups account for about half the U.S. population and the majority of adults.

Studies show that, on average, U.S. adults consume more than 3,400 mg of sodium per day. An estimated 77 percent of sodium comes from processed and restaurant foods. Reducing dietary intake of sodium to 2,300 mg per day could prevent as many as 11 million cases of hypertension in the United States. Further reductions in sodium intake to 1,500 mg per day could prevent more than 16 million cases.

Policy, System, and Environmental Changes

Voluntary activities to reduce sodium intake in the U.S. population have been ongoing for more than 40 years, but success has been limited. Public health action is required at the federal, state, and local levels to improve the health content of foods and reduce sodium intake. Policy, system, and environmental changes are effective and feasible ways to reduce sodium intake across the population.

Reducing sodium intake is a priority for the Centers for Disease Control and Prevention (CDC), which is working to reduce sodium intake by promoting local, state, and national strategies; working with public and private stakeholders; enhancing the monitoring of sodium intake and changes in the food supply; and expanding scientific literature on sodium. In 2010, CDC launched the **Sodium Reduction in Communities Program (SRCP)** to reduce sodium intake by helping create healthier food environments at the local level. Five sites were funded to promote and sustain policy, system, and environmental changes in communities and to conduct program evaluations of their progress toward reducing sodium consumption in the population.

Program Goals

Short-Term Goals (2–3 years):

- Increase the number of policies and programs that support reducing sodium intake in communities.
- Expand public health efforts to implement sodium-related policies, surveillance, and evaluation.

Long-Term Goals:

- Reduce sodium intake to within the recommended levels in the 2010 Dietary Guidelines for Americans.
- Decrease average level of blood pressure and improve blood pressure control in the general population.

What Are Communities Doing?

Building on existing community policies to improve nutrition and lower blood pressure, each funded project supports implementation of at least one major sodium reduction policy strategy as well as media and evaluation activities. Examples of sodium reduction policy activities are outlined below.

California (Shasta County)

- Work with restaurants to implement sodium guidelines for menu items.
- Develop a Healthy Restaurant toolkit featuring sodium guidelines and recommend that the toolkit be a required part of the business licensing/renewal process.
- Work with local governments to establish a policy that sets sodium guidelines for foods sold in government facilities.
- Work with school districts to incorporate sodium reduction into menu items and sodium guidelines into local school wellness policies.

Kansas (Shawnee County)

- Work with city and county departments as well as private employers to adopt and implement procurement policies that lower the sodium content of foods sold or provided in worksites as well as promote practices that support healthy nutrition and sodium reduction.
- Work with convenience stores to develop and implement competitive pricing strategies to promote low-sodium foods and to increase purchase of fruits and vegetables.

Los Angeles County

- Work with large food service venues in the county to implement system/environmental changes to reduce sodium content in foods.
- Work with the Los Angeles Unified School District to adopt and implement food policies to improve the nutritional content of school meals.
- Develop and establish the capacity to monitor menu labeling and sodium content in restaurant food throughout the county.

New York City

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

New York State

Broome County

- Increase availability, sales, and point-of-purchase labeling of lower-sodium products in county grocery stores and corner stores.
- Work with school districts to reduce sodium content of meals and develop wellness policies.

Schenectady County

- Reduce sodium content in meals served at senior centers and residential facilities as well as home-delivered meals for seniors.
- Increase sales of lower-sodium items at restaurants frequented by seniors.

