**Problem**

Americans consume about 3,500 milligrams of sodium per day, almost 1.5 times the daily limit recommended by the 2015-2020 Dietary Guidelines for Americans. The majority of this sodium comes from restaurant and processed foods. High sodium consumption can lead to high blood pressure, heart disease, and stroke.

**Statement of Problem:** Americans consume too much sodium, increasing their risk for high blood pressure, which can lead to heart disease and stroke. The average sodium intake of American adults is about 3,500 milligrams (mg) per day, nearly 1.5 times the daily limit of 2,300 mg recommended by the 2015-2020 Dietary Guidelines for Americans. In Clark County, Washington, where cardiovascular disease accounts for more deaths than any other cause, reducing sodium consumption is an important public health strategy.

**Project**

Beginning in 2012, Clark County Public Health (CCPH) collaborated with local independent restaurant owners, chefs, culinary instructors, and health professionals to create the Healthy Neighborhood Restaurant Program. The program aims to decrease sodium, reduce portion sizes, and create healthy side options and healthier kids’ meals in partnership with local restaurants.

**Project Description:** In 2012, Clark County Public Health (CCPH) began working with local restaurants to increase access to healthy food choices. An advisory committee of restaurant owners, chefs, culinary instructors, and health professionals collaboratively developed the Healthy Neighborhood Restaurant Program (HNRP), whose core elements included smaller portions, healthy side options, and healthier kids’ meals that featured fresh fruits and vegetables. In 2013, the program received funding to integrate additional sodium reduction strategies through Washington State’s CDC-funded Sodium Reduction in Communities Program (SRCP) grant.

Mill Creek Pub in Battle Ground, Wash., began adopting HNRP criteria and sodium reduction strategies in August 2014. Owner Russell Brent and the pub’s chefs worked with CCPH to assess the pub’s cooking practices, choose recipes and products to modify, and adjust menus and recipes to reflect the HNRP criteria and sodium reduction strategies. Mill Creek Pub stopped adding salt to fries, tots, or sweet potato fries; replaced cooking wine with house wine; and replaced soup base with homemade stock, which reduced the sodium in sauces and soups by about 20%. Along the way, Brent, his chefs, and CCPH discussed the potential impact on consumer acceptance, back-of-house operations, and changes in nutrition composition.

Brent educated his front-of-house staff on program elements and sodium reduction efforts but refrained from overtly identifying healthier options on the menu. He displayed an HNRP decal on the restaurant’s front door and used table tents to promote smaller portion sizes, healthy side dishes, and healthier kids’ meals. However, specific sodium reductions were not promoted to customers.

**Outcomes**

Targeted recipe modifications affected 14 menu items at the pub, resulting in an average sodium reduction of 40% in those recipes. CCPH and Mill Creek Pub reduced sodium in an additional 30 menu options by reducing portion sizes and offering healthier sides and kids’ menus. On average, 200 of the restaurant’s 350 daily customers purchased lower sodium menu options.

**Resources**

- Centers for Disease Control and Prevention: Salt [www.cdc.gov/salt](http://www.cdc.gov/salt)
- Clark County Community Health Assessment [www.tinyurl.com/htonvyg](http://www.tinyurl.com/htonvyg)
Outcomes: CCPF and Mill Creek Pub partnered on menu adjustments and recipe changes and collaborated to evaluate the program’s effectiveness. Combined strategies of HNRP and recipe modification involved reducing sodium in 44 menu items (60% of the total menu). Targeted recipe modifications, that accounted for a 40% reduction in sodium, impacted a total of 14 menu items. The pub reduced sodium in another 30 menu items by reducing portion size, providing healthier sides, and creating healthier kids’ menus.

Engaging chefs and front-of-house staff was instrumental to the success of the program. On average, 200 of the restaurant’s 350 daily customers purchased lower sodium menu options. HNRP and sodium reduction strategies have not negatively affected food sales. In fact, Mill Creek Pub experienced a 32% increase in total sales after the interventions, as well as a 24% increase in sales revenue for modified menu items.

Mill Creek Pub’s owner Russell Brent said, “The program was easy to implement. We stopped salting our [French] fries altogether, and not one guest noticed. We decreased or eliminated salt in many of our recipes, and no one noticed. Our sales and customer traffic have increased, and we have been able to maintain our profit margins.”

Conclusions: The HNRP and SRCP have specific goals, but both programs allow for flexibility to accommodate differences in readiness and venue operations. Stakeholder engagement was instrumental for successful adoption and implementation of changes. Restaurant customers are looking for healthier options when dining out, and restaurants that participate in community health programs may attract new customers or better retain their loyal base. The changes made by Mill Creek Pub illustrate that sodium reduction is possible and generally acceptable to consumers.

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