

Published December 25, 2015

Public Interest Incorporated Foundation  
**Japan Association for  
 Improving School Lunch**

3-12 Yotsuya, Shinjuku-ku, Tokyo 160-0004 Japan

Phone : +81-3-3357-6755

Fax : +81-3-3357-6756

URL : <http://www.gakkyu.or.jp>

Please click on the link above for back issues of *Sukoyaka*.

## Actions to Prevent Food Allergy-related Accidents in School Lunches To enable all school children to enjoy their school lunches with peace of mind



Three school staff members provide care and attention while serving school lunches

Name		Wednesday, July 8
Milk	Chicken pilaf Shishamo fritters	Winter melon soup
Menu of an allergen-free lunch		



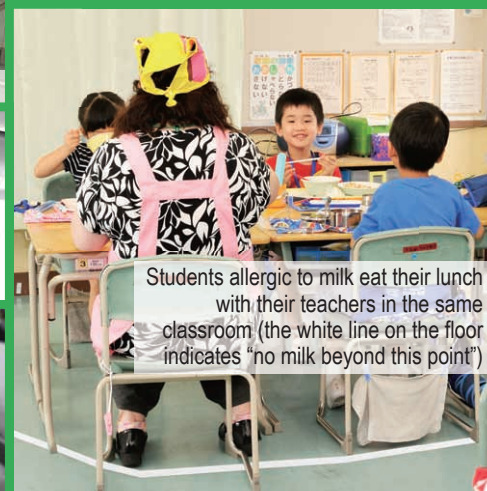
Final check on lunches for students with allergies



Allergen-free lunch (egg-free Enshu *kakiage* (tempura of mixed vegetables))



"Pointing and calling" before cooking to make sure staff have the right ingredients for a milk-free lunch



Students allergic to milk eat their lunch with their teachers in the same classroom (the white line on the floor indicates "no milk beyond this point")

Photo: Shibafuji Elementary School in Kawaguchi and Fukuroi Chubu School Lunch Center

### Participants

**Takanori Imai**

Instructor, Department of Pediatrics, Showa University School of Medicine

**Yoko Eguchi**

Former Senior Specialist for School Lunches, Sports and Youth Bureau, Ministry of Education, Culture, Sports, Science and Technology; Vice Principal of Yayoigaoka Elementary School in Tosu, Saga

**Masanori Osawa**

Principal of Shibafuji Elementary School in Kawaguchi, Saitama

**Naomi Takada**

Teachers' Consultant, Health Education Division, Aichi Prefectural Board of Education

**Yasuko Harada**

Former Diet and Nutrition Teacher, Fukuroi Chubu School Lunch Center; Diet and Nutrition Teacher, Iwata Minami Elementary School in Iwata, Shizuoka

**Sachiko Yanagisawa**

Vice Chair, School Dietician Conference of Japan; Diet and Nutrition Teacher, Sanada Junior High School in Ueda, Nagano

### Coordinator

**Masayo Kaneda**

Visiting Professor, Institute of Nutrition Science, Kagawa Nutrition University

(Titles omitted, Japanese syllabary order)

In 2012, there was a tragic accident. An elementary school student in Tokyo died of suspected anaphylaxis after eating her school lunch. Based on the investigation conducted immediately after the accident, the Ministry of Education, Culture, Sports, Science and Technology drew up and distributed the *Guiding Principles of School Lunches to Cope with Students' Food Allergies* in March this year in an effort to prevent any recurrence of the tragedy, and to ensure that all school children enjoy their school lunches with peace of mind. This issue features a round-table discussion about the gist of the Guiding Principles between teachers involved in the process of the creation of the Principles. The discussion explores what actions schools have or have not taken and what issues schools face in regard to students' food allergies. We hope that this issue will help schools across Japan launch specific efforts to prevent recurrences of food allergy-related accidents.

## Why “Guiding Principles for Food Allergies”?



- From drawing up the “Guidelines” to reporting on fact-finding survey
- Issues identified through the survey
- MEXT’s view on the creation of the Guiding Principles
- School principals’ and prefectural education boards’

views on the creation of the Guiding Principles

- Diet and nutrition teachers’ and doctors’ views on the creation of the Guiding Principles
- Excerpt from the *Report on Food Allergy Survey by the SDCJ*

**[Kaneda]** December 2012 saw a tragic accident. A fifth grader in Tokyo died of suspected anaphylaxis after finishing her school lunch. I wondered if the *Guidelines for Coping with Allergic Diseases at School* (hereafter the “Guidelines”) issued in 2008 by the Japanese Society of School Health (hereafter the “JSSH”) had not been able to help prevent this tragedy. Since this accident, the Ministry of Education, Culture, Sports, Science and Technology (hereafter “MEXT”) has been making efforts to ensure that all schools use the Guidelines, and announced a wide range of actions to cope with food allergies. In March this year, MEXT drew up and distributed the *Guiding Principles of School Lunches to Cope with Students’ Food Allergies* (hereafter the “Guiding Principles”).

Today, I have teachers at this table who were involved in the creation of the Guiding Principles that have rated as groundbreaking. As we go through the details of the Guiding Principles, I would like to ask them how the Guiding Principles should be used, and how the measures stated in the Guiding Principles should be implemented to cope with food allergies children may have.



- Cooperators’ council has been set up to prevent any recurrence of worst-case accidents. The council wrote the “Final Report” on which the Guiding Principles issued are based.
- SDCJ wrote the “Allergy Research Report.”

Let me run through what actions have been taken since the accident. In May 2013, the year after the tragedy, MEXT set up the Council of Cooperators in Surveys and Research (hereafter the “Cooperators’ Council”) to explore what can be done

based on the research findings. In March 2014, the Cooperators’ Council issued the *Final Report* (hereafter the “Report”), and then the Guiding Principles were drawn up based on the Report and issued in March this year.

I’m sure it was a challenge for all of you to put together the Guiding Principles within such a limited period, but you have created such a well-developed policy. Immediately after the Principles were issued, the School Dietitian Conference of Japan (hereafter the “SDCJ”) published the *Report on Food Allergy Survey*\*1 that offers contents as advanced as the Guiding Principles’. I intend to mention the research report too as we move through today’s discussion.

I would like to ask you the gist and objectives of the Guiding Principles, and what you kept in mind in the process of developing them. I am certain each of you worked on the process from different professional standpoints. Ms. Eguchi, as the MEXT official directly in charge of the Guiding Principles at the time, could you tell us what actions MEXT took immediately after the accident?

**[Eguchi]** The focus of my work at MEXT at that time was on hygienic control to prevent food poisoning, so the accident came as a real blow.

We had to come up with something to make sure that such an accident never happen again, while children with allergies increased year after year. We were pressed to get a clear and accurate picture of how schools deal with students’ food allergies, and to explore and determine what actions must be taken as soon as possible. That is why the Cooperators’ Council was set up.

**[Kaneda]** The survey began immediately, didn’t it?

**[Eguchi]** The JSSH conducted a survey on the overall picture of allergic diseases. And when MEXT set up the Cooperators’ Council, we conducted a sampling survey on school lunches, instead of a complete enumeration survey\*2.

**[Kaneda]** Could you talk about the fact-finding part of the survey?

**[Eguchi]**



- More and more school children have food allergies.
- The guidelines’ advice is not fully implemented. Not all schools have made the submission of student health information sheets mandatory.
- Schools dealt with students’

allergies in accordance with their parents’ requests, instead of a specified policy. This made the situation surrounding food allergies complicated, and eventually led to human errors.

- People in charge, not schools as organizations, had to deal with everything related to food allergies.

A complete enumeration survey showed that **school children with food allergies made up 2.6 percent in 2004, and the survey conducted in 2013 showed that the number rose to 4.5 percent, a 1.7-fold increase.**

Furthermore, although the Guidelines state that school lunches should be prepared in accordance with student health information sheets (hereafter the “health information sheets”)

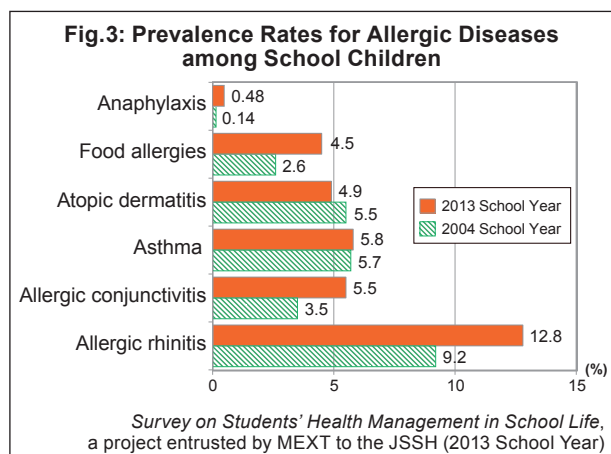
\*1 Nutrition teachers and other relevant school staff members working at public elementary schools, junior and senior high schools, and schools for special needs education were surveyed. 6,645 responses were obtained, and 6,610 were used as valid.

\*2 A survey in which all data are thoroughly checked.

created based on medical evaluations of students, this is not fully followed in certain situations.

The survey findings in the end boiled down to the following three points: (1) School lunches provided according to requests from students' guardians can easily complicate the whole process of lunch preparation, and lead to human errors. (2) There had been no organizationally coordinated efforts to prevent allergic reactions to food. (3) People in charge of issues related to food allergies often have to do everything to deal with the issues.

**[Kaneda]** Problems were identified through the survey. Mr. Osawa, what did you think when you saw the survey results?



**[Osawa]**

- School managers did not know about realities surrounding school children's food allergies.

As a school principal, I was truly surprised to learn that those in managerial positions did not know about realities surrounding school children's food allergies. The survey findings propelled me to take actions.

**[Kaneda]** Ms. Takada, you worked at school before you joined the prefectural board of education. Could you tell us your view based on your experience as a teacher and a member of the education board?

**[Takada]**

- Each school has a different policy to deal with the issue.  
- The board of education needed to have specific policies in place.

The Aichi Prefectural Government already had a guide to coping with food allergies when I worked at school, so I believed that schools in Aichi were fairly progressive in that area. However, a survey found that 54 municipalities in the prefecture had policies and systems significantly different from each other. This really woke me up to the reality in which schools did need to request the prefectural government to issue a comprehensive policy.

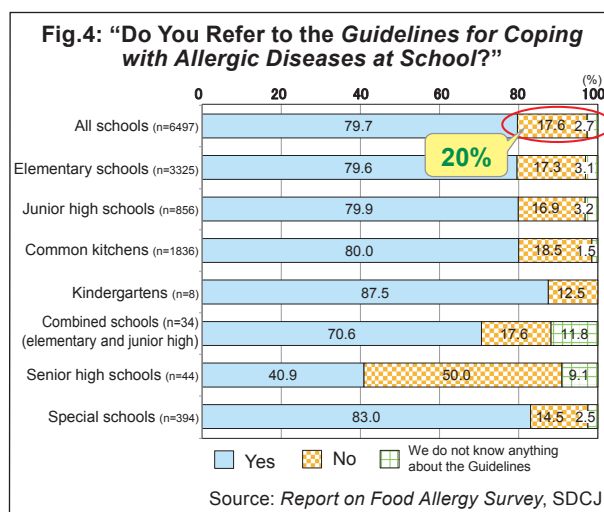
**[Kaneda]** In 1988, there was an accident related to a food allergy in Sapporo<sup>\*3</sup>. Even after that, school nutritionists had to handle everything connected to the issue. Probably schools and boards of education across the country were unaware of the severity of the issue.

The SDCJ also conducted an exhaustive research. Could you please talk about it, Ms. Yanagisawa?

**[Yanagisawa]**

- Not all schools knew about the Guidelines.  
- Due to inadequate internal communication at schools, important documents are often passed on only to certain staff, and do not reach school managers.  
- Schools tried to cope with students' food allergies based only on requests from children's guardians instead of health information sheets.

According to the *Allergy Research Report* by the SDCJ, 80 percent of schools answered "Yes" to the question, "Does your school follow the Guidelines?" Among the remaining 20 percent of the schools that answered "No," about 3 percent didn't even know the Guidelines are available, which, naturally, astonished us. I think that, because the Guidelines are about allergic diseases in general rather than food allergies, they are passed on to nursing teachers, instead of diet and nutrition teachers. Nevertheless, the boards of education informed schools about the issue of the Guidelines, so schools should have made sure that the Guidelines are about food allergies. I also need to point out that, when this type of document is delivered, school principals and vice-principals all too often assume that anything relating to school lunches is diet and nutrition teachers' responsibility, and leave everything up to them. Furthermore, many schools tried to cope with students' food allergies based on requests from children's guardians, rather than the health information sheet.



**[Kaneda]** I often heard they didn't know about the health information sheet, too. Mr. Imai, what do you think?

**[Imai]**

- The Guidelines turned out to be challenging in many respects.  
- The health information sheet was not well understood by doctors and schools.

This survey revealed that the Guidelines are not used at all schools across Japan. Some doctors pointed out that the Guidelines are too detailed; however, from medical specialists' point of view, they are not that detailed, and provide only bare-bones information. The past twenty years saw a sharp increase in the numbers of people with food allergies and accidents related to these allergies. This served as a catalyst for dramatic advances in food allergy care. I wouldn't say no faults were found on

<sup>\*3</sup> In 1988, a sixth grader allergic to buckwheat ate buckwheat noodles in his school lunch. Feeling sick, he left school early, but had an asthma attack caused by the allergy and began to vomit on his way home alone. His vomit became stuck in the trachea, choking him to death.

the part of healthcare and physicians that provided their evaluations. And how schools handled the issue differed between regions, and some ended up having their own ways. The health information sheet was created amid the drastic change in the situation surrounding food allergies, and so some people involved in school lunch systems may have found it challenging to fill it out and submit it.

**[Kaneda]** With regard to the health information sheet, schools had a poor understanding of the necessity to submit it, and, consequently, they failed to give students' guardians enough information about the sheet. I think this is why the Guidelines were not as well-known as they should be.

Also, as Mr. Imai said, it seems to have been difficult at first to have the Guidelines endorsed by doctors.

### Analysis of Findings

- Issues found through research findings at the Co-operators' Council
- Physicians' and patients' attitudes
- Development of specific policies by municipal boards education
- Inadequate compliance with the Guidelines
- Setting up a committee on food allergies

**[Kaneda]** When the reality surrounding food allergies became clear, problems were identified and the Report was issued to specify the roles of schools, boards of education, and other entities involved. Ms. Eguchi, could you talk about what was most discussed when the Report was compiled?

**[Eguchi]**

- Ensure that schools follow the Guidelines to cope with students' food allergies.
- Urge schools to cope with these allergies based on doctors' diagnoses.

Standards of intake through school lunches specify that schools must refer to health information sheets and the Guidelines to cope with students' food allergies, but in reality they did not. So the Cooperators' Council focused on two important points: **(1) Ensure that schools follow the Guidelines to deal with food allergies. (2) Urge schools to "cope with food allergies based on medical specialists' evaluations" systematically to prevent any accident related to food allergies.**

**[Kaneda]** What was the reaction from the Japan Medical Association, after they also studied the Report?

**[Imai]**

- It is vital that students with food allergies and their guardians acquire accurate knowledge and find medical specialists who provide treatment and advice that suit their needs.

They show their approval, basically, but I have to admit that reactions differ between regions. Food allergies are among the most challenging areas for general practitioners, while many doctors and hospitals are committed to treating food allergy-related illnesses. It is vital that patients and people close to them also acquire accurate knowledge of food allergies and find physicians who will provide correct diagnoses.

**[Kaneda]** What do you think, Ms. Harada?

**[Harada]**



- "I realized schools do need a basic policy provided by the city government. I hope the government will develop one accordingly."

In Fukuroi City, some guardians wrote "Nuts," "Fruit in general," and "Cake" to fill in "Food your child is allergic to" and "Other conditions that require supervision (open-ended)" in the health information sheet. So we had to have personal conferences with them to find out exactly what allergies their children had. If the children are allergic to many types of food, we asked their doctors to refer them to medical specialists in food allergies.

Some municipal boards of education have yet to provide specific policies. I heard that schools in these municipalities take different approaches to the issue because of the absence of the policies, and, consequently, children's guardians do not trust the schools, or teachers at these schools do not have a shared understanding of how to deal with food allergy problems. I believe that the Guiding Principles issued this time will prompt the local governments to develop their basic policies regarding children's food allergies so that school staff will have much clearer idea of how to cope with the problems.

**[Kaneda]** Mr. Osawa, the Report states that the Guideline must be followed. Could you tell us what efforts your school made to follow the Guidelines?

**[Osawa]**

- Problems in the process of document delivery at schools caused inadequate adherence to the Guidelines.
- Student health information sheets submitted must be based on doctors' diagnoses. This urged parents to understand that physicians' advice is needed to protect their children's lives.

One of the reasons why some schools failed to follow the Guidelines is an inadequate process of document delivery. Documents received from the board of education are delivered to those in managerial positions and then to someone in charge of the matter, and nothing happens afterward. Managers should study these documents and give those in charge clear instructions on what exactly must be done; otherwise the important documents will only be archived before any actions are taken.

With regard to health information sheets, the Cooperators' Council had an extensive discussion as to whether schools should require students' guardians to fill out the sheet in accordance with medical specialists' advice. I suggested that they should to protect children's lives. I believe that schools and their teachers should have shared awareness that all criteria for judgment come from health information sheets. This urges parents to understand why specialists' advice is a requirement, and to cooperate accordingly.

**[Kaneda]** In that sense, the Report served as a major driver. Ms. Takada, were the school principals' association and the JSSH asked to work on the issue as a problem schools face?

[Takada]



- An official notice prompted Aichi Prefecture to set up a committee on food allergies consisting of various people engaging in work related to the issue to explore what must be done.

- School principals also share information, keeping in mind the importance of getting clear pictures of realities their schools face and taking actions.

Aichi Prefectural Government set up the Committee to Cope with Food Allergy-related Problems in School Lunch last year after receiving the notice “How School Lunch Systems Should Cope with Food Allergy-related Problems” in March 2014. The notice was addressed to those involved in healthcare, schools, and firefighting. So the committee consists of medical specialists in allergies, people from the Japan Medical Association, PTAs, prefectural firefighting and public security sections, municipal boards of education, school principals, nursing teachers, diet and nutrition teachers working independently or in school kitchens, kindergartens, preschools, and much more. All these people discussed what should be done from their professional standpoints. Then the committee compiled a collection of case examples of near misses in the context of school lunches.

These examples were collected through a survey of all schools in the prefecture conducted by the School Lunch Committee of Aichi Elementary and Junior High School Principals Association. The response rate was reportedly 100 percent. I believe that **the school principals became aware of the need to get clear pictures of what is really happening at their schools as they received the official notice.** These case examples were also used when the prefectural government compiled examples of near misses, which were delivered to schools across Aichi at the end of the last school year.

[Kaneda] What about Nagano Prefecture?

[Yanagisawa]



- Nagano has started to create a manual, and is waiting for city governments to develop their policies.

Nagano Prefectural Government has been creating its own manual since the end of the last fiscal year to officially issue it in June this year, but the process is somewhat behind schedule. Ueda City Government has not had any official manual in place, so it is currently working toward establishing its policy. When safety is considered top priority, problems related to facilities and personnel surface. I heard many guardians say that preschools took good care of what their children ate while schools don't at all. I think it is necessary to explain to guardians why schools cannot.

[Kaneda] It is notable that the Report prodded municipal governments across the nation to create their own manuals.

We also have to watch what moves these governments will make according to the manuals they have created. It is true that local boards of education and governments are different organizations. But then schools cannot make any moves unless there is a basic municipal policy in place. Mr. Osawa, what do you think?

[Osawa]

- Some cities have yet to set its own policy in place.

It all depends on what stance the municipal board of education takes. When I asked boards of education for their policy on children's food allergies, some maintained that schools should handle them on their own if they can. So the reality is that municipal boards of education do not have any shared policy in place.

[Kaneda] Ms. Eguchi, could you talk a little bit about this?

[Eguchi]

- Policies that city governments are expected to develop are mentioned in the announcement, and more and more local governments create their own policies.

MEXT suggested in the Report that municipal boards of education have a clear understanding of realities pertinent to food allergies school children have, like how kitchens for preparing school lunches are managed by municipal governments, and how school cooks are allocated, before they develop and present their policies. So the realities are included in the announcement of the policy. I believe that more and more municipal governments and boards of education are gradually following the suggestion.

### Contents of the Guiding Principles and How to Apply Them

- Objectives of the Report and the gist of the Guiding Principles
- Differences between the Guidelines and the Guiding Principles
- The Guiding Principles consist of four major sections: great principles, check sheet, comments, general theory
- Effects of a notice from boards of education

[Kaneda] Ms. Eguchi, could you tell us about the basic stance the Guiding Principles take and the gist of them?

[Eguchi]

- The Report aims to “help ensure that school children with or without food allergies alike enjoy school lunches.” This is stated under the primary purpose of the Guiding Principles “safety is given the highest priority to prevent any accident.”
- The Guiding Principles focus on how school lunch programs should cope with food allergy problems.
- With the great principles in mind, check realities schools face using the check sheet, study the key points of comments, and assign roles and move forward referring to the general theories.

The Report emphasizes that it rests on two basic ideas: (1) It helps ensure that school children with or without food allergies alike enjoy school lunches. (2) It helps come up with school lunches from perspectives of children with food allergies, and, to achieve this goal, ensure that safety is given the highest priority for accident prevention. The Guidelines are about allergic diseases in general, while the Guiding Principles are specifically about school lunches.

## Data 1

### Fundamental Principles of Actions to Cope with Students' Food Allergies at School

- School lunches will be served even to students with food allergies. To do so, safety must be the highest priority.
- Actions must be systematically taken by a committee on food allergies or any other relevant organizations.
- Students' guardians must complete and submit their children's Student Health Information Sheets based on physicians' evaluations in accordance with the Guidelines for Coping with Allergic Diseases at School.
- As a general rule and as a way to ensure safety, schools must choose between eliminating allergy-causing foods from school lunches altogether or serving all students the same lunches that contain allergy-causing foods.
- Take into consideration the capacities of facilities and equipment as well as personnel at the school and its kitchen<sup>\*1</sup>, and do not take any overly complicated approach to cope with students' food allergies.
- Boards of education etc.<sup>\*2</sup> should present their policies on how to cope with students' food allergies, and support schools in their efforts.

<sup>\*1</sup> "Kitchen" in the Guiding Principles refers to all cooking facilities for school lunches, including schools' own or common kitchens.

<sup>\*2</sup> "Boards of education etc." in the Guiding Principles refer to public schools' boards of education as well as school owners, such as national university corporations that own schools attached to national universities, and incorporated educational institutions that own private schools.

Source: The *Guiding Principles of School Lunches to Cope with Students' Food Allergies*, MEXT

The Guiding Principles begin with the six "Great Principles of Actions to Cope with Students' Food Allergies at School" that must be kept in mind, and then it moves on to the "Check Sheet" for checking realities surrounding schools to identify problems. All school teachers and staff members study the key points of "Comments" on the items on the sheet to share an understanding of them and move forward, undertaking their own roles. Then they proceed with their work in these roles, referring to "General Theories" as they face certain situations.

**[Kaneda]** The Guiding Principles are structured in a way that is easy for people engaging in school lunch-related work to understand, and it answers almost all questions they may have. That's wonderful.

Now, I would like to ask for views you have from your professional stance. Mr. Imai, could you go first?

**[Imai]**



- "We emphasized more than anything else that our top priority must be to create a system for providing safe school lunches."

I was involved in the process of creating the Guidelines in 2008. I have to admit that the contents of the Guidelines in light of school lunch programs were somewhat unsatisfactory. Then the tragic accident occurred, which prompted the creation of the Guiding Principles. Thanks to the efforts all the teachers on the committee put in, we successfully created a well-developed policy.

The Guidelines were issued in 2008 to present the direction of how school lunch systems should deal with food allergy problems. However, the direction alone was not enough for people engaging in the lunch systems. Therefore, the Guiding Principles were written and edited so that it is practical and helps ensure safety. As mentioned before, **to make safety our top priority, the Guiding Principles focus on creating a system for providing safe school lunches and emphasize the importance of it. Nutritional value, how lunch plates look, what children's guardians want, and advice from their doctors come next.**

**[Kaneda]** So the Guiding Principles give safety the highest priority. Mr. Osawa, schools have been taking measures to deal with food allergy issues over the years. Have you heard any opinions about the Guiding Principles?

**[Osawa]**

- The Guiding Principles is easy to understand and apply for those involved in school lunch systems, who were appallingly unaware of food allergy problems, and those working on the front line of the systems.
- Anyone can develop allergic reaction to certain food anywhere and anytime. The Guiding Principles works well to make schools become keenly aware of the fact.

This is my personal opinion, but let me tell you that those who have had the most difficult time are children with food allergies, their homeroom teachers, diet and nutrition teachers, school cooks, and anyone else working on the front line of school lunch systems. This is because those in schools' managerial positions as well as all school teachers and staff members had these problems: (1) They were appallingly unaware of food allergy problems they could face. (2) They had only poor knowledge about food allergies, and were unaware that allergic reactions caused by food can threaten children's lives. (3) Schools had no policy in place to cope with students' food allergies. (4) Schools had no clear policy on what to do in an emergency. In this light, **the Guiding Principles play a very effective role in protecting children, which everyone on the front line would do everything they can to achieve.**

Furthermore, in one workshop, we were told about a student who'd had no allergy to food in school lunches showed an allergic reaction by the time he/she left school at four and was taken by ambulance to a hospital. **This means that anyone could develop an allergic reaction to food anywhere and**

**anytime.** This fact urged us to set up a school committee on food allergy problems.

I still hear some school managers say that they had no students with food allergies at their schools. So I firmly believe that training sessions for school principals should deal with food allergies, and hands-on lessons on how to use EpiPen® should be part of the discussion about these allergies. This will help school managers as well as all teachers and staff members become aware of how severe food allergy-related problems at school can be.

**[Kaneda]** What do you think about this, Ms. Harada?

**[Harada]**

- It is important to provide training sessions also for those in managerial positions.
- Approval from those in managerial positions facilitates the process of having a policy in place to cope with food allergy problems.

Fukuroi City Government holds training sessions on food allergies for school managers, nursing teachers, diet and nutrition teachers, and those who work for kindergartens and preschools in April every year. These sessions help school managers learn more about food allergies and what the city government does to deal with food allergy-related problems. So the sessions encourage school managers to participate also in training sessions on how to cope with students' food allergies at their schools, and in interviews held before the sessions.

**[Kaneda]** Did these training sessions start because the municipal board of education finalized and announced its policy on food allergies?

**[Harada]**

- Everyone involved in the school lunch program attended training sessions as instructed by the municipal board of education. This raised their awareness of food allergies and prompted them to take actions.

Yes. Public schools in the city had handled food allergy problems differently. The opening of the new Chubu School Lunch Center prompted schools across the city to establish their policies on how to cope with students' food allergies. To ensure that all schools share an understanding of the issue, all school managers, nursing teachers, diet and nutrition teachers, school nutritionists, and any other people engaging in school lunch programs attended training sessions held by the board of education. These sessions helped all participants understand how important it is to have their policies on coping with food allergies in place, and prompted them to take actions.

To start the whole process of creating an official school policy on food allergies, they have to ensure the safety of everything from how to provide the meals and what is done in the classroom. I believe that the sessions help a great deal in making sure that they work on the process accordingly.

### Photo 1: Allergen-free meals and alternative meals delivered from the school lunch center to schools

(Courtesy of Fukuroi Chubu School Lunch Center) (see the cover)



Allergen-free meals and alternative meals are divided into bags for each school and loaded on the passenger seat.

Homeroom teachers receive these special meals from the delivery personnel.

### The Rationale for the Guiding Principles Is “Safety Is Our Top Priority”

- Student health information sheets completed based on doctors' evaluations must be submitted.
- Taking measures based solely on information provided by guardians may lead to accidents.
- The “two alternatives” is meant to prevent accidents and ensure safety.
- It is vital to involve school managers.

**[Kaneda]** I would like to ask about the rationale for the Guiding Principles. What about Aichi Prefecture?

**[Takada]**

- Schools based their actions on unclear information provided on student health information sheets, which caused many accidents.
- To safeguard “children and people working on the front line of school lunch systems” always facing risks, the Guiding Principles presents the “two-alternatives” policy.

I have received many questions, including ones about the “two alternatives,” and some of them are difficult to answer. When asked if the Guiding Principles are rather regressive, I answer, “**Safety is our top priority**,” because the Guiding Principles indicate that the overall safety of school lunch systems' approach to food allergies has improved, as stated in the “Principle ideas of school lunch systems' approach to food allergies” on page 37. We have asked Mr. Imai for advice in light of the importance of protecting children and people working on the front line of schools.

Furthermore, because we have to choose between the “two alternatives,” we ask students' guardians to submit their children's health information sheets in order for school administrations to determine whether they should take actions to prevent any food allergy-related problems.

To urge guardians to complete their children's health information sheet with accurate information, we plan to ask them to obtain medical specialists' evaluations if their children still develop severe allergic reactions to eggs or milk when they enter elementary school, or if they need to list on the health information sheet with foods other than specific raw materials or any other equivalents, or numerous types of food. Many accidents and near misses have occurred because schools base their actions on unclear information provided on the sheets,

or they take multi-phased actions. The “two alternatives” is presented as part of the Guiding Principles to prevent any accidents and near misses.

**[Kaneda]** What do you think, Mr. Imai?

**[Imai]**

- If a student still has an allergy that requires the elimination of certain food from school lunches when he/she enters elementary school, medical specialists' evaluation is needed.
- Many children with only mild allergies are forced to eat lunches specifically for children with more serious allergies.

90 percent of children's major allergies to eggs, milk, wheat, and soy beans disappear by the time they turn six, so the number of new first graders who still need meals free from these foods is not large. In other words, if children still have these allergies after they turn six, the allergies tend to be serious cases. Therefore, new first graders with these allergies are advised to undergo checkups by medical specialists to receive evaluations as to whether they can now eat the allergy-causing food or their allergies are severe cases. Accurate evaluations allow children with only mild allergies or free from any allergies to enjoy regular school lunches without any concerns.

- The volume of information students' guardians provided to schools about food-related problems their children had continued to increase to the extent that people engaging in school lunch programs at these schools could no longer handle well. This led to a rise in the number of accidents. Hence, the submission of student health information sheets became a requirement, instead of voluntary notices from guardians.

The suggestion that the submission of student health information sheet should be a requirement was discussed at experts' meetings, and it was eventually accepted. **Schools had based their actions solely on information that children's guardians provided for a long time. Consequently, schools had to deal with numerous requests from guardians to eliminate certain types of food from school lunches, and, as it turned out, many of such requests were based only on their assumptions. Handling these requests exhausted**

**those engaging in school lunch programs, and led to an increase in the number of accidents.**

So it was decided that we should stop accepting requests from children's guardians and require them to submit physicians' evaluations to improve actions schools take. The new requirement to submit health information sheets made the process of selecting foods to eliminate easier, and so it made our work easier.

**Data 2**

**Two Alternatives**

As the underlying idea behind approaches schools take to cope with students' food allergies in the context of school lunch systems, **schools are advised to choose between serving all students lunches containing foods that might cause allergic reactions and eliminating such foods altogether from lunches.** Serving alternative foods, or meals prepared in a multi-phased manner to make them non-allergy-causing is not advised. That is, schools should choose either (1) **eliminating allergy-causing foods altogether from lunches for all students** or (2) **servicing all students the same lunch containing allergy-causing foods.** (See page 37 of the Guiding Principles.)

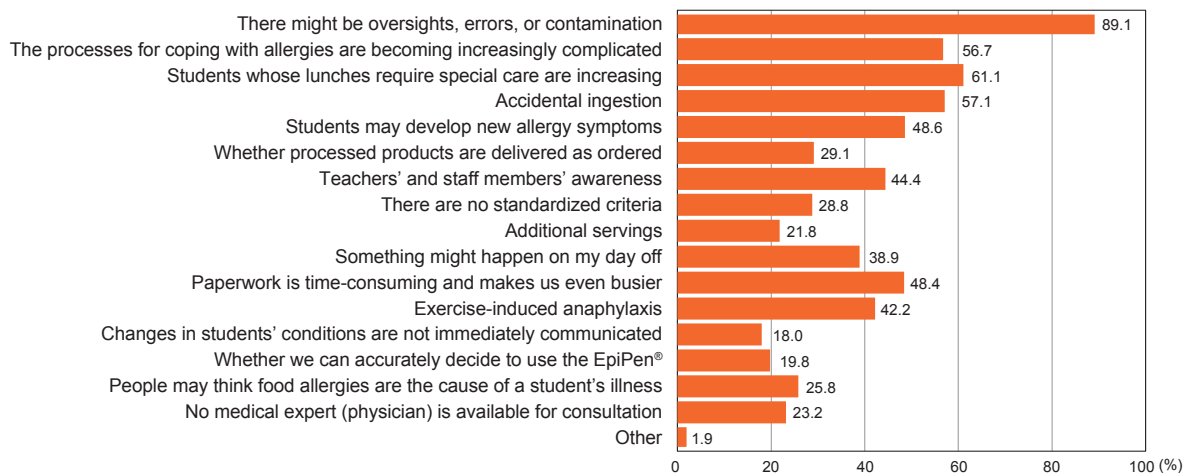
Source: *The Guiding Principles of School Lunches to Cope with Students' Food Allergies*, MEXT

**[Yanagisawa]**

- Measures schools had to take were becoming increasingly complicated and cumbersome. The two alternatives that the Guiding Principles specify improved the situation.

According to a survey conducted by the SDCJ, 95.1 percent of surveyed dieticians answered yes to a question that asked if they feel nervous as they try to cope with food allergy-related problems. Most are afraid of oversights, errors, or contamination, which are followed by an increase in the number of students whose lunches require special care, and accidental ingestion. Before the issue of the Guiding Principles, the measures they had to take were becoming increasingly complicated. For example, they had to debate whether to eliminate eggs by the gram, or whether they could add up to 20 g of eggs or up to 50 cc of milk.

**Fig.5: What Makes You Feel Nervous when It Comes to Dealing with Students' Food Allergies?**



Source: *Report on Food Allergy Survey*, SDCJ



The two-alternatives policy specifies that schools are advised to choose between eliminating allergy-causing foods altogether from school lunches or serving all students the same lunch containing such foods. The SDCJ conducted the survey at just the right time. The process dietitians have to go through is now less cumbersome, which has effectively prevented accidents.

**[Kaneda]** I assume some students' guardians asked why the school had to change the way it had prepared lunches for their children.

**[Yanagisawa]**

- The Guiding Principles can smoothly win support from children's guardians when school managers, including the principal, are behind the ideas.
- Explain well that the principles are to ensure safety.

I made sure that the school's policy is in place, and that the school principal and teachers in managerial positions attended meeting of the school's committee on food allergies. Then these school managers explained to guardians. This worked. The guardians understood our point.

**[Takada]** We understand how guardians feel. The two alternatives discontinued what schools had done for their children before. Some schools had a hard time with some guardians. So, to ask for their understanding, we tell them that the national and municipal governments' policies give the highest priority to their children's safety, and that we are in the process of getting a clear picture of what has been done to cope with food allergy-related problems.

### Setting Specific Policies

- Municipal boards of education should develop their specific policies.
- These policies should be made in a phased manner.

**[Kaneda]** With safety being the highest priority, and the two-alternatives policy in mind, the city board of education presented policies on facilities, equipment, and personnel for school kitchens, and stated that it will support schools' efforts. Ms. Eguchi, what exactly are the policies presented by the board?

**[Eguchi]**

- Be flexible to the progress at schools.
- Municipal boards of education gain an understanding of realities surrounding school lunches before setting their policies.
- Carry out these policies systematically according to the conditions and progress.

Data 3

### Specific Policies

Developed as fundamental guiding principles of actions to cope with students' food allergies

- Basic policy on the school and its kitchen's facilities, equipment, and personnel allocation
- Policy on how to handle information provided to prepare for emergencies
- Policy on planned efforts and an emergency manual

Source: The Guiding Principles of School Lunches to Cope with Students' Food Allergies, MEXT

Some schools in municipalities have their own kitchens, or use common kitchens. Some facilities and equipment are new, and the others are old. So it is vital that municipal boards of education accurately understand the realities that each school faces and see how much can be done to deal with food allergy-related problems before they set a specific policy.

**[Kaneda]** Does that mean disparities in the levels of facilities and equipment at local public schools do not make an issue?

**[Eguchi]** Ideally, all schools should use equally good facilities and equipment. However, achieving such equality often requires extra budgets. So, while the boards of education should look ahead as they move forward with the process systematically, they need to decide on their policies in a phased manner so that they will carefully consider what can be done at each of these phases.

They proceed this way to ensure thorough hygiene control. So, in light of accident prevention, it is policymakers' major responsibility to promote a systematic approach to cope with students' food allergies.

### Holding Emergency Training Sessions and Creating a Manual

- EpiPen® workshop uses a set of DVDs about the Guiding Principles.

**[Kaneda]** I heard that the Report was written after the accident and workshops on how to use EpiPen® were held across the nation.

**[Imai]**

- More and more workshops are held, but how to use EpiPen® has not yet become common knowledge.

I think that MEXT, the Ministry of Health, Labour and Welfare, the JSSH, and pharmaceutical companies have held hands-on EpiPen® workshops. Nevertheless, how to use EpiPen® has not yet become common knowledge.

**[Yanagisawa]**

- Hands-on lessons provided through the DVD turned out to be helpful and vital.
- The content of the DVDs is structured in a way that is easy for viewers to understand, so it had a great effect.

We held a training session on food allergies for all school staff in April using DVDs (training materials on how schools cope with allergic diseases) that had been distributed with the Guiding Principles in January this year. A student had been taken to a hospital by ambulance due to food-dependent exercise-induced anaphylaxis, and two new first graders that had EpiPen® entered the school. These facts raised the entire school's awareness of the importance of the injector, and prompted our principal to hold the workshop for school staff to learn more about food allergies and to receive training on how to use EpiPen®.

The DVD first shows a wrong response to an allergic reaction, asks viewers to think what is wrong with the response, and illustrates what they should keep in mind in certain cases. The way this flow is structured is easy to understand. **I also liked the way it presents how to use EpiPen®. Instead of giving a lecture, it is designed like a hands-on training where viewers need to think themselves. We practiced us-**

ing the injector after listening to how to use it, but some forgot to take the cap off, and others did not press and hold it firmly enough to hear it click. We might not be able to use it properly had it not been for the training. And teachers who took the training say they are glad they did. I think there should be more opportunities like this made available to school teachers and staff members.

**Photo 2: Simulated emergency treatment of an allergic reaction to food**

(Courtesy of Moriyama Elementary School in Moriyama City)



EpiPen® is used as necessary.



Committee on Food Allergies

**Data 4** How to Use the EpiPen®

<p>(1) Remove the injector from the case</p> 	<p>(4) Press the tip of the injector onto the outer thigh until it clicks, and count to five</p> <div style="border: 1px solid black; padding: 5px;"> <p><b>If the patient cannot administer it him/herself:</b> The injector can be administered with clothes on.</p> <p><b>Make sure their pocket contains nothing that gets in the way.</b></p>  </div>
<p>(2) Hold the injector in your dominant hand</p> 	<p>(5) Make sure the orange needle cover is extended</p> <div style="display: flex; justify-content: space-around;">   </div> <p style="font-size: small; text-align: center;">Before use    After use</p>
<p>(3) Remove the blue safety cap</p> 	

Source: The *Guidelines for Coping with Allergic Diseases at School: Abridged Version*, MEXT and the JSSH

**[Kaneda]** It is a great step forward that, in addition to papers, training materials like this set of DVDs are made available so that teachers and staff members think and practice together.

**[Eguchi]**

- Studying the Guiding Principles and taking lessons the DVDs provide as a whole set can be even more helpful.

Yes. The DVDs, EpiPen®, and a summary of the Guidelines for trainers are packaged with the Guiding Principles for distribution. Using all of these as a whole set can be more helpful than using each of them as separate materials.

**[Osawa]**

- Decision-making authority should not be given to a particular person. Each school should remind daily its teachers and staff members that they should turn to emergency responses it specifies.

I have read this emergency response manual at one school that says, “the school principal checks what is happening, gives instructions, determines whether to inject EpiPen®, and directs someone to make an emergency call.” It would not save the student’s life. My school has a manual that assumes “**anyone is authorized to decide to use the injector on the spot as necessary before receiving instructions from the principal.**”

**[Takada]** I heard that, at some schools in Aichi Prefecture, they were allowed to call an ambulance or use EpiPen® only if their principals or nursing teachers decide to do so. Today **at all schools, anyone can administer EpiPen® if they decide it is necessary, and they must call an ambulance as soon as possible after that.** It has been made clear that they should take these critical actions without waiting for their principals’ instructions.

### Receiving Information from First Graders’ Kindergartens or Preschools

- Schools cannot provide the same level of care as kindergartens and preschools.  
- What a school principal should do and keep in mind.  
- Information about allergies children have should be shared across their school years.

**[Kaneda]** Schools need to get information about food allergies their new first graders might have from their kindergartens and preschools. Could you tell us about what elementary schools do for that?

**[Imai]**

- School teachers and staff members should be aware that elementary schools cannot afford to provide care as elaborate as kindergartens and preschools’.  
- Schools should ensure that they have information about new first graders’ food allergies shared by the children’s kindergartens and preschools.

Generally speaking, preschools are smaller than schools, so preschools can afford to provide more elaborate care. This gap can cause a sense of dissatisfaction in new first graders’ guardians. This may be difficult, but schools need to be well aware of the guardians’ dissatisfaction and where it comes from, and explain to them why schools cannot give the same level of attention as preschools. Children’s food allergies do not go through changes just because they enter elementary school,

so preschools and elementary schools maintain basically the same ideas about food allergy-related issues and how to cope with them. So their student health information sheets (“Allergic Disease Information Sheet for Preschool”) ask almost the same questions. I believe that, before they have new first graders, elementary schools should communicate with kindergartens and preschools to learn about how severe these children’s allergies are, what they had for lunch, and what stances their guardians have.

**[Kaneda]** It would be great if each municipality has a system in which each child’s medical record about his or her food allergies is automatically shared with schools he or she goes to, from nursery and elementary schools to high school.

**[Eguchi]**

**- To ensure safety, kindergartens, preschools, elementary schools, and junior high schools are working toward sharing students’ health information.**

Kindergartens, preschools, elementary schools, and junior high schools are currently working on creating a system for sharing their students’ health information. I believe the system will cover the sharing of health-care-related information, and I think it necessary also to share information about allergic reactions the children have had and how they have been handled to ensure safety.



**Photo 3: Principal, nursing staff, and diet and nutrition staff interview a guardian about her child’s allergy**

(Courtesy of Moriyama Elementary School in Moriyama City)

**[Kaneda]** As school principal, could you talk a little bit about how to share students’ health information across kindergartens, preschools and schools, Mr. Osawa?

**[Osawa]**

**- “We send teachers to kindergartens and preschools to collect information about our prospective first graders to prepare for any food allergies they might have.”**

We send our teachers to kindergartens and preschools where children scheduled to enter our school are currently enrolled. The teachers interview directors and teachers there to learn about each of the prospective first graders. Information acquired through the interviews is compiled and used for class composition, and serves as important notes we must refer to for students’ health, safety, and hygiene.

**[Kaneda]** Each municipality is responsible for creating its own *shokuiku* (dietary education) promotion program. If the program includes how to cope with food allergies children have, sharing students’ health information across their kin-

dergartens, preschools, elementary schools, and junior high schools will be possible.

**[Yanagisawa]**

**- Information about allergies students have should be included in their health information shared across kindergartens, preschools, elementary schools and junior high schools.**

When junior high school teachers visit elementary schools for information about their prospective students, their conversation inevitably focuses on student guidance. So I think that the overall dietary guidance plan should cover food allergies, and diet and nutrition teachers should be included in liaison councils of kindergartens, preschools and elementary schools as well as of elementary and junior high schools.

### Approach to Food Allergies in the Classroom

- Care given to children with allergies
- Guidance given to their classmates
- Explanations given to children’s guardians

**[Kaneda]** Mr. Osawa, could you talk about what homeroom teachers should consider to help children correctly understand food allergies that their classmates have?

**[Osawa]**



- School managers provide support.
- Schools ensure they have accurate information about children with allergies.
- Set up a committee on students’ food allergies, and determine detailed procedures for serving

**allergen-free meals.**

Homeroom teachers need support from school managers in coping with that. In 2010 the school I was working at had a new student who had to come to school with EpiPen®. We collected information from his preschool. And I went to his medical examination with his guardian and our nursing teacher to interview his doctor for relevant health information about the student and what our school should do to help him lead a normal school life. Before he entered school, we provided an opportunity for him and his parents to experience a school life and school lunch, and visited his doctor again to double-check what our school should keep in mind and to learn where we can find his EpiPen® in an effort to prepare ourselves. During lunch hours, our vice principal and nursing teacher have provided support that the student and his homeroom teacher need. He is now a sixth grader, and it seems that he hasn’t had any serious problems related to his allergy.

This year, 8 out of 44 first graders at my school have food allergies, and one of them brings EpiPen® with him to school. We already had four students with allergies, so we worked with our school physician and set up a committee to explore approaches to cope with food allergies that 12 students in total have, especially the first graders.



**Photo 4: Lunch boxes students bring are kept in the teachers' room**



**Photo 5: A student's school bag with an EpiPen® is placed on a shelf marked with red lines**

(Courtesy of Shibafuji Elementary School in Kawaguchi City)

We consulted a medical specialist who advised us to do everything children and their guardians expect us to do. So we decided to take the following specific measures: (1) Creating a document that shows a course of action we take at school to cope with food allergies our students have, and sending copies of it to guardians to gain their understanding. (2) Providing guardians with charts of school lunches to be served the following week to ask them to red-mark foods their children cannot eat. (3) Their children lay their charts of the day's lunch on their trays every day. (4) Their teachers check the charts before the lunch is served. (5) After checking the charts, the teachers set their seals on the students' name cards. (6) Starting from April this year, nursing teachers, school nutritionists, specialist subject teachers, and support personnel work together to help first graders. (7) The teachers check students' name cards (the size of a business card) on their chests for any foods crossed out to indicate that they cannot eat them. (8) All meal plates for first graders with allergies are prepared in the classroom of first graders in Class 1. (9) Of these plates, those for children in Class 2 are carried to their desks by their teacher. (10) Children with milk allergy develop an allergic reaction just by touching milk. So a white line is drawn on the classroom floor to indicate a non-milk area where the children and their teacher eat lunch together. (See the cover)

We would like them to be self-reliant in the future, so we are considering how far we should take care of them at lunch time. The care we provide has caused no problems so far, though. These children's classmates serve food, eat their meals, and put away their trays, taking the differences for granted. I heard that their guardians thank our school physician for the care we provide.



**Photo 6: A school nutritionist prepares lunch trays for children with allergies**

A student's school bag with an EpiPen® is placed on a shelf marked with red lines

(Courtesy of Shibafuji Elementary School in Kawaguchi City)

**[Kaneda]** Children with allergies each receive care tailored to them. What about care for the other children in the same classroom?

**[Osawa]**

- Illustrate the realities of food allergy-related issues for all children (including those with allergies) and their guardians to raise their awareness and gain their understanding.
- Ask children to protect their friends' lives.
- Telling children about food allergies in detail evokes a sense of responsibility to protect their friends.

At a parent-teacher meeting, we tell all students' guardians that a certain number of first graders have food allergies and they each need special care, so we have a system in place to protect them. This way the guardians understand the situation, and tell their children why some of their classmates had to be treated differently at lunch time.

**[Kaneda]** So children do not discriminate against their classmates with allergies.

**[Osawa]** No, not at all.

**[Kaneda]** First and sixth graders alike? Have you done anything special?

**[Osawa]** Just asking them to cooperate in protecting their friends' lives is enough.

**[Kaneda]** Ms. Harada, could you talk a bit about this?

**[Harada]**

- An explicit illustration of food allergies their friends have encourages children to embrace the friends as they are.

We show a picture story in classrooms with children with food allergies in the beginning of the school year and tell students, "X (a classmate) can't eat eggs because she will have this reaction if she does. As her friends, please take care so she won't eat food with eggs in school lunches." Children understood this without difficulty. I thought they are fully ready to protect their friends.

**[Kaneda]** How about junior high schools?

**[Yanagisawa]** Few junior high school students have food allergies. But I saw some students check on their friends who used to have ones.

**[Kaneda]** Mr. Imai, do you have any comment?

### Must-dos for Children with Severe Food Allergies

- Understand the concerns that guardians have about their children's severe food allergies.
- Note the following when providing counseling:
- Consider their concerns well when giving an explanation to guardians, and try to make improvements according to the situation.
- Be aware that allergic reactions to food can be life-threatening.
- Listen to and understand guardians' concerns first, then explain actions schools take in detail.

**[Imai]** For guardians with children with severe food allergies, the allergies are a life-threatening issue, while many school teachers and staff members have not witnessed any serious allergic reactions. This gap in awareness can lead to problems or serious situations.

**[Eguchi]** It is important to listen to what guardians have to say. We should understand their concerns, and then explain classroom situations in detail for them. This way the school and guardians can work out differences in stance, and make improvements according to what the children need.

**[Kaneda]** So, Mr. Imai, it is vital for schools to talk to people in different positions and provide counseling.

**[Imai]**

- Give an explanation that covers the guardian's concern.
- A school manager joins interviews with guardians to share information and to explain the school's stance clearly and elaborately and asks for their understanding.

As Ms. Eguchi said, we should listen to guardians first, and then give an explanation that covers their concerns and issues they have with the school. This makes them feel more satisfied.

**[Harada]** Fukuroi City also experienced some cases where problems arose when it used a multi-phased approach in the beginning. Then, in the following year, the municipal committee studied the Report and decided to adopt the two-alternatives approach for the city's school lunch program. It also decided that a school manager must join the interviews with guardians that had been conducted by only those in charge of food allergy-related problems before taking any actions. During the interviews, the manager explains the school's policy on food allergies students have, and those in charge of the problems explain actions the school takes. This has made the whole process smooth.

### New-onset and Food-dependent Exercise-induced Anaphylaxis

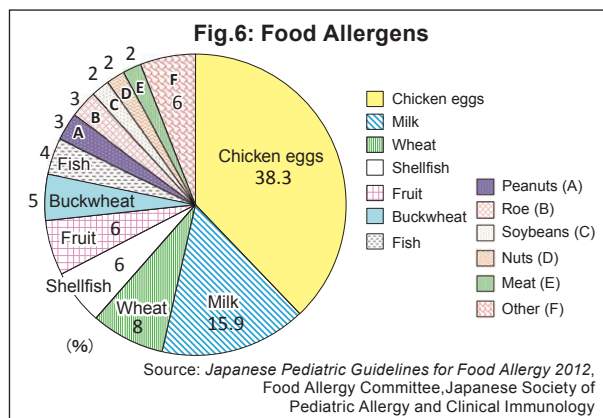
- New food allergy symptoms
- Food-dependent exercise-induced anaphylaxis (FDEIA)
- Emergency action to take when any symptoms appear

**[Kaneda]** As mentioned a while ago, some allergy symptoms appear all of a sudden, don't they?

**[Imai]**

- New allergy symptoms at preschools in Tokyo made up 60 percent.
- Foods that often trigger new symptoms are fruit (mostly mild symptoms), shellfish, nuts, and wheat (, which are most allergy-causing depends on children's age).
- Junior and senior high school students are more subject to FDEIA.
- There are other factors that may induce FDEIA, so schools should be alert.

In that case, there is nothing we can do. According to this survey conducted by the SDCJ, new allergy symptoms made up 30 percent. And a survey on allergies at preschools conducted by the Tokyo Metropolitan Government found that 60 percent of allergy symptoms children had developed were new. Despite these facts, some school managers are still unaware of the severity of this issue, and so they remain inexperienced in dealing with students' food allergies. This is a significant obstacle to crisis management.



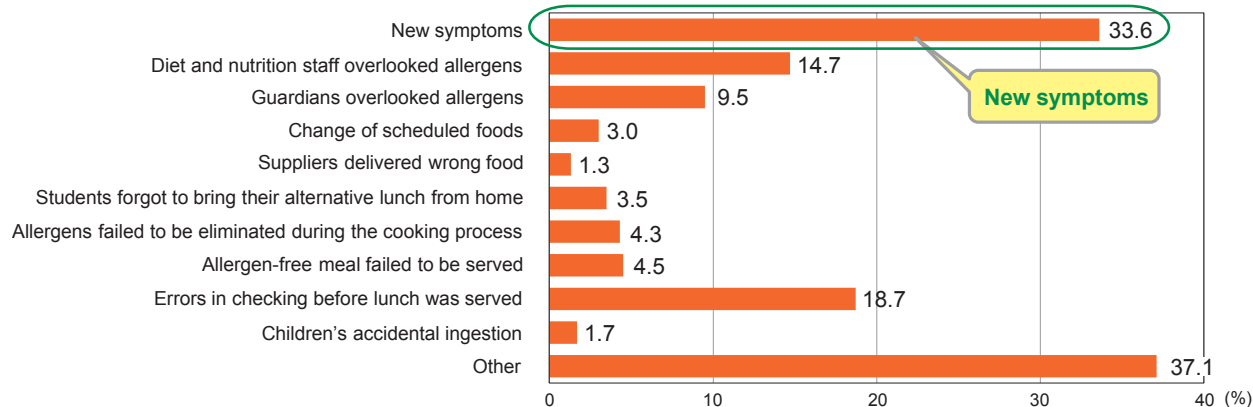
**[Kaneda]** What are common food allergens?

**[Imai]** Only a few children develop new allergy symptoms caused by milk or chicken eggs after they reach school age, while many begin to experience allergic reactions to some fruits, shellfish, and nuts. There are many cases of allergic reactions to fruits, but these reactions are usually mild. The most cases of FDEIA induced by exercise are caused by wheat, and new symptoms of this allergy should never be underestimated.

**[Takada]** Quite a few junior and senior high school students develop FDEIA during their morning or afternoon exercise for extracurricular activities because of food they had for breakfast. This means students do develop new allergy symptoms including FDEIA that are totally unexpected. So we should not assume that children whose health information sheets indicate "no allergy" will have no allergic reaction. We should particularly be careful about transfer students who have enrolled in the beginning of a new semester because we may not have any information about their health.

**[Yanagisawa]** Some junior high school students develop symptoms of FDEIA during sports games outside school, so it is vital to share information about students with relevant people. Many don't know anything about FDEIA, so we call their attention to the allergic reaction by telling them that junior high school students and high school students are more likely to have it than elementary school children.

**Fig.7: What Has Caused Food Allergy-related Accidents?**



Source: Report on Food Allergy Survey, SDCJ

According to a medical specialist, food is not the only cause of FDEIA. Perspiration, anti-acne drugs, and many other different factors can trigger the allergic reaction. So we need to learn much more about what may induce FDEIA.

**[Takada]**

- Each school should have a shared understanding of food allergies to prepare for any emergency.
- Communicate regularly with the fire department to share relevant information.
- In an emergency, call an ambulance first and foremost. Do not hesitate to administer EpiPen® before the student is taken to a hospital.

The manual for coping with students' food allergies published by Gifu Prefectural Government last year included request items intended for ambulance workers so that they immediately see what they should keep in mind when taking a child to a hospital. I heard that the fire department appreciates that because having information beforehand prepares them well for an emergency.

**[Yanagisawa]** There is a fire station right next to our junior high school. They asked us to share relevant information about our students so that they can figure out which hospitals they should take them to when something ever happens. If the children had any allergic reactions during their extracurricular activities away from school, the fire station can share the information with the ambulance crew called to emergency transport. So we provided them with relevant personal information about our students with EpiPen® after receiving their guardians' consent.

**[Harada]**

- A regular system to work with the fire department and hospitals should be in place.
- Since symptoms children develop can take an unexpected turn, arrange emergency transport immediately if a student shows any allergy symptoms.

Fukuroi City's board of education cooperates with the fire department and hospitals. We considered the time needed for transport from school to hospitals, and made sure that we can call an ambulance even when the reaction the student shows

seems mild because the condition can take an unexpected turn. Our principal does appreciate that we don't have to hesitate to call an ambulance.

**[Takada]** If the hospital that the student needs to go is in a far-away location, the fire department informs the hospital immediately. Once, an air ambulance took over transport while an ambulance was on its way to the hospital. Allergy symptoms children develop can take an abrupt turn, so it is vital to call an ambulance as soon as possible.

**I can't emphasize enough the importance of consulting MEXT's Guiding Principles at all times, administering EpiPen® whenever necessary, and calling an ambulance with no hesitation.**

**To Effectively Apply the Guiding Principles**

- From the perspectives of school principals/managers
- From the perspectives of nutrition teachers
- From the perspectives of the board of education
- From the perspectives of medical specialists

**[Kaneda]** Finally, could each of you talk about how schools can effectively apply the Guiding Principles?

**[Osawa]**

- Based on the Guiding Principles, school principals should provide leadership in coping with any allergy-related problems.

**As a school principal, I believe that I am responsible for providing leadership in building relationships of trust between school, our students, and their guardians to protect children's lives.** As the Guiding Principles state, we should report and share examples of different types of near misses, and we must be consistent in our action to provide or not provide school lunches in accordance with the two alternatives. I intend to keep in mind the Guiding Principles at all times as I remind our school teachers, staff members, and any other relevant people that they should stay alert.

**[Kaneda]** Ms. Harada?

### [Harada]

- Request the board of education to help create a proper environment based on the Guiding Principles.

The Guiding Principles set a perfect stage for schools to review their complicated multi-phased approaches. The principles also urge schools without a well-developed approach to undertake the challenge of gaining guardians' understanding of the two-alternatives policy. For these schools to become capable of coping with students' food allergies safely, the board of education should have a solid system in place. I intend to voice this based on the Guiding Principles.

### [Yanagisawa]

- We will promote the well-structured and easy-to-apply Guiding Principles to put them into practical use at schools.

The Guiding Principles are well received because they are easy to read and understand. We advise our diet and nutrition teachers to study them as part of our school-wide effort, which we believe is crucial. The principles are well structured, so handling problems caused by food allergies at school will be easier if we understand and apply them correctly. Diet and nutrition teachers and school nutritionists on the front line ask many questions at workshops and training sessions because they are unsure about so many aspects of food allergy-related issues. Some of them brood over minor details. We should share the information that will help people in different circumstances solve their problems so that we will work together toward preventing accidents based on the Guiding Principles.

### [Takada]

- A board of education should develop its basic policy, set up a committee on food allergies, illustrate subject matters that training sessions deal with, and add information to its guide based on lessons learned from onsite experiences.

As the Guiding Principles state, I believe that municipal boards of education should draw up their basic policies for coping with students' food allergies, and local governments and schools should set up a committee on food allergies to establish systematic approaches. Besides, we should explore what support can be provided for training sessions and local governments' efforts.

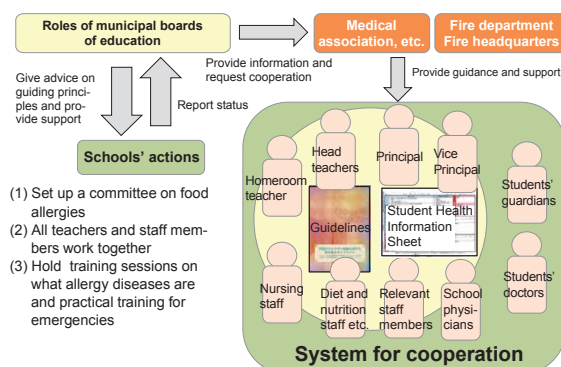
This round-table discussion has clarified what the Guiding Principles suggest. We should also complement them with what needs to be done to cope with allergy-related problems at school, and reflect any changes in this year's guide to handling those problems at schools across the prefecture.

### [Eguchi]

- The awareness that an accident could happen at any time should be maintained.
- To protect children's lives, school principals should show leadership in working with relevant organizations, and take systematic approaches in accordance with their schools' policies based on the board of education's policy.

Schools has become more alert and taken actions since the accident. We have to make sure that this awareness will be maintained.

### Data 5: Framework for Promoting Actions to Cope with Allergic Diseases



Source: *Fundamental Ideas about How to Cope with Allergic Disease at School*, MEXT and the JSSH

To protect children's lives, all teachers—including those who have not been involved in actions to handle students' food allergies—should take training to prepare for any emergency, and school principals should show leadership in developing their schools' policies based on the board of education's policies. And it is critical that schools, students' guardians, the medical association, and the fire department share as much information as possible to cope with children's food allergies within an extensive framework. Furthermore, they must be well aware that, to ensure that students enjoy school lunches knowing that the foods are perfectly safe to eat, the submission of students' health information sheets completed based on doctors' diagnosis and actions based on the Guidelines are required.

### [Imai]

- MEXT, boards of education, and schools must fulfill their own roles.
- Principals should take the lead in bringing their schools together to raise their awareness and take actions as organizations.
- Schools without manuals yet should refer to the Guiding Principles as they decide on their practical direction and work toward it.
- The Guiding Principles should be used to inform and educate people who should be involved but have no interest in food allergy issues, and thus no sense of urgency to take action.

As I said, MEXT, municipal boards of education, and schools each must do what they are required to do. On the front line at schools in particular, principals must show leadership so that nutrition teachers, school nutritionists, nursing teachers, homeroom teachers, and all the other teachers consciously play their roles. And many schools and school kitchens are lagging behind in developing approaches to cope with students' allergies. I believe that the Guiding Principles will contribute significantly to these schools' efforts to have practical approaches in place.

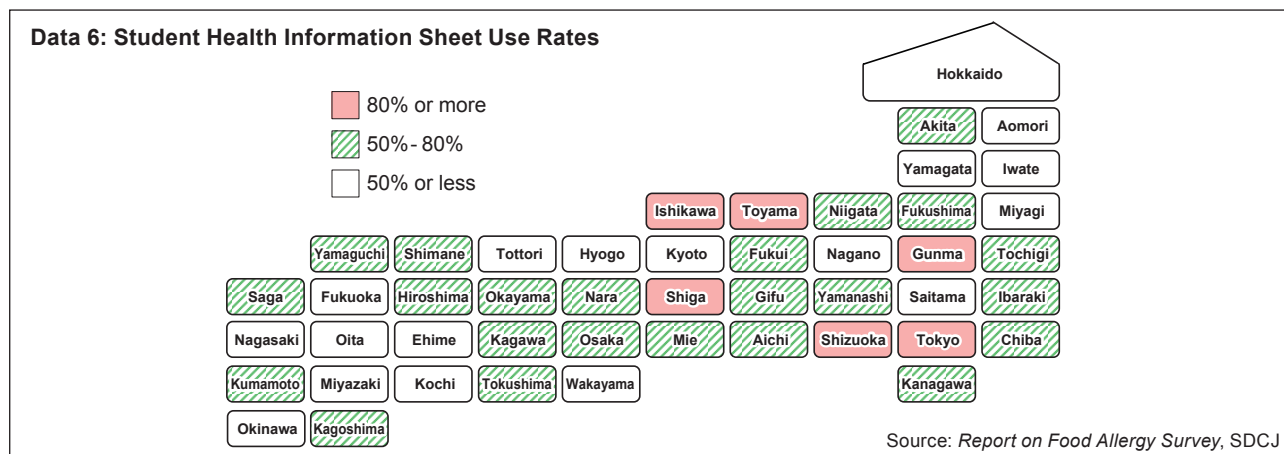
It is also vital to have attention from people who should be involved but have no interest in food allergy issues, and thus no sense of urgency to take action. We must find a way to get them moving.

I hope that the Guiding Principles will serve as a catalyst for gradually raising the national level of approaches to students' food allergies.

**[Kaneda]** Today, we discussed the Guiding Principles that clearly state the ideas regarding how to cope with students' food allergies. The teachers involved in the process of creating the principles elaborated on the ideas. I hope the discussion will help schools to ensure that their manuals follow the principles, or to create new manuals based on the principles if they have not created ones. In any case, schools are advised to take prompt actions.

In addition to hygiene control, I believe it is important to continue holding training sessions and to be on the lookout for information to share at all times as a way to prevent accidents caused by food allergies.

**With the population of children declining, we should make sure that our children would lead safe and enjoyable school life. We hope that all schools across Japan will study the Guiding Principles and apply them widely and meaningfully.** Thank you.



Ms. Yasuko Harada Ms. Sachiko Yanagisawa Ms. Naomi Takada Ms. Masayo Kaneda Mr. Takanori Imai Ms. Yoko Eguchi Mr. Masanori Osawa

**[Editor's Postscript]** Today's round-table discussion left me with a deeper understanding of how significant the theme of this issue is. I was also astonished to learn that many schools across Japan are still unaware that the food allergies children suffer can cause life-threatening reactions.

Therefore, we edited this issue so that it provides detailed information as clearly as possible. We also decided for the first time to distribute copies of the *Sukoyaka* Newsletter Volume 18 to all public elementary and junior high schools across the country. We truly hope that this effort will help schools understand and act on the *Guidelines for Actions to Cope with Students' Food Allergies at School* published in 2008, and the *Guiding Principles of School Lunches to Cope with Students' Food Allergies* we discussed, thereby preventing recurrences of accidents caused by food allergies. We believe this will help children enjoy their school life with peace of mind.

The English edition or the Japanese edition of this volume is available for distribution. Please inquire at the Association Secretariat by FAX or E-mail, with your name, telephone number, E-mail address, and the number of copies required as well as the postal address to which the copies should be sent.

Japan Association for Improving School Lunch  
 3-12 Yotsuya, Shinjuku, Tokyo 160-0004 Japan  
 TEL +81-3-3357-6755 FAX +81-3-3357-6756 E-mail kaizen@gakkyu.or.jp

No part of this text, photos or figures from this volume can be copied, reproduced, or reprinted without the Association's consent. Those who wish to quote or reprint any part of this newsletter for educational purposes are asked to submit an Application for Permission for Reprint/Quotation form to the Association. The form is available for download on the Association's website. Please contact us should you wish to order additional copies to use for educational purposes.