Statement of Problem: Americans consume an average of 3,500 milligrams (mg) of sodium per day—more than 1.5 times the recommended daily maximum of 2,300 mg. High sodium consumption is tied to high blood pressure, a leading risk factor for heart disease and stroke. In Bexar County, Texas, heart disease and cerebrovascular disease (such as stroke) were among the five leading causes of death for adults aged 25 years or older in 2011. About 22% of deaths involved heart disease, and nearly one quarter of deaths related to heart disease occurred among adults younger than 65 years. The San Antonio Metropolitan Health District (SAMHD), which serves nearly 2 million residents in San Antonio and unincorporated areas of Bexar County, is working to reduce high blood pressure and related chronic disease in the area. One strategy to help achieve this goal is to offer lower sodium food options.

Project Description: Recognizing that about 77% of a person’s sodium intake comes from restaurant and processed foods, SAMHD works with various food service providers to reduce sodium in meals consumed away from home. Through its partnership with the Healthy Restaurant Coalition of San Antonio, in 2010 SAMHD helped establish the ¡Por Vida! program, a restaurant recognition program that identifies restaurants committed to helping adults and children make healthier food choices. ¡Por Vida! helps local restaurants incorporate and label healthy menu items. By leveraging this collaboration, and through its participation in CDC’s Sodium Reduction in Communities Program (SRCP), SAMHD expanded its sodium reduction efforts to private worksite cafeterias and government programs operated by the city of San Antonio.

In partnership with a private worksite cafeteria that serves more than 800 employees, SAMHD engaged cafeteria leadership and chefs in sodium reduction efforts. The chefs, who had long cultivated strong relationships with food distributors, negotiated an increase in the cafeteria's purchasing power for lower sodium products within existing contracts. This increase enabled the cafeteria to purchase lower sodium products within its original budget. Throughout the process, SAMHD helped chefs make key changes, identifying lower sodium substitutes for commonly used ingredients like chicken and beef soup bases as well as canned tomatoes. In addition, SAMHD offered chefs training on reducing sodium during food preparation.

Outcomes: Collaborations between SAMHD and the worksite led to significant strides toward sodium reduction in 2014. Within 4 months, average sodium content in cafeteria menu items declined by about 22%, from 1,040 mg to 811 mg per entrée. Some menu items now contain 80% less sodium. These changes made a difference in 28 of 44 meals and sides offered in three of seven cafeteria food stations, broadening healthy options for customers.

Conclusions: The sodium reduction strategies SAMHD put into action through SRCP will serve as an effective springboard across Bexar County and San Antonio. SAMHD’s success demonstrates that sodium reduction is achievable and that dialogue, trust, and partnership are crucial components of sodium reduction work.

SAMHD plans to maintain momentum through existing and new partnerships with private worksite cafeterias. The agency is undertaking sodium reduction work in collaboration with the city of San Antonio’s senior meals program. Future plans include focusing on the city’s prekindergarten and youth summer meal programs.

Resources

- Centers for Disease Control and Prevention: Salt
  www.cdc.gov/salt
- ¡Por Vida!
  www.porvidasa.com

For more information please contact
Centers for Disease Control and Prevention
1600 Clifton Road NE, Atlanta, GA 30333
Telephone: 1-800-CDC-INFO (232-4636)/TTY: 1-888-232-6348
E-mail: cdcinfo@cdc.gov
www.cdc.gov