FACTS
Decreasing Sugar-Sweetened Beverage Consumption
Policy Approaches to Address Obesity

OVERVIEW
America is in the midst of an obesity epidemic, with levels among adults at an all-time high. Children are not untouched by this frightening new reality; 23.9 million children, or 31.8%, are overweight, and of these, 12.7 million are obese.¹

The American Heart Association supports a multipronged approach to address this problem. It includes creating and implementing policies designed to improve access to affordable, nutritious foods and beverages, thereby making it easier for Americans to choose healthy foods consistent with the Dietary Guidelines for Americans. We also support examining whether policies such as beverage taxes, eliminating sugary beverages from the Supplemental Nutrition Assistance Program (SNAP), and adjusting cooperative marketing agreements to address beverage placement in supermarkets can curb the consumption of sugary drinks and improve the health of Americans of all ages.

THE CURRENT LANDSCAPE
Emerging data suggest that high intake of added sugars can exacerbate existing health problems and contribute to essential nutrient shortfalls.² For example, diets high in added sugars are often low in fiber, which can undercut weight loss efforts.³

Soft drinks and other sugar-sweetened beverages (SSBs) have been identified as the primary source of added sugars in Americans’ diets;⁴ their increased consumption has been associated with rising obesity rates.⁵ Consumption of SSBs has increased 500% in the past fifty years and is now the single largest category of caloric intake in children, surpassing milk a decade ago.⁶ Children take in 10-15% of their total daily calories from SSBs.⁷⁸⁹

In 2006, the Alliance for a Healthier Generation, a joint initiative of the American Heart Association and the Clinton Foundation, collaborated with leaders of the beverage industry to remove full-calorie soft drinks in schools across the country, replacing them with smaller portions and lower-calorie options. The initiative resulted in 88% fewer beverage calories shipped to schools and a 95% reduction in the volume of full-calorie soft drinks.¹⁰ However, children still get plenty of beverage calories outside of schools¹¹

- In 2005, children ages 12-19 spent an estimated $159 billion on food, candy and soft drinks.¹² Although full-calorie beverage consumption is on the decline, beverage consumption as a whole is increasing, especially with the mid-calorie drinks like sports drinks, teas, and energy drinks.¹¹
- Energy drinks often do not qualify as beverages, but are sometimes regulated as dietary supplements, which do not require the same preapproval by the FDA as beverages.¹³
- Children are replacing healthier options like water, milk, or 100% fruit juice with empty calories; a 2010 Centers for Disease Control and Prevention survey among high school students revealed that most kids drank one or more SSBs each day: either regular soda (25%), a serving of a sports drink (16%), or another sugar-sweetened drink (17%).¹⁴

THE POTENTIAL FOR POSITIVE CHANGE
Recently, a comprehensive, systematic review of 160 studies looked at the effect of price on food demand and consumption in the U.S. Food eaten away from home, soft drinks, juice, and meats were the most responsive to price changes.¹⁵

- One study showed that a rise in price in away-from-home foods and soda was associated with lower caloric intake, healthier weight, and decreased risk for diabetes.¹⁶
- Other studies suggest that a 10% price increase might decrease consumption of these foods and beverages by 8-10%.¹⁷
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- Vulnerable populations – especially low-income individuals, less well-educated people, and children and adolescents – are particularly price-sensitive. These groups often have the greatest health disparities and may benefit most from lower consumption of SSBs.
- Taxes have been used as a way to discourage the misuse of unhealthy products, such as tobacco; there is strong economic and public health evidence of their positive impact.
- Each year, the U.S. spends an estimated $190 billion on obesity-related conditions, or 21% of all U.S. health care costs.
- Funding for obesity prevention programs could be obtained from a small tax on SSBs: a one-cent per ounce tax on a 20 ounce bottle could bring in $13.2 billion in tax revenue. A three-cent tax could generate up to $50 billion in ten years.

THE ASSOCIATION ADVOCATES

Reducing the consumption of added sugars from SSBs is an important way to improve the health of Americans. We advocate for:

- Implementing robust nutrition standards for all foods in schools, including beverages that are higher in nutrients and without added sugars limiting empty calories throughout the school environment;
- Comprehensive procurement standards for foods and beverages purchased by employers and governments offered in the workplace, meetings, or conferences;
- Determining the impact of beverage sales taxes or excise taxes on consumption rates and shifts in consumer choice with special attention to vulnerable populations by supporting tax initiatives in some states and localities. Key criteria for our support are: (1) at least a portion of the money is dedicated for prevention efforts; (2) the tax is structured so as to result in an increase in price for sugar-sweetened beverages at the time of sale; (3) the amount of the tax is anticipated to be sufficient to result in a reduction in consumption of SSBs (at least a penny per ounce); (4) there are funds dedicated for rigorous evaluation; (5) there is a standard definition of SSBs; and (6) there is no sunset;
- Working with major supermarket chains to address the cooperative marketing agreements with beverage companies to prioritize the prime placement of healthier beverages in stores;
- Exploring with some pilot states and/or municipalities the impact of limiting the purchase of full-calorie soda in the Supplemental Nutrition Assistance Program (SNAP); and
- Eliminating the marketing of unhealthy beverages to children.

CONCLUSION

The American Heart Association advocates additional research to determine how pricing, taxation, and agricultural subsidies on food and beverage consumption patterns could improve the health of Americans, particularly as it relates to the obesity epidemic and related chronic diseases, such as cardiovascular disease, diabetes and cancer.

We recommend low- and no calorie beverages like water, unsweetened tea, diet soft drinks, and fat-free or low-fat milk as better choices than full-calorie soft drinks and that Americans should try to limit the amount of added sugars in all the foods they eat.

We further advocate that state and local governments that generate revenue from beverage tax initiatives direct these funds toward public health and obesity education and prevention efforts. All programs should be evaluated to determine the efficacy.


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