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### **Report Highlights**

Parents of nut-allergic children vary in their views of how schools should manage their child's lunchtime.

Most parents of children without nut allergies (58%) think schools should have nut-allergic children eat lunch in a designated area, such as a nut-free table.

Less than 40% of parents support a school-wide ban on nut-containing products.

### **Contact us**

A publication from C.S. Mott Children's Hospital, the University of Michigan Department of Pediatrics and Communicable Diseases, and the University of Michigan Child Health Evaluation and Research (CHEAR) Unit. C.S. Mott Children's Hospital

# **National Poll**

# on Children's Health



University of Michigan C.S. Mott Children's Hospital

## Nut-free Lunch? Parents Speak Out

Children with allergies to peanuts or tree nuts must be very careful about what they eat, or may face life-threatening consequences. At home, parents of nut-allergic children can monitor everything their child eats, but this is more difficult when children are at school.

Schools face challenges in deciding the best way to structure lunch and snack time for children with nut allergies, striving to ensure the safety of the nut-allergic children while not being overly restrictive with non-allergic children. To explore this challenge, the C.S. Mott Children's Hospital National Poll on Children's Health asked a national sample of parents of children 5-12 years about their preferences for handling lunch and snacks for children with nut allergies.

#### **Peanut Allergy and Lunch Room Rules**

Among 816 parents with children 5-12 years old, 5% reported that their child has a peanut or tree nut allergy.

Parents of nut-allergic children were asked how they think the school should manage lunchtime for their child; parents of children without nut allergies were asked how the school should manage lunchtime for their child's classmate with a nut allergy (Figure 1).

Parents of nut-allergic children do not show a clear preference, though the most-selected choice is no restrictions on where their child sits or what their child's classmates can eat. In contrast, most parents of children without allergies think the school should have a designated area (such as a nut-free table) where nut-allergic children should sit. Neither group has a majority in favor of banning nut-containing foods from the entire lunchroom or school. There are no differences based on whether children attend a public school vs a private or charter school.

Figure 1. Parent views on how elementary schools should

#### handle lunchtime for children with nut allergies Proportion of parents in favor **Parents Parents** of children of children with nut without nut allergies allergies Nut-allergic child eats in 47% 17% lunchroom with no restrictions on what other children eat Nut-allergic child eats at a designated **Nut-Free** 31% 58% location where nut-containing foods Zone! are not allowed (e.g., nut-free table) Nut-containing foods are banned 25% **22%** from lunchroom or school

Source: C.S. Mott Children's Hospital National Poll on Children's Health, 2014

This report presents findings from a nationally representative household survey conducted exclusively by GfK Custom Research, LLC (GfK), for C.S. Mott Children's Hospital via a method used in many published studies. The survey was administered in November 2013 to a randomly selected, stratified group of adults age 18 and older from GfK's web-enabled KnowledgePanel® that closely resembles the U.S. population. Responses from parents with a child age 5-12 (n=816) were used for this report. The sample was subsequently weighted to reflect population figures from the Census Bureau. The survey completion rate was 54% among the parent panel members contacted to participate. The margin of error is  $\pm 2$  to 4 percentage points and higher among subgroups.

Parents also rated their level of support for different school policies around nut allergies.

- 61% support a policy that nut-containing lunch or snack items are not allowed for classes with a nut-allergic child
- 43% support a policy that no food brought from home is allowed at school parties or special events
- 38% of parents support a policy that nut-containing lunch or snack items are not allowed anywhere in school

There were no differences in the level of support between parents of nut-allergic children and parents of non-allergic children, or between parents of public school students vs private or charter school students.

### **Implications**

There is no single standard for schools to manage the food environment for nutallergic children, and no research that indicates which strategy is safest. Recent quidelines from the Centers for Disease Control and Prevention (CDC) encourage schools to consider the needs and preferences of nut-allergic children in deciding whether to designate a nut-free area or restrict nut-containing products altogether.

The results of this poll offer a national view of the preferences of parents of nutallergic children. Results may be surprising in that the majority of parents of nutallergic children do not support a total ban on nut-containing products. Rather, the strategy with the most support among parents of children with nut allergies is having no restrictions at all on where their child sits or what other children are allowed to eat.

Among parents of non-allergic children, there is the greatest level of support for an approach that they perceive would protect a child with a nut allergy, such as designating a nut-free lunch table or restricting nut-containing products for classes that include a child with nut allergies.

Determining appropriate school policies around nut allergies can be challenging; this national poll dispels the notion that parents believe there is one "right" way. Because neither group of parents expressed opinions that were highly concentrated around one strategy, these results suggest that most parents will respect and understand the needs of others.

The take-home message is that there is strong support among parents for strategies that keep nut-allergic children safe while still allowing them to interact with their classmates. Most parents of both nut-allergic children and non-nut allergic children do not support restrictive policies that ban nut-containing items from schools. Schools, governments, parents and doctors who may be involved in the decisions around school nut policies should not presume that all parents of nut-allergic children have the same preferences. Seeking a broad range of input will help to craft a policy that meets the needs of all children.

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