

Increasing Access to Safe Drinking Water in Schools and Communities

The American Heart Association's Position

- The American Heart Association encourages the U.S. population to replace sugary drinks with healthier beverages, like water, to improve cardiovascular health.
- Schools and districts must comply with provisions under U.S. Department of Agriculture's Healthy, Hunger-Free Kids Act (HHFKA) that require free, potable water be provided in the cafeteria during breakfast and lunch.
- Schools should also go beyond HHFKA by ensuring that drinking water is truly accessible to students throughout the school day and after school; schools should implement evidence-based strategies for promoting water to students, such as providing cups near water sources; installing bottle fillers; or providing chilled water. State school nutrition regulations may be a key policy mechanism for implementing these water promotion activities. Public funding to support these efforts should be considered.
- Local School Wellness policies should include policies to provide water, along with implementation guidance, in order to support schools in meeting HHFKA and beyond.
- Where advertising exists on school grounds, schools should promote water, not sugary drinks.
- States should review school building standards to ensure that drinking water access is provided in all spaces where children are physically active, including gymnasiums, playgrounds, and sports practice fields.
- In order to increase access to free potable water in public spaces, State Departments of Health or other appropriate State agencies should ensure that water stations/fountains are placed in highly-used public places, that they are maintained and that water at the tap is tested annually for cleanliness and safety at schools, libraries, playing fields and parks, and at other government locations at the city, county, state, and special districts level. Results should be publicized and posted near water fountains and other water access points.
- Policies that incentivize water consumption while discouraging the consumption of sugary drinks through taxation and subsidies, labeling (including at point of purchase), and other policies should be supported in order to make water the less expensive and preferable choice.
- The American Heart Association supports additional research and policy approaches to determine the impact of these water access and quality strategies on consumption trends, public health, and the alternative choices children in schools and consumers would make if they replace their sugary drinks. The AHA prioritizes robust evaluation as part of any access, quality, or tax measures that are passed. The AHA will continue to be a resource to policy makers on nutrition science and policy implementation. Finally, the AHA advocates for broader nutrition policy efforts that make healthy foods more affordable and accessible to all consumers and bring food pricing and subsidies in line with federal dietary guidelines and AHA nutrition recommendation

Fast Facts:

1. Water plays numerous, critical roles to help the body function, including regulating temperature, protecting sensitive tissues, transporting nutrients, and ridding the body of wastes.¹
2. Most children and adolescents do not consume enough water.²
3. Adequate water intake not only supports a range of positive health outcomes, but it may also positively impact cognition.²
4. Currently, only a little over half of schools across the country have drinking fountains or dispensers widely available, with availability differing by race, ethnicity, census region, and the fountain-to-student ratio specified in plumbing codes.³
5. Mistrust of tap water is most prevalent among young adults, people of color, and participants with lower income and less education.⁴

Progress to Date

Voices for Healthy Kids has funded and is providing technical assistance to several state and local water access in school campaigns across the country.

For more information and resources from the American Heart Association's policy research department or water access positions please visit: <https://www.heart.org/en/about-us/policy-research>.

¹ Jequier E, Constant F. Water as an essential nutrient: the physiological basis of hydration. *European J Clinical Nutr*. 2010; 64:115-123. Retrieved from: <https://www.nature.com/articles/ejcn200911>

² Popkin BM, D'Anci KE, Rosenberg IH. Water, hydration, and health. *Nutr Rev*. 2010;68(8):439-458. Retrieved from: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2908954/pdf/nihms210404_1.pdf

³ Onufrak SJ, Park S, Wilking C. Student-Reported School Drinking Fountain Availability by Youth Characteristics and State Plumbing Codes. *Prev Chronic Dis*. 2014;11:130314. Retrieved from:

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC399292/pdf/PCD-11-E60.pdf>

⁴ Onufrak SJ, Park S, Sharkey JR, Sherry B. The relationship of perceptions of tap water safety with intake of sugar-sweetened beverages and plain water among U.S. adults. *Public Health Nutr*. 2014;17(1): 179-85. Retrieved from: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4521760/pdf/nihms709994.pdf>