

PLAN, DON'T BAN

BY DYLAN ROCHE

Although food ban policies were once considered a necessary solution for managing certain food allergies in the cafeteria, experts are now encouraging a more strategic approach.

t's a scenario that nobody wants to even contemplate, never mind experience: A school, working with the best of intentions, implements a ban prohibiting foods that contain peanuts, one of the most prevalent allergens affecting children, from being served in the cafeteria. One day, Carla offers her new friend Nikki one half of her mom's delicious homemade granola bar. Neither child knows that peanut butter is the secret ingredient, and Nikki is suddenly breaking out into hives and starting to wheeze. Everyone in the school has been relying on the cafeteria peanut ban to keep students like Nikki safe, and no one is properly trained to handle this emerging health crisis.

It's a hypothetical situation, but one that is frighteningly possible. And it illustrates one of the major disadvantages of implementing a food ban in school settings, especially when they are limited to only one part of the school. "A food ban gives a false sense of security," says Amy Carroll, MBA, RD, Coordinator of Food and Nutrition Services for the **School District of Lee County, Fla.**

This is a perspective that's echoed by many dietitians and health experts, including Sherry Coleman Collins, MS, RD, LD, a consultant with the National Peanut Board, who



recently helped Carroll shift her district's approach away from banning foods and ingredients to implementing more practical strategies that emphasize planning, training and communication in an effort to help students manage their allergies in real-world settings.

"If you have the right information, you can keep yourself safe and your customers safe," Collins says. "If you're educating families, they feel confident and they feel heard and they feel safer. And the students really *are* safer when everybody is in



the same place in their understanding about food allergy management."

More and more cafeterias are taking this approach as our cultural understanding of food allergies evolves. In fact, the results of a five-year study, "New guidelines for schools recommend against food bans," sponsored by McMaster Children's Hospital in Hamilton, Ontario, and published in 2021 in the *Journal of Clinical Immunology*, make it clear: Food allergies present a serious, sometimes life-threatening, health risk, but schools are overall safer, healthier places when they rely on proper training and protocol rather than food bans.

If your school or district has in place or is contemplating a policy that bans food items known to be common allergens, you may want to take the lead and recommend administrators consider a change in strategy. This article presents research and case study advice that will help you start that conversation.

FROM THEN TO NOW

According to the Centers for Disease Control and Prevention (CDC), food allergies affect between 4% and 6% of children, many of whom attend public schools. Food allergies are defined by an immune response to a specific food that can cause adverse health effects. About 170 foods can cause allergic reactions, but the nine major allergens are peanuts, tree nuts, dairy, eggs, wheat, soy, fish, shellfish and sesame.

For many years, the chief approach to protecting students with serious food allergies was to ban high-risk allergens, notably peanuts, from school cafeterias and, in some cases, throughout the school campus, extending the policy to foods brought from home in response to concerns that peanut residue on unwashed hands or peanut vapors in the air could reach a child with an allergy. Throughout the early 2000s, when peanut allergies tripled in children compared with decades past, according to reports from the Mayo Clinic, food bans were somewhat commonplace. Another popular practice has been to create peanut-free tables or zones, where children with allergies could eat lunch away from peers who might be consuming menu items featuring peanuts.

In the case of Carroll's Lee County school district, the peanut ban implemented back in 2004 restricted the school nutrition program from serving peanut products, but applied no such prohibition on foods brought from home and consumed in the cafeteria or classroom. After 18 years, and a collaborative approach to developing an alternative process, the district rescinded the ban in February 2022, welcoming peanut butter sandwiches back to the cafeteria serving line. To date, with a new, detailed management plan in place, Lee County's 97,000 students—1% of whom are allergic to peanuts and 4.3% of whom are allergic to other foods—have not experienced a single food allergy crisis at school. "There hasn't been one anaphylactic reaction," Carroll reports. "There have been no bad reactions that I have heard about." She credits this success to "a comprehensive allergy management plan that includes safety protocols and procedures for *any* kind of allergic reaction."

THE POWER OF PEANUT BUTTER

The revised approach has allowed the School District of Lee County greater opportunities to menu nutritious items students want to eat—the impetus for Carroll and her colleagues to advocate for a new strategy. Throughout the COVID-19 pandemic, supply shortages and increased prices made it difficult for districts all across the country to consistently source popular meat-based entrées like chicken and beef. Peanut butter, on the other hand, was inexpensive, easy to obtain and a favorite among students. "This was my one chance to stress to people that if we want consistent, nutritious food for our students, we really need to look at bringing peanut butter back," Carroll recounts.

4 KEY STEPS FOR ALLERGEN MANAGEMENT

A ban on common allergens doesn't necessarily make a school cafeteria any safer. Creating, implementing and following a comprehensive plan is a far more effective approach. Here are four elements that are essential in keeping children with food allergies safe in your cafeteria.



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Visit SNA's online Food Allergy Resource center, www.schoolnutrition.org/foodallergy, sponsored by the National Peanut Board, to learn more about this topic.

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The district offered sandwiches made with peanut alternative spreads, including sunflower and soy nut butters. These were acceptable substitutes for the meal pattern, but simply weren't as popular with Lee County students. In fact, as Carroll researched the allergen issue, she questioned why her district's policy—and many others—accepted a soy nut butter spread, given soy's status as one of the Big Nine allergens. It *does* raise the question: Why are peanuts the sole target of so many school food bans and other Big Nine allergens like eggs and milk are ignored? But it seems a question without any satisfactory answers.

PARENTS ARE NOT THE ENEMY

School food bans can often be traced to the fierce advocacy of parents of students with food allergies—and their concerns have justifiable merit. Food allergies should never, ever be taken lightly. On their surface, bans that ostensibly remove the cause of concern seem the most direct way to address the problem. Convincing parents otherwise requires a great deal of empathy, diplomacy and patience, all backed by a demonstrated awareness of the issue, plus comprehensive management and training plans.

When Cindy Kanarek Culver, MS, RDN, LD, was named Director of School Nutrition for **Marietta City (Ga.) Schools,** leadership at one school in the district was adamant about remaining "peanut-free" in the face of a move to return peanuts to the menu. "There was a lot of reluctance from families at that school," Culver recalls. "We know we have a lot of other high-allergen foods, but parents seem to work around milk or gluten allergies. Peanuts, however, have always been the most emotional topic in regard to food allergies."

In working to create change in this hesitant school, Culver invested considerable time and energy in working *with* the parents there. "They are really nervous for their students...they take it seriously, and we take it seriously. Once you share with them that it's just as important to us as it is to them to keep their child safe, that gives them a chance to breathe and say, 'Okay, there's someone else looking out for my child.' Building



those relationships with parents is really important."

The effort also requires a little myth-busting about food allergies. For example, Carroll notes that while she was educating herself on allergen safety, she learned that the latest research finds there is little risk of suffering anaphylactic shock from breathing peanut vapors lingering in the air from consumers eating foods. "There are really no peanut vapors from peanut butter. It's too heavy," she says. "You basically have to shell raw peanuts in your kitchen all day for there to be that kind of anaphylactic risk. We had



to do a lot of education and calming people's fears in that arena."

MULTI-STEP APPROACH

Training and education goes a long way in creating safe cafeterias. Unlike most foodborne illness, where the responsibility is on the school nutrition team, when it comes to food allergies, *everyone* in the school should know how to recognize an allergic reaction and know how to respond. Many children are too young to properly express details about symptoms, merely reporting, "My tongue itches" or "There's a frog in my throat."

All adults should have access to and know how to administer an EpiPen or similar epinephrine injection. Thanks to the EPIPEN4SCHOOLS program, which seeks to increase access to the lifesaving drug in schools, Carroll was able to stock EpiPens at all 82 schools in her district without them being prescribed to individual students.

Other components in allergen management focus on strict attention to cross-contamination protocols and food safety and sanitation measures. Although allergic reactions are a body's response to food protein, not bacteria or viruses, "The same practices that work for preventing foodborne illness also work for food allergies," Collins says. "The only exception with regard to clean hands is sanitizer use. Sanitizer alone isn't adequate for removing protein. It makes your hands sterile, but it doesn't remove protein, just like it doesn't remove dirt."

One difficult decision schools will have to make in a ban-free cafeteria is whether to maintain "allergen-free" seating zones. "I was never an advocate of that personally, because I feel like it separates the student unnecessarily," Collins says of her previous experience working in a school district. "But some parents felt really strongly about it, so we did that."

Regardless of where students sit, no one should be sharing food. For starters, telling children not to share food removes any conflict that could arise if a child shares with one student



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who doesn't have allergies but isn't allowed to share with a peer who does. More importantly, this reduces the risk of exposure for a child who has an unknown allergy. "A significant percentage of children who have a food allergy have their first reaction at school," says Collins. "They don't know that they're allergic until they eat the food and have a reaction."

LET'S TALK ABOUT IT

A school community's many stakeholders need to be aware of your allergy management plan to have any confidence that it will be effective. Carroll and her colleagues undertook what she describes as a "huge media blitz" to explain the change in policy and the new approach. This included participating in interviews with local news stations, as well as the district's regular podcast series. By being transparent and communicative, your district's school nutrition program will have the trust and support it needs to carry out this initiative.

"When you have a plan in place, it's easy to communicate that to parents," Collins explains. "You can say, 'We understand the food allergies in our school district, and here's how we approach them. Here's our plan for training. Here's our menu. Here's the list of our ingredients. Here's how we're going to accommodate your child.' And you can tell them specifically that you have a plan for addressing food allergy reactions when they happen. If you do that, they're going to be a lot more receptive."

In the end, it's about making everyone feel welcome. "As a dietitian and a school nutrition director, I want to ensure that, number one, all of our students have access to the school nutrition program," says Culver. We want all of our kids to know that we can accommodate for any type of medical issues they may have. We're taking all those steps to ensure their safety."

DITCH THE BAN IN FAVOR OF A PLAN

School nutrition professionals need as much flexibility and access to nutritious, affordable, shelf-stable, versatile foods as possible. "Peanut butter is an ingredient that can really help solve a lot of problems," notes Collins. "By unnecessarily restricting it, schools are actually weakening their programs in a lot of ways. They could be providing a food that is nutritious, affordable, and that kids love—and it can fit into their menu in a lot of different ways." By learning to manage the food allergy issue, schools can strengthen their programs in the long run in a way that a food ban can't accomplish. SN

Dylan Roche is an SN Contributing Editor based in Arnold, Md.



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