



# BEVERAGE OPTIONS

## IN CHILDREN'S MEALS

BEFORE JANUARY 1, 2020

BRIEF FINDINGS FROM ACT 138 BASELINE DATA COLLECTION

### ACT 138

Effective January 1, 2020, if a Hawai'i food facility serves a children's meal that includes a drink, the default drink must be one of the following healthy options:



**WATER, SPARKLING WATER, OR FLAVORED WATER**, with no added sugar, corn syrup, or other natural or artificial sweeteners



**UNFLAVORED NONFAT OR LOW-FAT (1%) DAIRY MILK OR NON-DAIRY** equivalent in a serving size of 8 ounces or less



**100% FRUIT JUICE OR VEGETABLE JUICE**, or diluted juice with no added natural or artificial sweeteners in a serving size of 8 ounces or less

Food facilities may offer other drink options at the customer's request but the default drink must be one of the above options.

### EVALUATION GOALS

The goals of this evaluation were to:

1. Establish which restaurants had a children's meal,
2. Establish what default beverages came with their children's meal, and
3. Evaluate which meals offered options that were compliant with the law prior to its effective date.

The data will be used to track the law's impact over time and to inform law implementation and enforcement.

The evaluation focused only on what was written on menus, not what was verbally offered to customers at the point-of-sale.



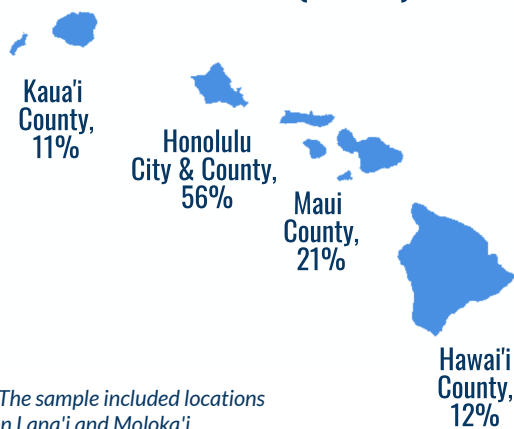
THIS STUDY WAS CONDUCTED BY THE UNIVERSITY OF HAWAII HEALTHY HAWAII INITIATIVE EVALUATION TEAM IN PARTNERSHIP WITH THE HAWAII STATE DEPARTMENT OF HEALTH AND HAWAII PUBLIC HEALTH INSTITUTE

# METHODS

## STUDY SAMPLE

The study sample included 383 unique restaurants statewide. It was obtained through a random stratified sampling of food establishments on the Hawai'i State Department of Health's Food Safety Branch food establishment inspection list. The sample was taken to represent the proportion of eligible restaurants in each county.

### THE SAMPLE INCLUDED RESTAURANTS FROM EACH COUNTY (N=383)\*



## DATA COLLECTION\*

Data was collected November 10 through December 31, 2019. Data was collected in three steps.



**STEP 1:**  
REVIEWED RESTAURANTS' OFFICIAL WEBSITES AND DOWNLOADED MENUS WITH A CHILDREN'S MEAL



**STEP 2:**  
CALLED RESTAURANTS WITHOUT ONLINE CHILDREN'S MENUS AND ASKED THEM TO TEXT OR EMAIL A COPY OF THEIR MENU WITH THE CHILDREN'S MEAL

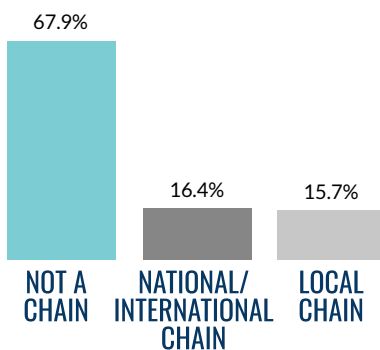


**STEP 3:**  
VISITED RESTAURANTS IN PERSON TO TAKE A PICTURE OF THE MENU WITH THE CHILDREN'S MEAL AND VALIDATED MENUS OBTAINED ONLINE

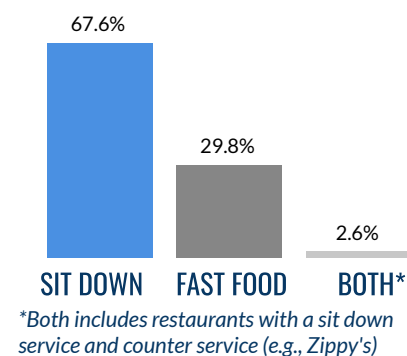
\*DETAILED METHODS CAN BE FOUND IN THE COMPLETE REPORT.

## RESTAURANT CHARACTERISTICS (N=383)

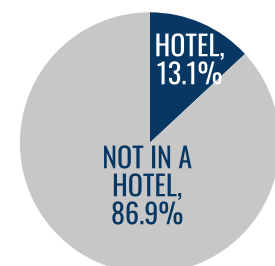
### THE MAJORITY OF RESTAURANTS IN THE SAMPLE WERE NOT A CHAIN



### TWO OUT OF THREE RESTAURANTS IN THE SAMPLE WERE SIT DOWN RESTAURANTS



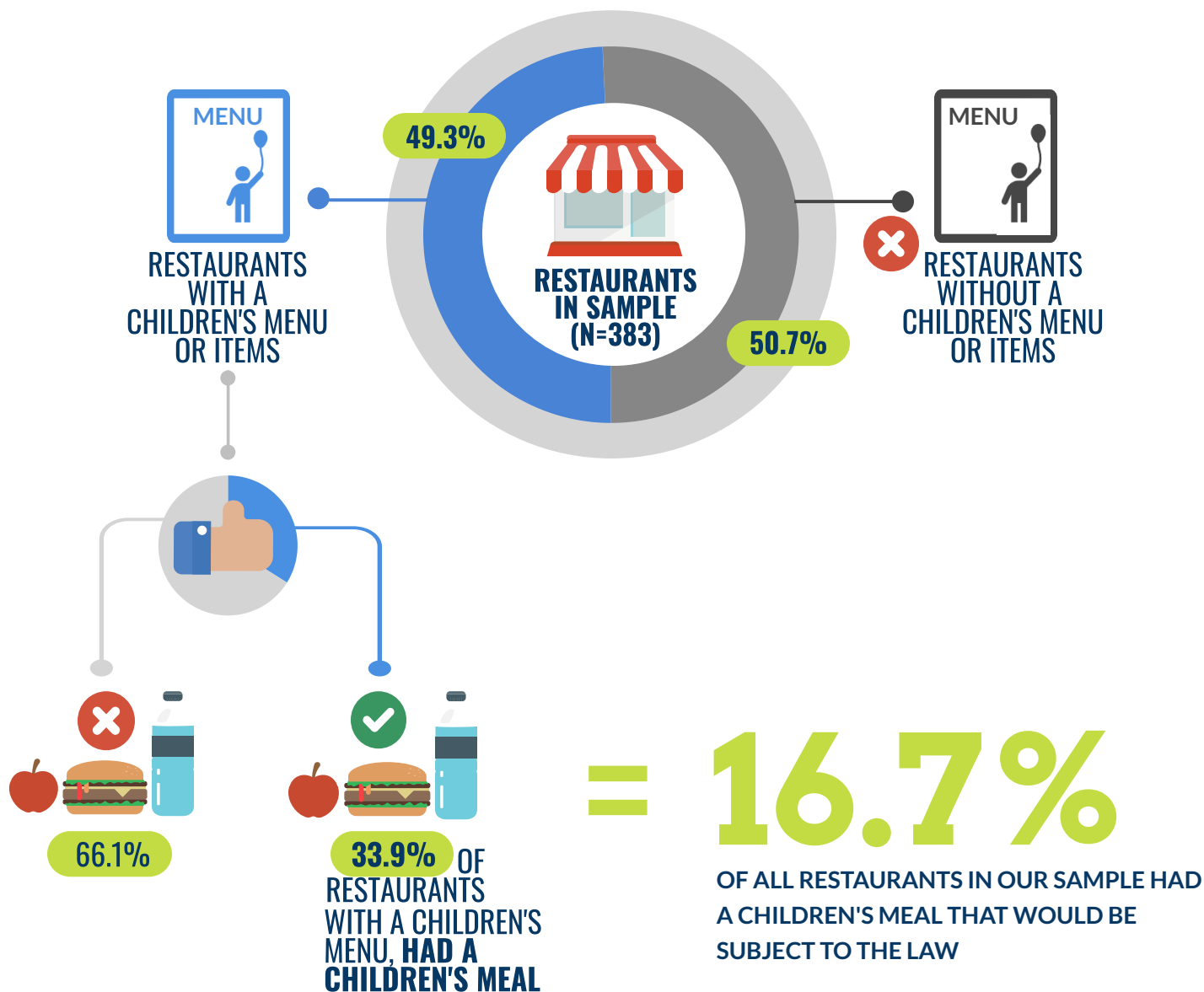
### ONLY 13.1% OF RESTAURANTS IN THE SAMPLE WERE LOCATED IN A HOTEL



# RESULTS

Just under half of all the restaurants in the sample (49.3%) had a separate children's menu or items for children on their main menu.

Of those with a children's menu, only 33.9% had a children's meal that included a drink for a single price.



**NATIONAL/INTERNATIONAL CHAINS WERE SIGNIFICANTLY MORE LIKELY TO HAVE A**



**CHILDREN'S MENU**  
(OR: 4.7, 95% CI: 2.5-8.9)

AND



**CHILDREN'S MEAL**  
(OR: 7.7, 95% CI: 3.9-15.1)

compared with non-chain or local chain restaurants.

**RESTAURANTS IN A HOTEL WERE SIGNIFICANTLY MORE LIKELY TO HAVE A**



**CHILDREN'S MENU**  
(OR: 4.3, 95% CI: 2.1-8.7)

than the restaurants not in a hotel.



Only 10.2% of restaurants had a self-service soda fountain.

# MENU COMPLIANCE

Menu compliance was checked by two independent raters. Menus were assessed for the type of drinks that came with the children's meal, and whether those drinks met guidelines established by the Hawai'i Department of Health (DOH). Following protocols used by the government agencies and other menu assessment research, the burden of proof was put on the menus to explicitly state compliant language.

## DOH COMPLIANCE GUIDELINES

- 1** If the menu only has "drink" listed for the meal, it is NOT in compliance. Healthy beverages must be listed as the options.
- 2** The in-store menu (both physical and/or menu board) must only list healthy beverage\* options for children's meals\*
  - Milk must be listed as 1% or non-fat AND 8 ounces or less
  - Juice must be listed as 100% AND 8 ounces OR as juice combined with water/carbonated water with no added sweetener AND 8 ounces or less
  - No refills can be offered for any beverages other than water
- 3** If in-store menu has an image of a children's combo meal, it must show a healthy beverage.
- 4** All menus of a restaurant need to list healthy beverages to meet compliance. (e.g., if a restaurant serves a children's meal for breakfast and lunch, both meals need to offer the healthy beverage.)

\*"Healthy beverage" and "Children's meals" as defined by Act 138.



### COMPLIANT WITH CURRENT DOH GUIDELINES

# 0%

of the 64 restaurants with a children's meal, offered only healthy drink options as defined in the DOH compliance guidelines as written above.

### COMPLIANT IF NO REQUIREMENT FOR SIZE

# 3.1%

of the 64 restaurants with a children's meal, would be compliant if there was no requirement for the menus to list the size of low-fat or non-fat milk and 100% or diluted juice as 8 ounces or less.

## REASONS FOR NON-COMPLIANCE

As previously stated, none of the locations had default beverages that met DOH's initial compliance guidelines. About 1/3 of the 64 locations with a children's meal said their meal came with a vague "drink" in violation of guideline #1. Of the 70% of restaurants that listed a specific type of drink, none (0%) listed only healthy options per guideline #2. Additionally, 3.1% offered free refills on sugar sweetened beverages for children's meals. Only 1 location included a healthy drink option in its picture of the children's meal per guideline #3. Finally, none of the restaurants that had multiple menus with a children's meal, had compliant children's meals on each of the menus (e.g., breakfast menu, dinner menu) per guideline #4.

### GUIDELINE #1



MEAL ONLY SAID  
"DRINK"

30%

### GUIDELINE #2



LISTED ONLY  
HEALTHY OPTIONS

0%

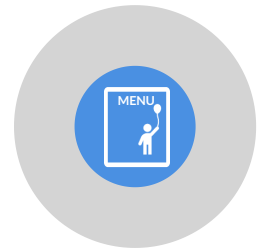
### GUIDELINE #3



PICTURE SHOWED A  
HEALTHY OPTION

2%

### GUIDELINE #4



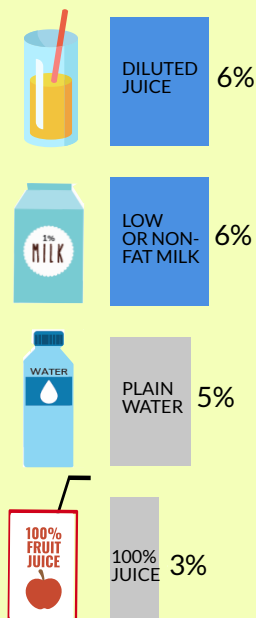
ALL MENUS WERE  
COMPLIANT

0%

## DRINKS INCLUDED IN MEALS

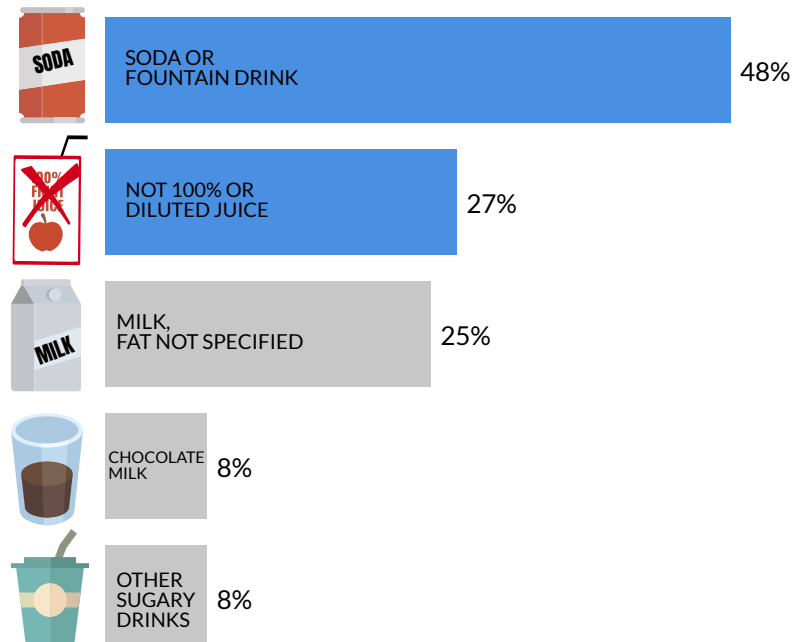
### HEALTHY DRINKS

Very few of the children's meals included healthy drink options in compliance with the law. However, diluted juice and low-fat or non-fat milk were the most commonly offered healthy options.



### UNHEALTHY DRINKS

Types of unhealthy drink options included in the children's meals are shared below. Nearly half of locations offered soda or a fountain drink and over 1/4 offered a juice that was not 100% or diluted without added sweeteners.



## CONSIDERATIONS FOR IMPLEMENTATION



### Need to understand business reasons for vague language

30% of locations just listed "drink" on their menus without specifying what type, and many that offered a specific type of drink, used vague words like "milk" or "juice" on their menus rather than low-fat milk or 100% juice. There may be operational reasons that restaurants are being vague about the options they serve. They may need to be able to adapt to changes in costs and availability of products without having to reprint menus or change menu boards. More information is needed to understand restaurants' barriers and facilitators to help them to be successful.



### Restaurants rarely listed the drink size

Size limits are important because they restrict the drink's calories. However, they take up a space on a menu. Restaurants with a printed menu will have an easier time fitting "8 oz of 100% apple juice" or "8 oz of low-fat milk" on their menus than those with menu boards.



### Restaurants may stop selling children's meals

Between online and in-person menu collection, three restaurants stopped selling children's meals. Two now sell their drinks separately from their children's entrees, and one changed the name of its combo so it is no longer marketed only to children. To ensure the impact of the law, efforts are needed to help restaurants comply with and embrace the law, not avoid its reach.



### Verbal offerings at point-of-sale may differ from menus

During data collection, some restaurants said they offered a drink in the cost of their children's meal, but the written menu did not say a drink was included. Other states have found that cashiers are not waiting for a parent to request alternate drink options to the healthy defaults; they are offering all drinks options at once. Ensuring that restaurants verbally offer healthy drink options in compliance with the law will be important for law implementation.

## LIMITATIONS AND NEXT STEPS

This study has several limitations. Although data was collected using a random stratified sample to be representative of restaurants statewide, data was not collected from all restaurants, therefore there may be restaurants in the state with compliant children's meals that were not captured in the data. Also, menus can change frequently for a variety of reasons. The data shared only represents what was on the menus at the time of data collection, not what is currently available. Follow-up data collection will be important to track changes to default beverage offerings in the sampled restaurants over time. Finally, data was limited to assessing what was written on menus. However, this does not always reflect what is verbally offered to customers at the point-of-sale. Future data collection at the point-of-sale is necessary to evaluate if restaurants are following the intent of the law, not just the letter of the law.

## CONCLUSION

At baseline, none of the restaurants served only healthy drink options that met the DOH guidelines for compliance. This is somewhat expected with what was assumed, but unknown, about the nutrition content of the beverages included in children's meals prior to this, and provides further evidence that Act 138 was needed. However, it also shows that restaurants will need to make substantial changes to their menus to become compliant. To ensure restaurants add healthy options and do not just remove their children's meals from their menus, advocates will need to work with restaurants to understand their barriers and support them in making this transition. Finally, the lack of compliance at baseline, shows that if the law is effectively implemented, it has great potential to improve the beverage options for children and make a lasting impact on children's sugar sweetened beverage consumption and health.

