



San Francisco Sugary Drinks Distributor Tax Advisory Committee

March 2021 Annual Report

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March 1, 2021

**Sugary Drinks
Distributor Tax
Advisory
Committee**

Vanessa Bohm
Health Equity-
Latino/Chicano/Indigena

John Maa
Health Equity –
Asian/Pacific Islander

Joi Jackson-Morgan*
Health Equity –
Black/African American

Roberto Ariel Vargas
Research/Medical
Institutions

Jonathan Butler*
Research/Medical
Institutions

Kiana Sezawar
Youth Seat

Larry McClendon
Office of Economic and
Workforce Development

Saeeda Hafiz
San Francisco Unified
School District

Jennifer LeBarre
San Francisco Unified
School District

Rita Nguyen
Chronic Disease

Irene Hilton
Oral Health

Veronica Shepard
Food Access/Security

Michelle Kim
Children Youth and Their
Families

Linda Barnard
Recreation and Parks

Janna N. Cordeiro
SFUSD Parent Advisory
Council

Derik Aoki
Children 0-5 Years Old

***Committee Co-Chairs**

SDDTAC Staff:
[Melinda Martin](#)
[Christina Goette](#)
sddt@sfdph.org

Dear Mayor London Breed, San Francisco Board of Supervisors and San Francisco Residents,

WHAT A YEAR! 2020 was one of the most challenging years that the City has faced in decades. The COVID-19 pandemic has devastated many San Franciscans, especially communities of color. These challenges have magnified the existing health disparities, lack of economic opportunity, unequal access to quality education, and food insecurity in our most vulnerable populations. Despite the many challenges we have faced, the Sugary Drinks Distributor Tax Advisory Committee (SDDTAC) members have been resolute to our mission—making funding recommendations that support services and other innovative, community-led work to decrease sugary beverages. The SDDTAC is committed to recommending the investments our communities care most about:

- Equitable access to healthy food for low-income people and students.
- Food security.
- Access to clean drinking water.
- Access to safe and affordable physical activity.
- Oral health.
- A built environment that ensures access to the aforementioned.

A few of our many accomplishments found in our annual report includes:

- Completion of our Evaluation Report that features how funds were used in Fiscal Year 2019/2020 to support healthy people and health places within San Francisco.
- The SDDTAC’s recommendation to use \$1.65 million of unused funds from the fiscal year 2019-2020 to support food security and food distribution costs for the most vulnerable populations in the City and County of San Francisco (see table on next page).

This year, we will also bid adieu to several founding and longtime committee members: Dr. John Maa (Seat 2: Asian/Pacific Islander Health Equity Seat), Joi Jackson-Morgan (Seat 3: Black/African American Health Equity Seat, Committee Co-Chair 2018-2021), Roberto Ariel Vargas (Seat 4: Research/Medical Institutions, Committee Co-Chair 2018-2020), Dr. Jonathan Butler (Seat 5: Research/Medical Institutions, Committee Co-Chair 2020-2021, Data and Evidence Subcommittee Chair 2018-2020), Janna Cordeiro (Seat 15: SFUSD Parent Advisory Council, Community Input Subcommittee Chair 2018-2019) and Derik Aoki (Seat 16, 0-5 Community).

As co-chairs, we thank the committee members for your tireless efforts.


Joi Jackson-Morgan, MPH


Jonathan Z. Butler, PhD, MDiv

SDDTAC Co-Chair
Executive Director
3rd Street Youth Center and Clinic

SDDTAC Co-Chair
Assistant Professional Researcher
Department of Family & Community Medicine,
University of California San Francisco

Emergency Food Security Funds for Vulnerable Communities Impacted by COVID-19

Vulnerable Community	Organization	Amount
Pregnant women low-income families	San Francisco Department of Public Health (SFDPH) Maternal Childhood and Adolescent Health Division	\$200,000
Undocumented Families	LatinX Task Force	\$200,000
Children and Families	San Francisco Unified School District (SFUSD)	\$300,000
Public housing sites - Potrero Hill	SF Housing Authority	\$300,000
Low-income families Seniors	SF African American Faith Based Coalition	\$200,000
Low-income families	Farming Hope	\$30,000
Bayview Hunters Point (BVHP) families/seniors	BVHP Advocates	\$20,000
All populations	SF Produce Market	\$400,000
	Total	\$1,650,000

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I. BACKGROUND

a. Sugary Drinks Distributor Tax Legislation

In November 2016, San Francisco voters passed Proposition V. Proposition V established a one penny per ounce fee on the initial distribution of a bottled sugar-sweetened beverage, syrup, or powder, within the City and County of San Francisco. The Sugary Drinks Distributor Tax (SDDT) is a general excise tax on the privilege of conducting business within the City and County of San Francisco. It is not a sales tax or use tax or other excise tax on the sale, consumption, or use of sugar-sweetened beverages. The funds collected from this tax are to be deposited in the General Fund.

The legislation defines a sugary drink, or sugary-sweetened beverage (SSB), as follows:

A sugar-sweetened beverage (SSB) means any non-alcoholic beverage intended for human consumption that contains caloric sweetener and contains 25 or more calories per 12 fluid ounces of beverage, including but not limited to all drinks and beverages commonly referred to "soda," "pop," "cola," soft drinks" "sports drinks," "energy drinks" "sweetened iced teas" or any other similar names.

The passage of Proposition V established two pieces of law: [the Sugary Drinks Distributor Tax](#) in Business and Tax Regulations Code and the [Sugary Drinks Distributor Tax Advisory Committee \(referred to in this report as "Committee"\)](#) in the City's Administrative Code. The ordinance stated that the Committee shall consist of 16 voting members, who are appointed by either the Board of Supervisors or certain City departments. The powers and duties of the Committee are to make recommendations to the Mayor and the Board of Supervisors on the effectiveness of the Sugary Drinks Distributor Tax and to submit a report that evaluates the impact of the Sugary Drinks Distributor Tax on beverage prices, consumer purchasing behavior, and public health. The Committee is to also provide recommendations regarding the potential establishment and/or funding of programs to reduce the consumption of sugar-sweetened beverages in San Francisco.

In May 2018, the SF Department of Public Health was requested to assume staffing of the Committee. The Mayor's Office formalized the change in administrative oversight of the Committee from the City Administrator's Office to Department of Public Health through a transfer of function of the Executive Branch pursuant to [Sec. 4.132 of the City Charter](#).

Unless the Board of Supervisors by ordinance extends the term of the Committee, it shall expire by operation of law, and the Committee shall terminate, on December 31, 2028.

b. Report Requirements and Process

Starting in 2018, by March 1, of each year, the Committee shall submit to the Board of Supervisors and the Mayor a report that evaluates the impact of the Sugary Drinks Distributor Tax on beverage prices, consumer purchasing behavior, and public health. The Committee in their report shall make recommendations regarding the potential establishment and/or funding of programs to reduce the consumption of sugary drinks in San Francisco.

Within 10 days after the submission of the report, the Department of Public Health (per change referenced above) shall submit to the Board of Supervisors a proposed resolution for the Board to receive the report.

c. Relationship Between Sugary Drink Consumption, Health, and Health Equity

A large body of evidence exists indicating that sugary drink consumption increases risk for cavities, overweight/obesity, type 2 diabetes, hypertension and heart disease.^{i, ii, iii, iv, v} Although sugary drinks can contain hundreds of calories in a serving, they do not signal “fullness” to the brain and thus facilitate overconsumption.^{vi} Sugary drinks are the leading source of sugar in the American diet, contributing 36% of the added sugar Americans consume.^{vii}

Numerous organizations and agencies, including the American Heart Association, American Diabetes Association, American Academy of Pediatrics, Institute of Medicine of the National Academies, American Medical Association, and the Centers for Disease Control, recommend limiting intake of added sugar and sugary drinks to improve health. Studies show that sugary drinks flood the liver with high amounts of sugar in a short amount of time and that this “sugar rush” over time leads to fat deposits and metabolic disturbances that are associated with the development of type 2 diabetes, cardiovascular disease, and other serious health problems.^{viii} Of note, every additional sugary drink consumed daily can increase a child’s risk for obesity by 60%^{ix} and the risk of developing type 2 diabetes by 26%.^x

Diseases connected to sugary drinks are also found to disproportionately impact ethnic minority and low-income communities – the very communities that are found to consume higher amounts of sugary drinks. Diabetes hospitalizations are approximately three times as high in low-income communities as compared with higher income communities. African American death rates from diabetes are two times higher than San Francisco’s overall rate. In San Francisco, approximately 42% of adults are estimated to be obese or overweight, including 66% of Latinx and 73% of African Americans. With respect to oral health, the data indicate that Asian and Pacific Islander children suffer from cavities at a higher rate than other populations; but Latinx and African American children also have a higher prevalence than the average for cavities.

The Sugary Drinks Distributor Tax is intended to discourage the distribution and consumption of sugary drinks in San Francisco by taxing their distribution. Mexico, where an average of 163 liters of sugary drinks are consumed per person each year, enacted an excise tax on sugary drinks in 2014, with the result that the purchase of taxed sugary drinks declined by 12% generally and by 17% among low-income Mexicans by December 2014. The Mexico data indicate that, when people cut back on sugary drinks, to a significant extent they choose lower-caloric or non-caloric alternatives. Studies have projected that a 10% reduction in sugary drink consumption in Mexico would result in about 189,300 fewer incident type 2 diabetes cases, 20,400 fewer incident strokes and myocardial infarctions, and 18,900 fewer deaths occurring from 2013 to 2022. This modeling predicts the sugary drinks tax could save Mexico \$983 million international dollars.^{xi} Following the implementation of Berkeley, California’s sugary drink tax, the first in the nation, there was a 50% decline in sugary drink consumption among diverse adults over the first 3 years of the tax.^{xii} Modeling suggests that a national sugary drink tax that reduced consumption by just 20% would avert 101,000 disability-adjusted life-years; gain 871,000 quality-adjusted life-years; and result in \$23.6 billion in healthcare cost savings over just 5 years. The tax is further estimated to generate \$12.5 billion in annual revenue. This body of research demonstrates that taxation can provide a powerful incentive for individuals to reduce their consumption of sugary drinks, which in turn can reduce the burden of chronic disease.

d. Sugary Drinks Distributor Tax Advisory Committee

The Committee shall consist of the following 16 voting members:

Seats 1, 2, and 3 shall be held by representatives of nonprofit organizations that advocate for health equity in communities that are disproportionately impacted by diseases related to the consumption of Sugar-Sweetened Beverages, as defined in Business and Tax Regulations Code Section 552, appointed by the Board of Supervisors.

Seats 4 and 5 shall be held by individuals who are employed at medical institutions in San Francisco and who have experience in the diagnosis or treatment of, or in research or education about, chronic and other diseases linked to the consumption of Sugar-Sweetened Beverages, appointed by the Board of Supervisors.

Seat 6 shall be held by a person who is under 19 years old at the time of appointment and who may be a member of the Youth Commission, nominated by the Youth Commission and appointed by the Board of Supervisors. If the person is under legal voting age and unable to be an elector for that reason, the person may hold this seat, but upon reaching legal voting age, the person shall relinquish the seat unless he or she becomes an elector, in which case the person shall retain the seat.

Seat 7 shall be held by a person appointed by the Director of the Office of Economic and Workforce Development or any successor office.

Seats 8 and 9 shall be held by persons appointed by the Board of Education of the San Francisco Unified School District. If at any time the Board of Education declines to appoint a member to Seat 8 or 9 and leaves the seat vacant for 60 days or longer, the Board of Supervisors may appoint a member of the public to fill the seat until such time as the Board of Education appoints a member.

Seat 10 shall be held by an employee of the Department of Public Health who has experience or expertise in the field of chronic disease prevention or treatment, appointed by the Director of Health.

Seat 11 shall be held by a person with experience or expertise in the field of oral health, appointed by the Director of Health.

Seat 12 shall be held by a person with experience or expertise in the field of food security or access, appointed by the Director of Health.

Seat 13 shall be held by an employee of the Department of Children, Youth & Their Families, appointed by the Director of that Department.

Seat 14 shall be held by an employee of the Recreation and Park Department, appointed by the General Manager of that Department.

Seat 15 shall be held by a parent or guardian of a student enrolled in the San Francisco Unified School District at the time of appointment, nominated by the San Francisco Unified School District's Parent Advisory Council, and appointed by the Board of Supervisors. If at any time the Parent Advisory Council declines to nominate a member to a vacant seat for 60 days or longer, the Board of Supervisors may appoint a member of the public to fill the seat until the seat becomes vacant again.

Seat 16 shall be held by a person with experience or expertise in services and programs for children ages five and under, appointed by the Board of Supervisors.

Sugary Drinks Distributor Tax Advisory Committee

Seat 1	BOS Appointment - Health Equity- Latino/Chicano/Indigena	Vanessa Bohm
Seat 2	BOS Appointment - Health Equity – Asian/Pacific Islander	John Maa
Seat 3	BOS Appointment - Health Equity – Black/African American	Joi Jackson-Morgan
Seat 4	BOS Appointment - Research/Medical Institutions	Roberto Ariel Vargas
Seat 5	BOS Appointment - Research/Medical Institutions	Jonathan Butler
Seat 6	BOS Appointment - Youth Seat	Aaron Kunz, resigned 8/2020; replaced by Kiana S. Keshavarz in 12/2020
Seat 7	Office of Economic and Workforce Development Appointment	Larry McClendon
Seat 8	Board of Education Appointment - San Francisco Unified School District	Saeeda Hafiz
Seat 9	Board of Education Appointment - San Francisco Unified School District	Lauren Heumann, resigned 9/2020; replaced by Jennifer Lebarre in 10/2020
Seat 10	Department of Public Health Appointment - SF Department of Health – Chronic Disease	Rita Nguyen
Seat 11	Department of Public Health Appointment - Oral Health	Irene Hilton
Seat 12	Department of Public Health Appointment - Food Access/Security	Shelley Dyer resigned 8/2020; replaced by Veronica Shepard in 10/2020
Seat 13	Department of Children Youth and Their Families Appointment	Michelle Kim
Seat 14	Recreation and Parks Department - Appointment	Linda Barnard
Seat 15	BOS Appointment - SFUSD Parent Advisory Council	Janna N. Cordeiro
Seat 16	BOS Appointment - Children 0-5 Years Old	Derik Aoki

e. Sugary Drinks Distributor Tax Revenue & Revenue Projections

The City and County of San Francisco operates on a July-June fiscal year (FY). Each year the Mayor and Board of Supervisors pass a rolling, two-year budget, with the second year becoming the first year of the next budget cycle; similarly, the Committee makes rolling, two-year recommendations.

SDDT Revenues

The Treasurer and Tax Collector collects the revenue and the Controller’s office reports the revenues as indicated in the “Actual” column below (to track revenues go to www.sfdph.org/sddtac). The Controller’s office also projects expected revenue, shown in the “Projected” column in the table below.

Tax collection began January 1, 2018. Between January 2018 – February 23, 2020 a total of \$42,415,548 has been collected.

SDDT Revenue	Projected	Actual
FY 2017- 2018 Actual figure represents 6 months, Jan. 2018-June 2018	\$8,000,000	\$7,911,731
FY 2018-2019 represents updated figure from 2019 Annual Report	\$16,000,000	\$16,097,908
FY 2019 – 2020	\$16,000,000	\$13,181,608
FY 2020- 2021 *This figure represents 8 months: Jul 2020–Feb 2021	\$16,000,000	\$5,224,301*
FY 2021 – 2022	\$12,200,000	-
FY 2022-2023	\$14,000,000	-
FY2023-2024	\$15,000,000	-
TOTAL		\$42,415,548

The amount available to the SDDTAC to recommend is determined after voter-mandated set asides (about 22%), additionally, the Board of Supervisors appropriated \$1.2 million of the \$11.6 million in ongoing “Healthy Addbacks” during the FY 17-18 budget process.

In January 2021, the Controller’s Office projected that the SDDTAC should make recommendations for \$9,500,000 in FY2021-22 and \$10,900,000 in FY2022-23.

II. Sugary Drinks Distributor Tax Advisory Committee Recommendations

a. SDDT Advisory Committee Process

The Committee meets monthly with the Department of Public Health (DPH) serving as backbone staff. In addition to the full monthly Committee meetings, many Committee members participated in one or two subcommittees. The three subcommittees continued their work from the previous year: Data and Evidence, Community Input, and Infrastructure. Each subcommittee gathered input from experts, stakeholders, community groups, and sugary drink tax advisors from other cities. The full Committee also heard community input at meetings and each subcommittee was encouraged to incorporate public feedback in its recommendations. The Committee's recommendations were informed by scientific data and evidence; community input via community focus groups, as well as learnings from other jurisdictions that have implemented similar taxes.

The Co-Chairs also conducted meetings with the Mayor's office to describe the process for developing recommendations and to describe the Committee's strategies in more depth. Additionally, they participated along with backbone staff in national conference calls with representatives of other jurisdictions that have passed sugary drink taxes. For the past year, the Committee's co-chairs represented San Francisco in a national initiative, convened by our partners at [Healthy Food America](#), to meet with members of soda tax advisories from across the US monthly. This enabled further collaborative learning and an opportunity to design how our soda tax efforts could do better toward creating healthier communities for low-income and populations of color, who are hardest hit by soda industry marketing and the health impacts of their products.

The Committee is tasked with making two-year budget recommendations to coincide with the City's two-year budget cycle every year. The Committee expects new information will emerge during the course from funded organizations, ongoing community input, new data and evidence, etc. that will inform potential changes to its second year budget recommendations. For example, this year the Committee is making recommendations for expenditures in FY21-22 and FY22-23. The Committee will re-evaluate its FY21-22 recommendations at the end of 2021 and may make changes, if deemed appropriate, for its final FY22-23 recommendations in early 2022.

Given the Committee's legislative mandate to evaluate the impact of the SDDT and Mayor London Breed's commitment to accountability ("Make every dollar count") of public dollars, the Committee continues to recommend that revenue generated from the SDDT be indicated in such a way that City Departments know that they have received funding that was generated from SDDT revenue. Such notation makes it possible for the committee to fulfill its legislative mandate with respect to documenting the impact the SDDT is having in San Francisco.

The Committee voted on February 17, 2021 to make the funding recommendations for FY2021-22 and FY2022-23 as described in the recommendations section.

Subcommittee Reports

Data and Evidence Subcommittee

The mission of the Data and Evidence Subcommittee is to review, analyze and share research within the context of our San Francisco communities to help inform and support the work of the Sugary Drinks Distributor Tax Advisory Committee (SDDTAC).

The duties of the subcommittee are to:

- Collect and review research and data that would be helpful to the work of the committee;
- Help inform and support efforts to analyze the impact of the SDDT on sugary drink pricing, public health, and consumer purchasing behavior; and
- Help inform efforts to evaluate programs and work funded by SDDT.

The following members of the SDDTAC were active members of the Data and Evidence Subcommittee during the development of this report:

Jonathan Butler, (Seat 5: research/medical institution), SDDTAC Co-Chair
Joi Jackson-Morgan, (Seat 3: Health equity Black/African American), SDDTAC Co-Chair
Roberto Vargas, (Seat 4: research/medical institution), SDDTAC member
Saeeda Hafiz, (Seat 8: San Francisco Unified School District) Data and Evidence Committee Chair
Irene Hilton, (Seat 11: DPH oral health) SDDTAC member

The Data and Evidence Subcommittee met monthly with a total of nine meetings between March 2020 – February 2021:

March 11, 2020	August 14, 2019	December 9, 2020
June 10, 2020	September 9, 2020	January 13, 2021
July 8, 2020	October 14, 2020	February 10, 2021

The Data and Evidence Subcommittee accomplishments include:

1. Voted on a new subcommittee chair
2. Updated a work plan that identifies subcommittee tasks in alignment with the goals of the SDDTAC.
3. Provided a list of guest speakers to co-chairs for SDDTAC presentations.
4. Invited speaker to present on relevant research to the SDDTAC.
5. Provided critical feedback SDDT Evaluation Review – Raimi & Associates shared logic model: goals, strategies, outcomes, impact and metrics regarding the evaluation plan.
6. Approved Harder and Co. on evaluation report.
7. Created a grid on cross-sectional priorities between the SDDTAC work and Our Children and Our Families (led by subcommittee member, Saeeda Hafiz)
8. Voted to approve the data report.
9. Reviewed evaluation plans, needs, and funding.
10. Reviewed and discussed SDDTAC strategic plan.
11. D&E discussed focusing on COVID 19 expanding SDDT to go beyond emergency food, especially since COVID may be here for some time. Possibly shift priorities to COVID response with the same identified communities that suffer from diet-related health

disparities. These communities are still being disproportionately burdened.

12. Responded to full committee request for reviewing data and evidence on pipeline pathway development for young people into health career pathways, hearing from local experts and reviewing literature on the subject to make recommendations on SDDTAC support for health career pathways
13. The Data and Evidence committee supports local economic development and states that it is okay to broaden funded activities and what and how investments are being made for now. This enables further collaborative learning and an opportunity to design how our soda tax efforts could do better toward creating healthier communities for low-income and populations of color, who are hardest hit by COVID and soda industry marketing and the health impacts of their products.
14. Reviewed and commented on SDDT FY 20-21 & FY 21-22 & FY 22-23 budget and made recommendations for the SDDTAC
15. Members agreed for FY 21-22, \$630K to be allocated with recommended percentages per FY 20-21 for Community Based Organizations and RDP priority populations with more detail. 8% allocation to RPD.

Subcommittee members who presented on research topics related to the SDDTAC's work:

On Dec 9, 2020— Joi Jackson Morgan & Jonathan Butler (Health Career Pathways Evaluation Grid)

Forthcoming presentations:

To include factors of stress and trauma having a direct relationship to chronic disease and diet-related diseases

Future Considerations for the Data & Evidence Subcommittee:

The Committee has requested the data and evidence subcommittee to research and provide recommended strategy for mental health, health career pathways and public health education (including COVID guidelines) and to propose percentage of investments as a committee.

Subcommittee requests revisiting “Priority communities are those that experience disproportionate burden of diet-related chronic diseases and those targeted by the soda industry, these same communities are also disproportionately impacted by COVID, and we understand that diet-related chronic disease is a risk factor for illness and death for COVID”

In addition, the Data and Evidence Subcommittee will continue to update research/evidence database with respect to the economic impact of the sugar

sweetened beverage tax, racism and health disparities research, mental health, social determinants of health and the impact of COVID 19 on priority populations.

The Data and Evidence Subcommittee remains committed to helping inform the Committee recommendations guided by data and evidence, relying on DPH staff for latest data and relying on the network of scientific community for the latest evidence in the context of community through the remaining time of the SDDTAC on behalf of all the residents of the City and County of San Francisco.

Community Input Subcommittee

The mission of the Community Input Subcommittee is to ensure that meaningful community engagement opportunities are fully integrated throughout the work of the Committee, so that impacted populations can inform the decisions of the full committee. This subcommittee recognizes the disproportionate health burdens felt by communities of color and low-income communities and the need to have members of these communities actively participate in shaping funding recommendations for strategies, approaches and services that contribute to decreasing the consumption of sugary drinks for those most impacted, as well as all San Franciscans. This subcommittee also recognizes the necessity for the Committee to create mechanisms by which information about the recommendation process and the implementation of the SDDT can be communicated to members of the public, including disproportionately impacted communities. With this as our guiding perspective, the Community Input Subcommittee worked in partnership with the Department of Public Health (DPH), who provided backbone staffing for the Committee, to support and give feedback related to community engagement and outreach efforts.

The duties of this subcommittee are to:

1. Evaluate the funding process and extent to which the intent of the original recommendations are implemented through community input;
2. Make recommendations to full committee for any needed improvements to next round of recommendations/funding process based on community input;
3. Advocate for SDDT funded organizations to get the support they need; as well those who may need support responding to calls for proposals;
4. Solicit input from the community about SDDTAC recommendations and related processes;
5. Advocate for community engagement activities such as Town Hall meetings, be present at such events, and report back to the committee;
6. Recommend the addition of public engagement component be a part of the funding process;
7. In collaboration with the Infrastructure Subcommittee, develop a process for some funded organizations to report out to the Committee and the public what they have done or what they intend to do; and
8. Oversee strategic outreach to communities.

The following members of the Committee were active members of the Community Input Subcommittee during the development of this report:

Vanessa Bohm, (Seat 1: Health equity – Latino/Chicano/Indigena), Community Input Subcommittee Chair
John Maa, (Seat 2: Health equity - Asian/Pacific Islander)
Joi Jackson-Morgan, (Seat 3: Health equity - Black/African American), SDDTAC Co-Chair
Aaron Kunz, (Seat 6: Youth Seat)
Kiana Sezawar Keshavarz, (Seat 6: Youth Seat)
Lauren Heumann, (Seat 9: San Francisco Unified School District)
Jennifer Lebarre, (Seat 9: San Francisco Unified School District)
Shelley Dyer, (Seat 12: DPH food access/food security)
Veronica Shepard, (Seat 12: DPH food access/food security)
Janna Cordeiro, (Seat 15: SFUSD Parent Advisory Council)

All members of the subcommittee have extensive work experience with diverse communities disproportionately impacted by the consumption of sugary drinks and have expert knowledge on important issues and concerns affecting these communities. As a result, subcommittee members are well positioned to inform recommendations for community engagement and outreach efforts.

The Community Input Subcommittee has met 9 times between March 2020 – February 2021:

March 4, 2020
June 3, 2020
August 5, 2020
September 2, 2020
October 13, 2020
November 10, 2020
December 8, 2020
January 12, 2021
February 9, 2021

Each meeting was approximately two hours in length. Agenda items included:

- (1) developing recommendations to the full committee on utilization of this year’s funds for community engagement;
- (2) recommending a process change to the full committee to ensure members of the public can fully participate in public comment opportunities;
- (3) Developing an accountability tracker and framework for the full committee to identify how each member is gathering input and reporting back to communities they represent;
- (4) providing input to Raimi & Associates for the strategic plan and evaluation reporting;
- (5) participating in the idea generation and feedback to Civic Edge for the design of the media campaign;
- (6) participating in the strategic planning process;
- (7) reviewing and discussing FY 21-22 and FY 22-23 funding recommendations; and
- (8) discussing and developing the subcommittee’s report for the Committee’s 2021 Annual Report.

In addition, subcommittee members reported to and gathered community input from various community stakeholders to inform the Committee's work.

2020 Community Input Accomplishments

- Community engagement with members of the Joint Health Equity Coalition
- Discussions on Mayor's final budget allocations
- Feedback and support to Raimi & Associates on evaluation report and strategic plan
- Provided feedback to Raimi & Associates on creation of 1-2 pager summary of evaluation report geared toward community audience
- Feedback on media campaign and soda tax webpage

The committee continued to emphasize the importance of making all our meetings accessible and open to the public and to developing meaningful and creative mechanisms to communicating how SDDT funds are being utilized to support those communities most targeted by the beverage industry.

Considerations for Future Community Input Opportunities

The Community Input Subcommittee continues to be committed to ensuring the bidirectional flow of information between communities most impacted by the harms of sugary drinks and SDDTAC. Our work for 2021-2022 includes the following:

- Youth Seat Amendment Process
- Process for seating members and revisiting the process, specifically on the committee imbalance of power of city appointed seats and community seats
- Continue SDDTAC accountability tracker
- Continued efforts to ensure community engagement
- Continued discussions on emergency expenditures for emergency food funding

Infrastructure Subcommittee

The mission of the Infrastructure Subcommittee is to ensure needed staffing and resources are in place to support the functioning, administrative, and evaluation needs of the Committee and Subcommittees.

The duties of this subcommittee are to:

1. Provide recommendations regarding the infrastructure resources needed to support implementation of the SDDT which includes infrastructure to:
 - a. Provide administrative and operational support to the Committee and its Subcommittees
 - b. Support coordination across City departments and funded agencies.
 - c. Ensure community engagement so that Committee recommendations are developed and implemented in partnership with community
 - d. Track the economic impact of the tax on small businesses and larger corporations
 - e. Support evaluation of funded City agencies and programs
 - f. Support the creation of an annual report
 - g. Support CBOs and FBOs to respond to City RFPs related to SDDT funds

- h. Help merchants comply with the tax
2. Ensure the full Committee is updated regularly on the progress of implementation and has opportunities to provide input as needed
3. Provide guidance/recommendations in the Committee’s media relationships/communications, ensuring alignment and consistency of messaging
4. Provide regional representation with other cities with sugary beverage taxes, regularly reporting back to Subcommittee and full Committee
5. Contextualize the work of the Committee within City Department systems and processes

The following members of the Committee were active members of the Infrastructure Subcommittee during the development of this report:

Michelle Kim (Seat 13 - Department of Children, Youth & Their Families), chair of Infrastructure Subcommittee
 Rita Nguyen (Seat 10 - Department of Public Health, Chronic Disease) – excused absence due to activation for COVID-19 related work
 Derik Aoki (Seat 16, Children 0-5 Years Old)
 Linda Barnard (Seat 14, Recreation and Parks Department)
 Larry McClendon (Seat 7, Office of Economic and Workforce Development)

Since the release of the last year’s annual report, the subcommittee met monthly between March 2020-February 2021 for approximately 2 hours each. Some meetings were cancelled due meeting conflicts or quorum not established.

March 3, 2020
 April 7, 2020
 May 2020 - cancelled
 June 2, 2020 – cancelled – quorum not established
 July 7, 2020
 August 7, 2020
 September 1, 2020
 October 2020 - cancelled
 November 3, 2020
 December 1, 2020
 January 5, 2021
 February 2, 2021

Topics for these meetings consist of the following:

- (1) reviewed and edited an accountability framework to document the level of community engagement of each infrastructure subcommittee members and SDDTAC representative based on the interests of their constituencies for current Infrastructure subcommittee members and encourage other subcommittees to update as necessary
- (2) reviewed BOS and Mayor’s Office SDDT Budget Recommendations for FY20-21
- (3) discuss the emerging needs resulting from the COVID-19 pandemic such as
 - food insecurity – reviewed and discussed the service gap analysis from the COVID Command Center

- support for small business – reviewed BOS economic mitigation report
- violence prevention – discussed strategies to alleviate tensions in community and domestic violence in public housing as a result of COVID-19 and the shelter in place restrictions
- mental health – discussion of a new priority area as a result of COVID-19 needs and its impact on mental health

(4) the Infrastructure Subcommittee has also dedicated time to prepare for the March 2021 report by reviewing FY 21-22 and FY 22-23 funding recommendations.

In addition, Subcommittee members have spent additional time outside of the Infrastructure Subcommittee to check-in with DPH regarding infrastructure needs, participate in regional media campaign meetings with other cities with sugary drink taxes, provided input in the strategic planning process, and provide input on branding and a media campaign geared toward retailers.

Future Considerations for Infrastructure Subcommittee

In general, existing data sources for 1) beverage prices, 2) consumer purchasing behavior, and 3) public health (particularly diet-sensitive chronic disease which the Committee is particularly interested in given the impact of sugary beverages on these conditions) are not robust. It can be difficult to recognize changes in nutrition, food security, physical activity, and diet-sensitive chronic disease. Thus the Committee has made recommendations to support data and evaluation infrastructure to better understand the impact of the SDDT especially on the communities most affected by the impact of sugary beverages. In addition, infrastructure subcommittee will ensure the completed versions of strategic plan is incorporated in future work plans. The Infrastructure Subcommittee will continue to explore a process or a policy around how the SDDTAC Committee can address emerging needs, such as the COVID-19 pandemic.

b. SDDTAC Budget Recommendations FY2021-22 and 2021-22

SDDTAC recommends investing in strategies that support mental health and wellbeing and workforce pathways for impacted/priority populations.

Budget descriptions follow

SDDTAC BUDGET RECOMMENDATIONS	FY 2021-22	%	FY 2022-23	%	Department
COMMUNITY BASED GRANTS					
Health education, food security, physical activity	\$3,500,000	36.84%	\$3,500,000	32.11%	DPH/CHEP
CBOs working with SFUSD	\$300,000	31.6%	\$300,000	2.75%	DPH/CHEP
TOTAL COMMUNITY BASED GRANTS	\$3,800,000	40%	\$3,800,000	34.86%	
SFUSD					
School Food, Nutrition Ed	\$1,000,000	10.53%	\$1,000,000	9.17%	SFUSD via DCYF
Student Led Action	\$500,000	5.26%	\$500,000	4.59%	SFUSD via DCYF
Educational Investments	-	0%	\$150,000	1.38%	SFUSD via DCYF
TOTAL SFUSD	\$1,500,000	15.79%	\$1,650,000	15.14%	
FOOD ACCESS					
Healthy Food Purchasing Supplement	\$1,200,000	12.63%	\$1,500,000	13.76%	DPH/PHD
Healthy Retail	\$150,000	1.58%	\$150,000	1.38%	OEWD
TOTAL FOOD ACCESS	\$1,250,000	14.21%	\$1,650,000	15.14%	

continued next page

SDDTAC BUDGET RECOMMENDATIONS	FY 2021-22	%	FY 2022-23	%	Department
ORAL HEALTH					
Community task forces	\$450,000	4.74%	\$450,000	4.13%	DPH/MCAH
School-based sealant application	\$350,000	3.68%	\$350,000	3.21%	DPH/SF Health Network
School-based education and case management	\$200,000	2.11%	\$200,000	1.83%	SFUSD via DCYF
TOTAL ORAL HEALTH	\$1,000,000	10.53%	\$1,000,000	9.17%	
WATER ACCESS					
Water Access - SFUSD	-	-	\$400,000	3.67%	SFUSD via DCYF
Water Access - Public Spaces	\$95,000	1.0%	-	-	PUC via RPD
TOTAL WATER ACCESS	\$95,000	1.0%	\$400,000	3.67%	
RECREATION AND PARKS					
Peace Parks	-	-	\$650,000	5.96%	RPD
SVIP Funding – Peace Parks Transportation	-	-	\$225,000	2.06%	RPD
REQUITY: Outreach, scholarships, equity in recreation	-	-	\$900,000	8.26%	RPD
TOTAL SF RECREATION & PARKS	\$780,000	8.21%	\$1,775,000	16.28%	
BREASTFEEDING	\$175,000	1.84%	\$175,000	1.61%	DPH/MCAH
INFRASTRUCTURE	\$800,000	8.42%	\$450,000	4.13%	DPH/CHEP
Total Proposed	\$9,500,000	100%	\$10,900,000		

budget descriptions follow on next pages

SDDTAC BUDGET DESCRIPTIONS

SDDTAC recommends investing in strategies that support mental health and wellbeing and workforce pathways for impacted/priority populations.

COMMUNITY-BASED GRANTS

COMMUNITY-BASED GRANTS	<p>City Departments should contract directly with CBOs through an RFP process managed through the Community Health Equity and Promotion (CHEP) Branch of the Department of Public Health. CBG should support community-based programs and services that address the health inequities of those most targeted by the beverage industry. Funding should go to Community Based Organizations (CBOs) and Faith Based Organizations (FBOs) for the following strategies:</p> <ol style="list-style-type: none"> 1. Health Education activities including, chronic disease prevention, healthy eating and active living, tap water promotion, oral/dental health 2. Physical Activity opportunities, including: a) Dance and movement, sports, yoga, walking groups, biking, etc.; b) Efforts to influence changes to the built environment (i.e. sidewalks, streets, parks, buildings, etc) or safety of the built environment that facilitates increased physical activity and walking and biking for utilitarian trips, sometimes referred to as active transportation); and c) pursuit of institutional or local policies that facilitate physical activity and active transportation (such as adequate PE time and instructors, commuter benefits for active transportation, etc) 3. Healthy Eating/Food Security*, including: a) Community-based pantries, community-based hot meals, community kitchens and community home delivery services; b) Increased financial resources (i.e. wages, income, government nutrition supplements, vouchers, etc.); c) Changes to the built environment that facilitate food security; and d) Pursuit of institutional or local policies that facilitate food security. 4. Water Promotion, such as support for Spa Water Supplies, station maintenance/beautification, refillable water bottles to distribute to communities, water testing 5. Community Based Participatory Research
<p>Health education, food security, physical activity</p>	
<p>CBOs working with SFUSD</p>	<p>7% of all CBO funding (e.g. 7% of approximately \$4.3 million) should go towards CBOs implementing programs/initiatives that take place in school settings. Funding to issue grants to CBOs should follow the guidelines above.</p>
<p>SFUSD</p>	
<p>School Food, Nutrition Ed</p>	<p>To improve the quality and appeal of school meals and support nutrition education to increase participation in school meal programs (for example: cooking and serving equipment, staff professional development, and innovative procurement and menu strategies to increase freshly prepared food). Funding will target schools with the largest populations of high-risk students that are disproportionately targeted by the sugary drinks industry.</p>
<p>Student Led Action</p>	<p>Support student led efforts to decrease consumption of sugary drinks and increase awareness of sugary drinks consumption among students, with focus on schools with the largest populations of high-risk students that are disproportionately targeted by the sugary drinks industry. SFUSD should provide to SDDTAC a proposal of how funding will be spent through student led action. Funding is provided for staff leadership, student and adult stipends and supplies.</p>

Educational Investments	Educational investments that support and strive for professional development in health and wellness across lifespan. Scholarships and other supports in higher education in medical technology and health field careers for Priority Populations and including para professionals.
FOOD ACCESS	
Healthy Food Purchasing Supplement*	Support programs that increase financial resources to purchase healthy food such as vouchers and food purchasing incentives. This investment is meant to support both the communities most impacted by the health consequences of sugary beverage consumption and to support the local economy including local merchants. These funds should be RFP'd out to CBOs and FBOs according to the Community Based Grants guidelines.
Healthy Retail	Supporting small business to increase healthy food access in high risk and impacted communities and neighborhoods by: 1) supporting business operations; 2) promoting community engagement; and 3) improving the retail environment.
ORAL HEALTH	
Community task forces	Support development of community infrastructure such as oral health community task forces that incorporate diverse stakeholders for outreach, education, and interventions to address the oral health needs of children in high risk populations.
School-based sealant application	Support school-based and school-linked preventive oral health programs within SFUSD schools serving high risk target populations. This should also support SFUSD dedicated oral health staffing.
School-based education & case mgmt	
WATER ACCESS	
Water Access - SFUSD	SFUSD water station installation. Also, invest in signage and art to 3 stations to pilot evidence-based community informed model for what designs should be and water education. Allows for comparison of usage between pilot stations with artwork/education and those without
Water Access - Public Spaces	Public water station installation. Also, invest in signage and art to 3 stations to pilot evidence-based community informed model for what designs should be and water education. Allows for comparison of usage between pilot stations with artwork/education and those without
SF RECREATION & PARKS	
Peace Parks	Peace Parks programming to serve Priority Populations
SVIP: Peace Parks Transportation	Transportation for Peace Parks participants
REQUITY: Outreach, Scholarships, recreation equity	Scholarships and programming for priority populations

<p>BREAST-FEEDING</p>	<p>To fund a breastfeeding coalition to organize collective efforts across San Francisco to enable increased breastfeeding among Priority Populations. This coalition will mobilize action on policy, systems, and environmental (PSE) changes to increase breastfeeding rates and duration, leveraging community strengths and tackling structural barriers to reduce inequities to breastfeeding support. This would include funding for backbone support to: engage community stakeholders in a strategic planning and engagement process to develop a framework for short and long term goals embedded in principles of equity; help align breastfeeding support services in San Francisco including hospital, outpatient, and community based services to improve access to breastfeeding support; and provide technical assistance to partnering agencies (such as child care centers and businesses with less than 50 employees) to operationalize and implement breastfeeding friendly policies and practices.</p>
<p>DPH INFRASTRUCTURE</p>	<p>A. Personnel: 1) Backbone staffing to support SDDTAC a. A program manager to provide backbone staffing to the SDDTAC, including: i) Staffing full committee and 3 subcommittees in compliance with Sunshine and Brown Acts; ii) Coordinating among city agencies and funded CBOs to promote collective impact; iii) Help guide vision and strategy of SDDTAC, support aligned activities; manage SDDTAC work and timeline; and iv) Work with evaluation team to establish shared measurement practices b. Manage citywide/soda tax impact media c. Manage development/production of SDDTAC Annual Report d. Manage SDDTAC nominations process. 2) Staffing to support DPH SDDT implementation of community-based grants a. Manage work of contractors, including: i) develop and implement CBO RFP process; ii) provide technical assistance for CBOs and merchants; iii) promote collective impact in coordination with SDDTAC backbone staff and City Agencies; and iv) work with evaluator and SDDTAC backbone staff to develop and implement evaluation plan and evaluation technical assistance. 3) Staffing to support research/evaluation of SDDT impact, including data purchases. a. At least 1.0 FTE epidemiologist; b. Support data analysis for annual report; c. Manage data purchases; d. participate in development and implementation of SDDT evaluation.</p> <p>B. Professional services: i) technical assistance for funded CBO and FBO; ii) implement evaluation framework; evaluate SDDT funded organizations, process evaluation of RFP, and provide evaluation technical assistance; iii) city attorney: ongoing technical consultation</p> <p>C. Materials/Supplies for meetings and printing costs.</p> <p>D. Training to support staff development</p> <p>E. Data for collection (pricing), analysis (Nielsen) and purchase (IRI)</p>

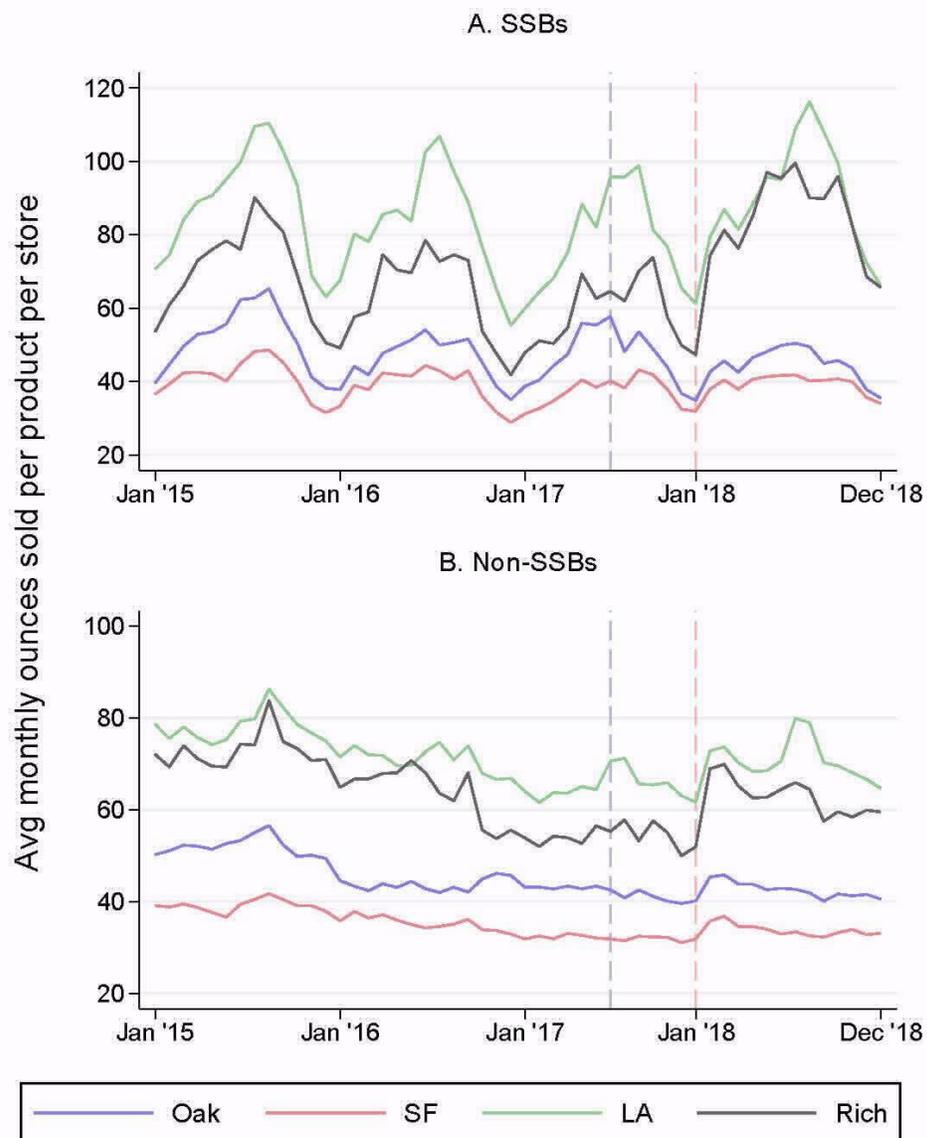
* Funding should support programs and services that increase financial resources to purchase healthy food; access to healthy fruits and vegetables while minimizing processed foods for high-risk communities; foods that are affordable and convenient; and programs that support the consumption of healthy foods including the ability to prepare and store meals and the knowledge of basic nutrition, food safety and cooking. Priority programs should incorporate a community-based food security perspective and have demonstrated increased ability of food insecure residents to purchase, access, and consume consumption of healthy, fresh, low-to-no cost and culturally appropriate foods, including but not limited to food vouchers/ incentives, transportation and delivery and prepared foods.

III. IMPACT ON BEVERAGE PRICES & CONSUMER PURCHASING BEHAVIOR & PUBLIC HEALTH

The San Francisco Department of Public Health partners with the Bay Area EVIDENCE Team from University of California San Francisco, University of California Berkeley and Stanford University to collect and gather data on Bay Area sugar sweetened beverage sales. The SFDPH COVID-19 response required that our epidemiologists were focused on addressing the pandemic. Justin White, a member of the EVIDENCE team at UCSF, generously provided these preliminary data on beverage retail sales in the Bay Area.

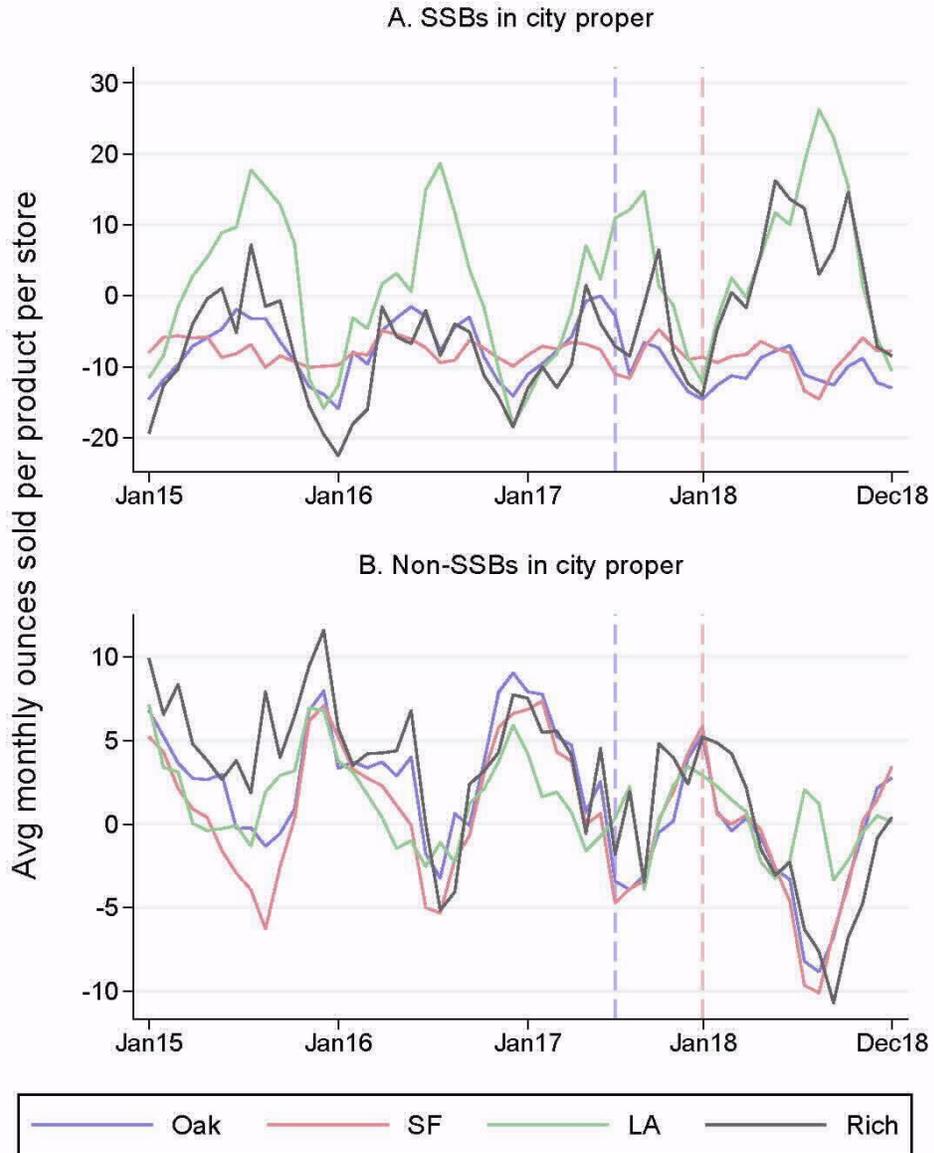
A. Analyses of the Effects of Sugar-Sweetened Beverage Taxes on Beverage Retail Sales

Figure 1. Average monthly ounces of SSBs and non-SSBs sold per product per store



Note: This figure shows IRI data of the average monthly ounces of SSBs and non-SSBs sold per product (UPC) per store from 2015 through 2018, restricted to stores found within the city proper of each metro area. The time trend for SSBs is shown in Panel A. The time trend for non-SSBs is shown in Panel B. Oakland's SSB tax went into effect in July 2017, indicated by the dotted blue line. San Francisco's SSB tax went into effect in January 2018, indicated by the dotted red line.

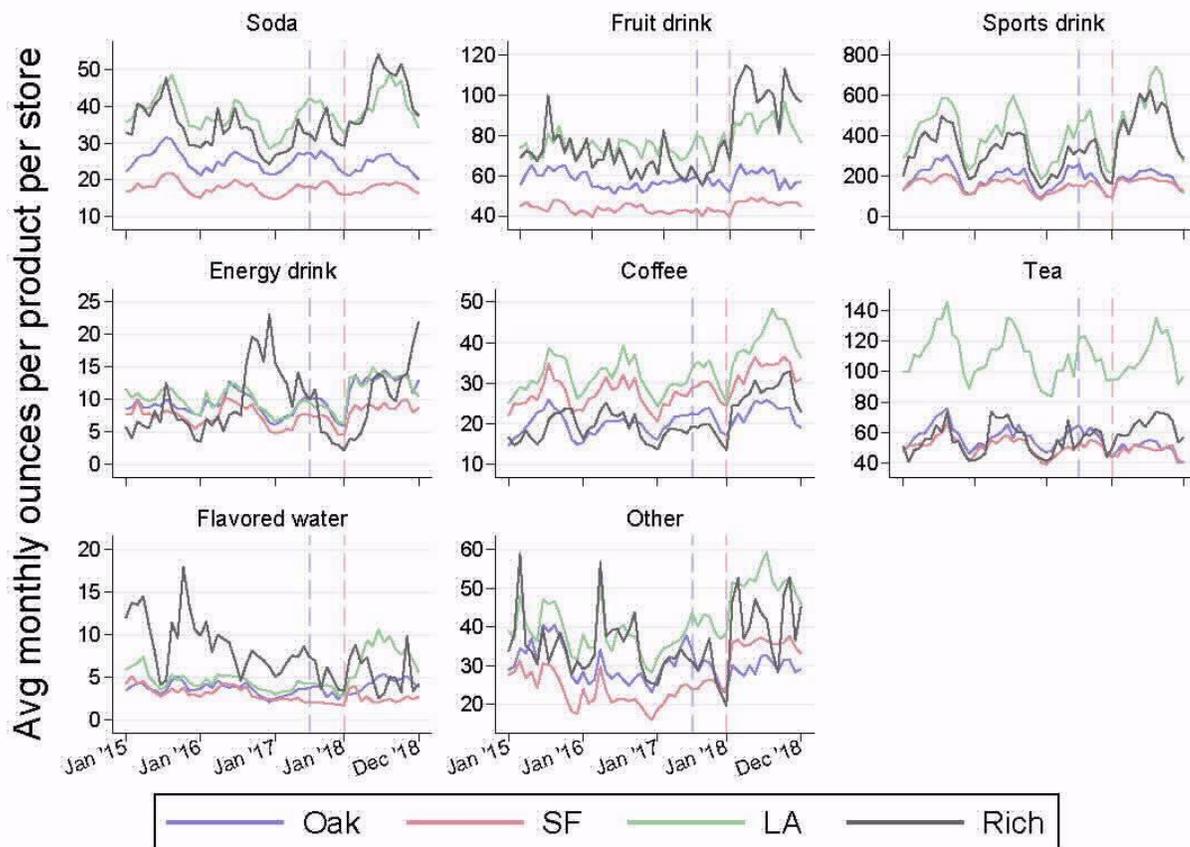
Figure 2. Average monthly ounces of SSBs and non-SSBs sold per product per store
 (Partialling out indicator variables [i.e., fixed effects] for product [UPC], store, and month)



Note: This figure shows IRI data of the residualized average monthly ounces of SSBs and non-SSBs sold per product (UPC) per store from 2015 through 2018, after partialling out indicator variables (i.e., fixed effects) for product (UPC), store, and month. (adjusted for any changes in the composition of products and stores over time).

The time trend for SSBs is shown in Panel A. The time trend for non-SSBs is shown in Panel B. Oakland’s SSB tax went into effect in July 2017, indicated by the dotted blue line. San Francisco’s SSB tax went into effect in January 2018, indicated by the dotted red line.

Figure 3. Average monthly ounces of SSBs sold per product per store, by beverage category



Note: This figure shows IRI data by beverage category of the average monthly ounces of SSBs sold per product (UPC) per store from 2015 through 2018, restricted to stores found within the city proper of each metro area. Oakland’s SSB tax went into effect in July 2017, indicated by the dotted blue line. San Francisco’s SSB tax went into effect in January 2018, indicated by the dotted red line.

Table 1. Number of stores, 2015-2018

	City proper	Buffer area	Total
Panel A. Number of stores			
Oakland	42	71	113
San Francisco	123	20	143
Los Angeles	228	69	297
Richmond	9	24	33
Total	402	184	586

Notes: Observations are at the store x month x beverage category x SSB status level.

B. Public Health Data Fall 2019 Data Report

Because the SDDT epidemiologist was activated as a disaster service worker to support COVID-19 response, the public health data were not updated; public health data changes minimally from year to year, thus, we refer readers to the Fall 2019 Data Report which can be found at www.sfdph.org/sddtac.

IV. IMPACT OF SDDT

A. SDDT Evaluation Report

SF Department of Public Health partnered with Raimi & Associates to conduct the evaluation of SDDT funded city agencies, community-based organizations and initiatives. The impact of the SDDT is captured in the evaluation report which can be found in the appendices.

Additionally, in an effort to support COVID relief efforts the SDDTAC voted on March 18, 2020 to direct unused funds from FY 2019-2020 to support food security and food distribution costs for the most vulnerable populations in the city and county of San Francisco. The SDDTAC recommended that \$1.65 million be allocated to increase food security for SDDT priority populations, especially seniors, children, pregnant women within minority communities. The table below notes the organizations receiving the funds and the populations for which they were directed to address food insecurity.

SDDT Emergency Food Security Funds for Vulnerable Communities Impacted by COVID-19

Vulnerable Community	Organization	Amount
Pregnant women low-income families	San Francisco Department of Public Health (SFDPH) Maternal Childhood and Adolescent Health Division	\$200,000
Undocumented Families	LatinX Task Force	\$200,000
Children and Families	San Francisco Unified School District (SFUSD)	\$300,000
Public housing sites	SF Housing Authority	\$300,000
Low-income families, Seniors	SF African American Faith Based Coalition	\$200,000
Low-income families	Farming Hope	\$30,000
Bayview Hunters Point families and seniors	BVHP Advocates	\$20,000
All populations	SF Produce Market	\$400,000
Total		1,650,000

V. Appendices

A	SDDT Funded Initiatives
B	SDDT FY 19-20 Evaluation Report
C	ARTICLE 8: Sugary Drinks Distributor Tax Ordinance (San Francisco Business and Tax Regulations Code)
D	ARTICLE XXXIII: Sugary Drinks Distributor Tax Advisory Committee (San Francisco Administrative Code)
E	Sugary Drinks Distributor Tax Advisory Committee Bylaws

IV. ENDNOTES

- ⁱ Malik, V.S. (2012, January 31). Sweeteners and Risk of Obesity and Type 2 Diabetes: The Role of Sugar-Sweetened Beverages. *Curr Diab Rep* , 12, 195-203. doi:10.1007/s11892-012-0259-6. Retrieved from <http://link.springer.com/article/10.1007/s11892-012-0259-6>
- ⁱⁱ Wang, J. (2014, April). Consumption of added sugars and development of metabolic syndrome components among a sample of youth at risk of obesity. *Applied Physiology, Nutrition, and Metabolism* , 39(4), 512. doi:10.1111/jhn.12223. Retrieved from <http://www.ncbi.nlm.nih.gov/pubmed/24669994>
- ⁱⁱⁱ Johnson, R.K., Appel, L., Brands, M., Howard, B., Lefevre, M., Lustig, R., Sacks, F., Steffen, L., & Wyllie-Rosett, J. (2009, September 15). Dietary sugars intake and cardiovascular health: a scientific statement from the American Heart Association. *Circulation* , 120(11), 1011-20. doi:10.1161/CIRCULATIONAHA.109.192627. Retrieved from <http://circ.ahajournals.org/content/120/11/1011.full.pdf>
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- ^x Malik, V.S. (2012, January 31). Sweeteners and Risk of Obesity and Type 2 Diabetes: The Role of Sugar-Sweetened Beverages. *Curr Diab Rep* , 12, 195-203. doi:10.1007/s11892-012-0259-6. Retrieved from <http://link.springer.com/article/10.1007/s11892-012-0259-6>
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- ^{xii} Lee M, Falbe J, Schillinger D, Basu S, McCulloch C, Madsen KA. Sugar-Sweetened Beverage Consumption 3 Years After the Berkeley, California, Sugar-Sweetened Beverage Tax. *Am J Pub Health*, epub ahead of print February 21, 2019: e1–e3. doi:10.2105/AJPH.2019.304971

San Francisco Sugary Drinks Distributor Tax (SDDT)

Evaluation Report 2019 - 2020

Prepared by:



raimi+
associates



Letter of Introduction

DECEMBER 2020

DEAR SAN FRANCISCO BOARD OF SUPERVISORS, MAYOR LONDON BREED, AND SAN FRANCISCO RESIDENTS.

Although San Francisco's residents are generally quite healthy, significant health disparities exist and poor health outcomes are concentrated in communities burdened by systemic inequities.

Consistently in the top ten healthiest counties in California, San Francisco ranked sixth in 2020 due to high rates of protective health factors and positive health outcomes¹. This ranking provides a revealing snapshot of how health is shaped by where we live, learn, work, and play. Although San Francisco ranks highly in clinical care, physical environment, and quality of life, it ranks lower in key social and economic factors (e.g., food insecurity).

San Francisco ranks as the fifth most disparate county in California. The RACE COUNTS methodology² analyzes racial disparities at the city and county levels related to health care access, built environment, economic opportunity, democracy/civic participation, education, safety and the criminal justice system, and housing. The methodology then categorizes cities and counties based on their population size, overall "performance" on in a range of issues (e.g., how the median household income or graduation rate for a city compares to data for the entire state), and how extreme racial disparities are. The stark disparities that exist in San Francisco are documented by many data points, including:

- **INCOME:** The median household income for San Francisco's Black/African American families is \$70,000 less than that for White families.
- **POVERTY:** Black/African American San Franciscans are three times as likely to live in poverty compared to White residents (30% in poverty compared to 9%). Given San Francisco's high cost of living, half of

Black/African American San Francisco residents (50%) struggle to make ends meet, and are forced to choose between paying for housing, food, health care, childcare, transportation, and other basic needs.

- **FOOD SECURITY:** Only 53% of Black/African American, 54% of Latinx, 56% of White, and 65% of Asian adults in San Francisco are food secure.
- **FOOD ACCESS:** Low-income Black/African American and Pacific Islander residents are much more likely to live more than 1 mile away from food stores compared to White and Asian residents (2% of Black/African American and Pacific Islanders compared to 0.5% of White residents and 0.3% of Asian residents).

The recession caused by the COVID-19 pandemic has increased food insecurity. According to the Urban Institute's Coronavirus Tracking Survey,³ in May 2020 more than one in six nonelderly adults (18%) and more than one in five parents living with children under 19 (22%) in the United States reported that their households experienced food insecurity during the prior 30 days. Marked racial and ethnic disparities in food insecurity persisted; Latinx and Black/African American adults' household food insecurity rates were 27%, approximately double that of White adults' households (14%).

The COVID-19 crisis shows that one of the deadliest underlying conditions in America is systemic racism.

¹ Robert Wood Johnson Foundation and University of Wisconsin Population Health Institute (2020), County Health Rankings & Roadmaps. www.countyhealthrankings.org/app/california/2020/rankings/san-francisco/county/outcomes/overall/snapshot

² Advancement Project (2017). RACE COUNTS: Advancing Opportunities for All Californians. www.racecounts.org/county/san-francisco/

³ Urban Institute (2020), "More Than One in Six Adults Were Food Insecure Two Months into the COVID-19 Recession." Urban Institute. www.urban.org/research/publication/more-one-six-adults-were-food-insecure-two-months-COVID-19-recession

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To address these systemic inequities and corresponding health disparities, the Sugary Drinks Distributor Tax Advisory Committee (SDDTAC) has focused on equity and structural change—using our values to inform our recommendations about how and what is funded. It is also important to highlight the intentional structure of the Advisory Committee, particularly in valuing and honoring the personal and professional expertise, diversity, and lived experiences of participants. Focusing on WHO is part of the Advisory Committee ensures that our values are front and center in our recommendations for funding.

This evaluation report presents how SDDT funds were used in Fiscal Year 2019/2020 to support healthy people and healthy places within San Francisco specifically by addressing systemic inequities and resulting health disparities. While there is much work left to do, we are proud of our work to-date.



Jonathan Butler
SDDTAC CO-CHAIR



Joi Jackson-Morgan
SDDTAC CO-CHAIR

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Introduction

San Francisco's Sugary Drinks Distributor Tax (SDDT)

In 2016, San Francisco voters took a stand against the soda industry and passed a tax on the distribution of sugar-sweetened beverages, known as the Sugary Drinks Distributor Tax (SDDT) or “soda tax”. Rather than taxing consumers, the tax imposes a one-cent per fluid ounce tax on the distribution of sugar-sweetened beverages, syrups, and powders within the City and County of San Francisco. In addition to the tax, the legislation also established the Sugary Drinks Distributor Tax Advisory Committee (SDDTAC) made up of 16 diverse voting members. The SDDTAC is charged with 1) making recommendations to the Mayor and Board of Supervisors about how to distribute the funds generated by the tax; and 2) evaluating the effectiveness of those programs and agencies that received SDDT funding.

To guide the evaluation, the SDDTAC and San Francisco Department of Public Health (SFDPH) contracted with Raimi + Associates in late 2019 to develop their strategic plan. The SDDTAC Strategic Plan 2020-2025 was developed in

close collaboration with the SDDTAC and staff from the San Francisco Department of Public Health and was completed in August of 2020. The Strategic Plan includes the SDDTAC vision, mission, and values that will guide their work (for more information, please see www.sfdph.org/sddtac). The SDDTAC Strategic Plan also identifies two overarching goals: healthy people and healthy places and articulates eight key strategies that are being implemented to achieve the short-term and long-term outcomes.

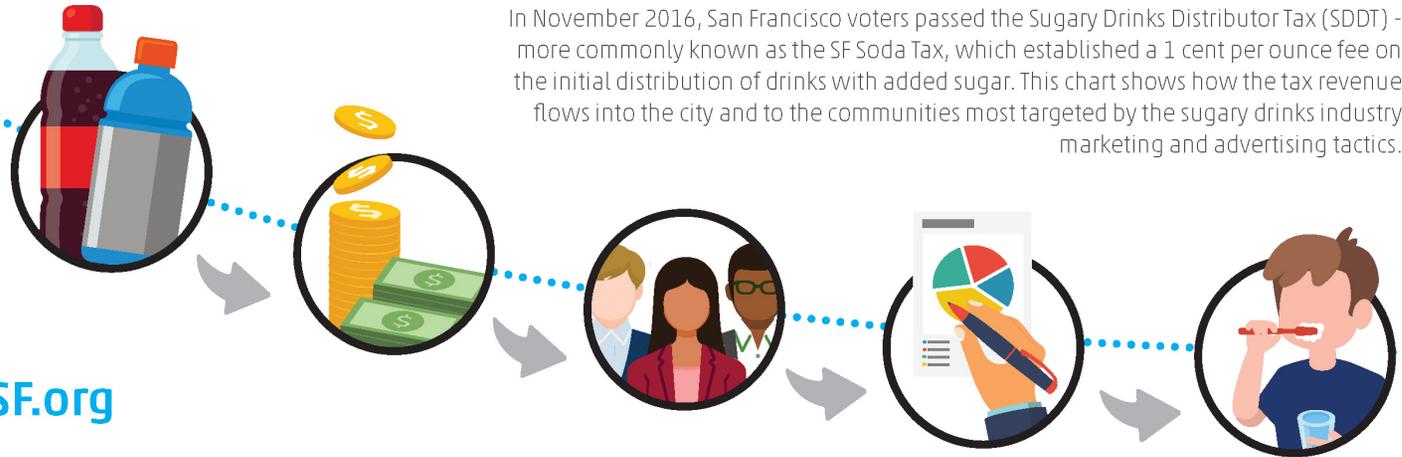




Sugary Drinks Distributor Tax (SDDT): How it Works

In November 2016, San Francisco voters passed the Sugary Drinks Distributor Tax (SDDT) - more commonly known as the SF Soda Tax, which established a 1 cent per ounce fee on the initial distribution of drinks with added sugar. This chart shows how the tax revenue flows into the city and to the communities most targeted by the sugary drinks industry marketing and advertising tactics.

Learn more at
www.SodaTax-SF.org



1. Sugary Drink Distributors are Taxed

The SF Soda Tax is not a sales tax. Distributors are responsible for paying the tax. Merchants may choose to pass the cost of the tax along to consumers.

2. Revenue is Collected

The SF Soda Tax collects about \$15-16 million each year. The revenue goes into the City's General Fund. About 22% is set aside for specific, voter-approved projects. The Tax Advisory Committee makes recommendations to the mayor on how to spend the remaining 78%.

3. Tax Committee Recommends Investments

The Committee talks to community members to learn about how the tax revenue could benefit people, especially low-income people and people of color who are most targeted by the beverage industry's advertising. The Committee then submits their funding recommendations to the Mayor.

4. City Budget Process Finalizes Investments

The Mayor submits a budget proposal to the Board of Supervisors, including recommendations for the SF Soda Tax funds. The Board of Supervisors votes on the budget and the Mayor signs it.

5. SF Soda Tax Funds Programs!

SF Soda Tax funds go to City departments who either implement programs and services directly or issue grants to community-based organizations to fund their important work.



How was SDDT spent?

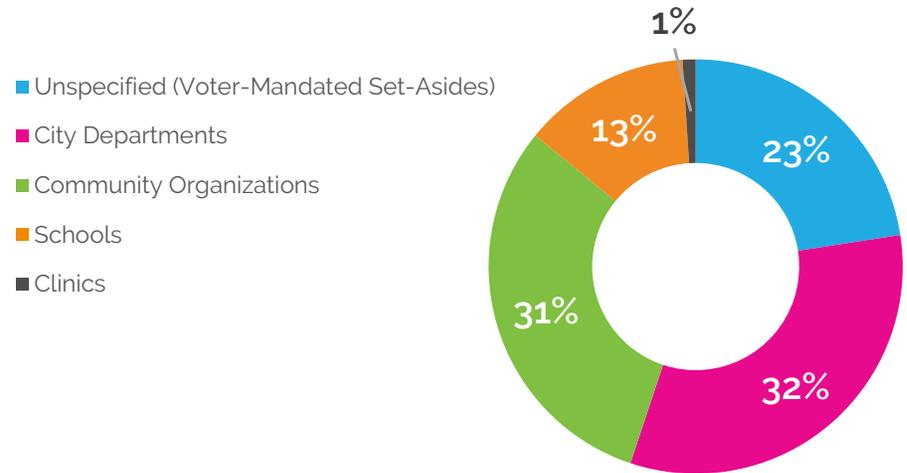
A team of researchers led by UC Berkeley's Kristine Madsen, PhD, categorized San Francisco's Sugary Drinks Distributor Tax budget allocations for fiscal year 2019-2020 as part of a study on how U.S. cities with some type of tax on sugar-sweetened beverages have allocated those tax revenues. Because government agencies often make small adjustments to budgets throughout a fiscal year, budgeted allocations may vary from actual expenditures.

Voter-Mandated Set-Asides

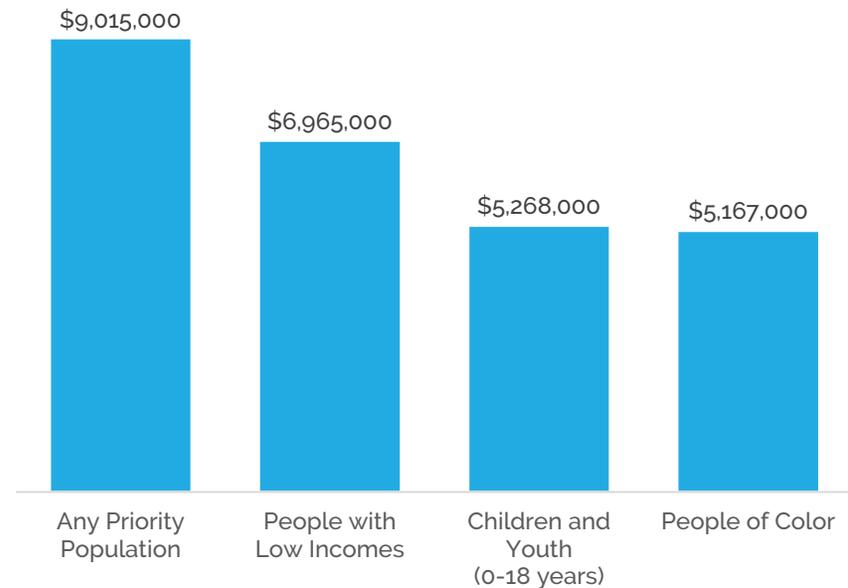
Because the SDDT is a general tax, a portion of revenue contributes to various voter-mandated spending requirements for San Francisco. These are referred to as voter-mandated set-asides and baselines.

Voter-mandated set-asides from many specific taxes are combined into the General Fund and to ensure that baseline funding levels outlined in San Francisco's Charter are met. Baseline funding levels are set for the certain departments and programs, including the Library, Preschool for All, San Francisco Unified School District, specific functions of the Municipal Transportation Agency, Recreation & Parks, Children's Services, Transitional Aged Youth Services, and the Housing Trust Fund.

Types of Organizations Allocated to Receive SDDT FY2019-2020 Revenues



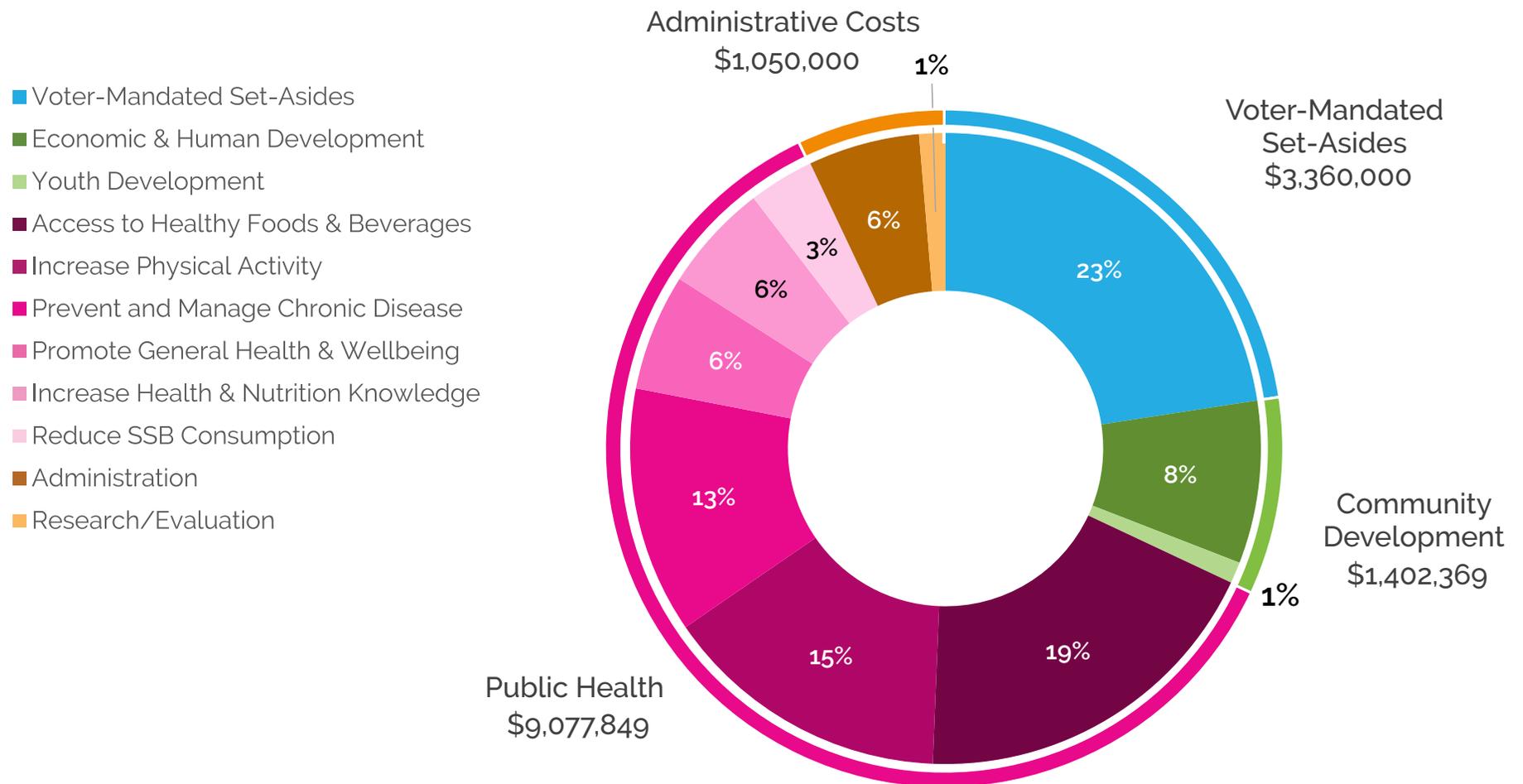
SDDT Fiscal Year 2019-2020 Discretionary Budget Allocations (\$11.53 million) focused on Priority Populations



Priority populations include people with low incomes; residents who identify as Black/African American, Pacific Islander, Native American/indigenous, Latinx, and/or Asian; and children and youth.

In fiscal year 2019-2020, **\$10,480,336** of San Francisco's SDDT revenue was allocated to fund programming, subsidies, and changes to the built environmental and systems that advance health equity — *work and resources that **would not have been funded** if the SDDT tax were not collected.*

SDDT Budget Allocations for Fiscal Year 2019-2020



SDDT Advisory Committee (SDDTAC) Values



Supporting community-led and culturally relevant work.

Community-led work should be led by communities that are disproportionately impacted by marketing for and consumption of sugary beverages from the beverage industry and diet-sensitive chronic diseases (i.e., SDDTAC's priority populations), and culturally relevant work should be responsive to these communities and populations. This can be achieved by investing in priority communities and ensuring funded work is culturally responsive, linguistically relevant, and trauma informed.



Building strong collaborations and partnerships to increase capacity and effectiveness.

Funding should support existing and new community-based partnerships and collaborations that align resources to increase capacity, effectiveness and impact of strategies, programs and services.



Eliminating structural inequities and achieving equity.

Equity (including health equity and racial equity) means that everyone has a fair and just chance to be reach their full potential and be healthy. The root causes of structural inequities and health disparities (e.g., systems of oppression, intentionally and unintentionally/implicitly biased policies, resource allocation) need to be addressed in order to achieve equity. This is done by mitigating health harms and holding the soda industry accountable.



Prioritizing results and long-term impacts.

Funding should support policy, systems, and environmental changes that include programming and go beyond programming, to change the structures in which we work, live, learn, and play. Adopting a Policy, Systems & Environmental (PSE) change approach can help create sustainable, comprehensive measures to improve community health, as well as enrich and expand the reach of current health preventive efforts and engage diverse stakeholders with the goal of improving health.

Overview

In early 2020, the SDDTAC and SFDPH contracted with Raimi + Associates again, this time to conduct the evaluation of SDDT funding allocations. This report presents evaluation findings for the programs and agencies that received SDDT funding for the Fiscal Year 2019/2020. The report is informed by the SDDTAC Strategic Plan and is organized into the following key findings related to each of the goal areas:

1. SDDT funds strengthen community leadership to support Healthy People
2. SDDT funds create Healthy Places by helping mitigate structural, place-based inequities

Priority Populations

Priority populations are members of communities that experience disproportionate levels of diet-related chronic diseases and those targeted by the soda industry. The following populations are distinct and overlapping communities prioritized by the SDDTAC:

- Low-income San Franciscans
- Community members who identify as: Black/African Americans, Pacific Islanders, Native Americans, Latinx, and Asians.
- Children, youth, and young adults 0-24 years old.

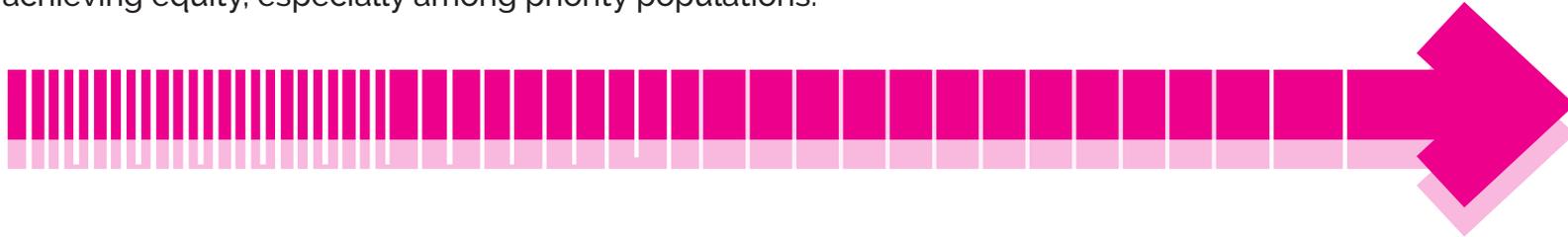
Data Sources

This report presents both quantitative and qualitative evaluation data provided from SDDT funded city agencies and community-based grantees.



Evaluation Logic Model

The SDDT evaluation logic model is presented below. The logic model aligns with the SDDT Advisory Committee's strategic plan and includes the ultimate desired impact of eliminating health disparities and achieving equity, especially among priority populations.



GOALS	STRATEGIES	SHORT-TERM OUTCOMES	LONG-TERM OUTCOMES	DESIRED IMPACT
Healthy People	<ol style="list-style-type: none"> 1) Build community capacity and develop leadership 2) Provide health promoting education, programs, and services 3) Provide job readiness, skills training, and career pathways 4) Expand access to healthy food, water, and oral health 	Improve economic conditions for individual workers and local businesses <ul style="list-style-type: none"> • Increase in economic opportunity and stability 	Improve community + economic outcomes in priority neighborhoods <ul style="list-style-type: none"> • Increase in hiring and economic opportunity 	Eliminate health disparities and achieve equity, especially among priority populations
		Cross-cutting outcomes (smaller scale to larger scale) <ul style="list-style-type: none"> • Increase in food security • Increase in fruit/vegetable consumption 		
Healthy Places	<ol style="list-style-type: none"> 5) Decrease access and availability to sugary beverages 6) Increase opportunities for physical activity 7) Increase economic opportunities in priority neighborhoods 8) Increase healthy messaging related to nutrition 	Improve behavioral outcomes <ul style="list-style-type: none"> • Decrease in sugary drink consumption • Increase in tap water consumption • Increase in breastfeeding • Increase in physical activity 	Improve health outcomes <ul style="list-style-type: none"> • Dental caries • Heart disease • Hypertension • Obesity • Type 2 Diabetes • Stroke • Other diet-related chronic disease 	

Impact & Outcomes



Impact: Eliminate health disparities and achieve equity, especially among priority populations.

Outcomes: *All outcomes will focus on priority populations.*



Community + Economic Outcomes

- Increase in hiring and economic opportunity
- Increase food security



Health Outcomes

- Decrease in diet-related chronic diseases (e.g., dental caries, heart disease, hypertension, obesity, stroke, Type 2 Diabetes)



Behavioral Outcomes

- Decrease in sugary drink consumption
- Increase in tap water consumption
- Increase in fruit/vegetable consumption
- Increase in breastfeeding
- Increase in physical activity

SDDT Funds Strengthen Community Leadership to Support Healthy People

Findings related to SDDTAC Goal 1 to support Healthy People

In Fiscal Year 2019/2020, SDDT supported community-led work related to the following strategies:

SDDT Strategy 1. Build community capacity and develop leadership

SDDT Strategy 2. Provide health promoting education, programs, and services

SDDT Strategy 3. Provide job readiness, skills training and career pathways

SDDT Strategy 8. Increase healthy messaging related to nutrition

SDDT Funding Focused on Supporting Community-Led Work in Fiscal Year 2019/2020

- Three-Year Healthy Communities Grants: \$2,033,125 (budget for year 1) for 11 grantees
- Healthy Communities Capacity Building grants (one-time): \$1,702,211 for 26 grantees
- School-Based Nutrition Education: \$1,000,000
- SFUSD Student-Led Action: \$500,000
- Oral Health Community Task Forces: \$450,000 for 3 task forces
- Social Media Grants: \$100,000 for 10 grantees

Goal 1 Key Findings

- 1.1** SDDT funds focused on engaging populations disproportionately impacted by diet-related chronic disease in SF through culturally relevant programs and services.
- 1.2** SDDT funding boosted the leadership of impacted community members through skills building opportunities, participant stipends, and career pathways.
- 1.3** SDDT funds supported culturally relevant health promotion messaging and education.

Finding 1.1. SDDT funding focused on engaging populations disproportionately impacted by diet-related chronic disease in SF through culturally relevant programs and services.

SDDT funding continues to be directed to communities within San Francisco that are disproportionately impacted by sugary beverage consumption and diet-related chronic diseases. The two largest funding streams directly supporting community-based organizations in Fiscal Year 2019/2020 were the SDDT Healthy Communities Three-Year grants.

SDDT Healthy Communities Three-Year Grantees are a primary example of funding allocated to community-based organizations that are led by and work with community members to provide culturally relevant programming related to healthy eating/nutrition, physical activity, and food access—and specifically designed for populations prioritized by the SDDTAC. Many of these community-based organizations also received one-time capacity building funds or leveraged their social media to develop and share health promotion messaging with their communities.

Populations on which SDDT-Funded Programming Focuses (Three-Year Healthy Communities Grantees)	Lower income	Black/ African American	Pacific Islander	Indigenous	Latinx	Asian	Children + youth (<25)
Asociación Mayab	✓			✓	✓		
Bayview Hunters Point Community Advocates	✓	✓					
BMAGIC	✓	✓			✓		✓
Bounce Back and Healthy Generations Project	✓	✓	✓		✓	✓	✓
Community Grows	✓	✓	✓		✓	✓	✓
Community Well	✓				✓	✓	
Farming Hope	✓						
San Francisco African American Faith Based Coalition	✓	✓					
SisterWeb	✓	✓	✓		✓		
SoMa Community Action Network (SOMCAN)	✓					✓	
Urban Sprouts	✓						✓

Examples of Community-Led, Culturally Relevant Health Promotion Activities Supported by SDDT in Fiscal Year 2019/2020 included:

- Bi-monthly workshop series with local Filipino chefs teaching how to prepare their favorite Filipino dish using healthier ingredients
- Weekly one-hour World of Dance: U-Jam physical activity class initially held in-person and then conducted via Facebook livestream (#SOMCANUJAM).
- Pairing African American, Latinx, and Pacific Islander mothers and families with a doula from their community and providing specialized prenatal, peripartum, and postpartum care (addressing healthy eating and active living as well as many other topics).
- Creating and implementing a wide public awareness campaign directed toward Potrero/Bayview children to recognize the origins of negative coping behaviors and adopt resilient-building habits instead.
- And much more!

Through the **Healthy Communities SUPPORT grants**, SDDT funding provided one-time grants to 26 non-profit organizations embedded within--and predominantly led by--members of communities targeted by beverage industry marketing and disproportionately impacted by diet sensitive chronic diseases. While SDDT's three-year Healthy Communities grants provide a reliable funding source to ensure culturally responsive programming is consistently provided to priority populations, these capacity building grants support community-based chronic disease prevention programs in one-time expenses, such as purchasing equipment, providing intensive staff training, or improvements to their operational infrastructure.



Leveraging Relationships to Target Resources to Communities Hardest Hit by COVID-19

SDDT funding helped strengthen relationships between SFDPH and community-embedded organizations, enabling SFDPH to quickly deploy emergency food assistance to community members hardest hit by COVID-19 and the related economic impacts. As a result of the already existing collaboration and infrastructure support, emergency food support was quickly distributed and specifically targeted to meet the nutrition needs of:

- Pregnant and breastfeeding people
- Undocumented and mixed status families
- Families with children in SFUSD
- Residents of public housing sites (Potrero and Sunnydale)
- Low income families
- Families and older adults living in Bayview Hunters Point
- Residents affiliated with African American faith-based organizations

For more information about emergency food distribution supported with SDDT funds, see page 31.

SDDT Advisory Committee Members are Reflective of and Leaders in Impacted Communities

The work of the SDDT Advisory Committee (SDDTAC) should be highlighted as an important promising practice that helps “de-silo” the efforts of communities to eliminate health disparities and achieve health equity. The SDDTAC has established committee processes and structures in ways that will help sustain this work into the future. As scientists, health professionals, advocates and parents, the SDDTAC has worked to find the nexus between science, data, and community priorities. The Committee has worked diligently to keep the focus on the communities most targeted by soda industry marketing, most burdened by the health impacts associated with consumption, and most in need of investment. The specific appointment criteria for Advisory Committee members ensures that members of impacted communities are central to funding recommendations.

Please see Appendices for more information about the structure of the SDDTAC.

Finding 1.2. SDDT funding boosted the leadership of impacted community members through skill building opportunities, participant stipends, and career pathways.

During Fiscal Year 2019/2020, more than 450 San Francisco residents in impacted communities were paid to develop, implement, and participate in culturally relevant programming through the SDDT Healthy Communities Three-Year grants. Specific career pipelines included:

- Community Grows hired 8 youth who earned \$6,030 through 394 hours of work as well as 14 Community Resiliency Leaders.
- Farming Hope recruited 16 Culinary Apprentices who worked an average of 30 hours/week over 3 months, with 3 apprentices obtaining full-time employment or continuing their studies.
- SisterWeb compensated doulas for their work supporting pregnant people and new parents.
- Urban Sprouts hired 15 high school youth to participate in Sprout Out, 4 transitional age youth as Program Assistants, and 4 Sunnydale residents as Program Associates.



In Fiscal Year 2019/2020 more than 400 SFUSD students were hired with SDDT funding!

The Children's Oral Health Community Task Forces established in Bayview-Hunters Point, Chinatown, and the Mission are another way in which SDDT funds support community leaders in addressing racial inequities in healthcare access and education about preventative care. These Task Forces seek to enable communities at highest risk for dental decay to promote oral health in specific ways most responsive to each community's needs and priorities—and therefore focused in Fiscal Year 2019/2020 on identifying neighborhood- and community-specific foci for their collaborative work.

In school year 2019-2020, SFUSD students participated in project-based learning related to sugar-sweetened beverages and healthy eating with a focus on how racial equity/inequities impact these topics.

Highlight: SFUSD Student Action

The Foodwise Teens (FWT) Program provides nutrition education and encourages healthy eating habits while helping students build job skills relevant to sustainable food careers. Supported by SDDT funds, FWT is a program at The Academy-San Francisco at McAteer, John O'Connell High School, and Mission High School. Participants in the 10-week program report both behavioral impacts as well as community impacts.

- 82% have an improved understanding of their areas for growth in a work setting
- 74% believe they have better skills and knowledge to prepare a healthy meal after participating
- 53% sold something to customers for the first time
- 45% visited the farmers' market for the first time
- 37% have increased their daily number of fruits and vegetables after participating in FWT
- 34% had their first job with FWT

The Bigger Picture Project is an arts-based public health literacy program that exposes the environmental and social conditions driving the increase in Type 2 diabetes, shifting the conversation away from blaming individuals. A collaboration between Youth Speaks and UCSF's Center for Vulnerable Populations at Zuckerberg San Francisco General Hospital, this program engaged students at Burton, O'Connell, and June Jordan High Schools with support from SDDT funds. It is also designed to strengthen student participants' sense of community belonging and affiliation and to increase student civic engagement related to health, justice, and other socio-environmental concerns that directly impact low-income students at these high schools. For example, after learning about the link between nutrition and Type II Diabetes, Bigger Picture participants in one intervention school successfully advocated to have healthier food at their Black Student Union annual banquet.

“ The thing that I took [from the Bigger Picture Project] is that these industries know exactly what they're doing – like when they make these commercials targeted for a specific group of people they know what they're doing or when they have a lower cost for their sodas than for, for example. I think my biggest takeaway is that the fact that... Black and Brown community have higher numbers of diabetes – that's not a mistake. That's something that has been implemented into our neighborhoods on purpose. ”

STUDENT PARTICIPANT
THE BIGGER PICTURE PROJECT

“ We have a lot of conversations on Type II Diabetes and how that relates to their lack of... money to afford [healthy food]. A lot of my students are Black girls and they're all talking about how historically the food choices that their families have made affect that... So they had a lot of thoughts on how it's all connected and how it falls under the detriment of their communities. ”

POET MENTOR
THE BIGGER PICTURE PROJECT

Finding 1.3. SDDT funds supported the development of health promotion messaging with and for community-based organizations embedded in key populations.

SDDT funds were provided to social media grantees to ensure that health promotion messaging was culturally relevant and health education materials presented easily accessible information to community members that are disproportionately impacted by the soda industry. Social media grantees focused on engaging and educating community members on a range of topics related to sugary drinks.

Once shelter-in-place orders were issued in March 2020, digital outreach and virtual engagement became critical since in-person outreach at large community events was no longer possible. Grantees shared a range of social media messages, including:

- Informing people about the negative impacts of sugary beverage consumption,
- Educating community members about exploitative beverage industry tactics, and
- Encouraging continued physical activity even while sheltering-in-place.

What began as a large-scale advertising effort became an education effort focused on grassroots, community events. SDDTAC was interested in promoting how SDDT funds have been used to address structural inequities and to support San Franciscans most impacted by diet-sensitive chronic diseases. Focus group participants reported believing information that comes from trusted community-based organizations, even if they did not trust or were skeptical of information from local government agencies. Messaging was adjusted in response and incorporated photos of San Francisco's community members and neighborhoods.

In response to shelter-in-place orders, educational outreach shifted entirely to social media and virtual platforms and community-based grantees were supported in sharing tailored health promotion information with their communities. In June 2020, "Drink Real SF! - SF Soda Tax Celebrates Community Resilience" provided an opportunity for connection, interactive video presentations, and a virtual wellness parade.

In a five-month period, the ten grantees shared a total of 578 social media posts



> 70,000 Facebook followers



> 15,000 Twitter followers

Highlight: Social Media Grantee

Carnaval SF incorporated anti-sugary drink messaging into its Comparsa/contingent orientation tool kit and its Health and Wellness Pavilion partner focus during Salud es Poder, a virtual event held on May 24th, 2020.



 carnivalsf SDDT Grant Presentation

The #DrinkRealSF virtual event was a hit! Thank you to all CBOs that shared about your important programs, healthy tips and recipes. And thank you to @michaelfranti, @ksowers5, @miahamm9, and @TayeDiggs for stopping by to say hello!

Below is the SDDT presentation from our very own Festival & Program Director, Rodrigo Ehecatl Durán (@drigo_ed) Enjoy!

If you didn't get a chance to join us at #DrinkRealSF, you still have a chance to watch more of the highlights here: www.sodatax-sf.org/videos/

SDDT funds create Healthy Places by helping mitigate structural, place-based inequities

Findings related to SDDTAC Goal 2 to ensure Healthy Places

In Fiscal Year 2019/2020, SDDT supported implementation of the following strategies to mitigate structural, place-based inequities:

SDDT Strategy 4. Expand access to healthy food, water, and oral health

SDDT Strategy 5. Decrease access and availability to sugary beverages

SDDT Strategy 6. Increase opportunities for physical activity

SDDT Strategy 7. Increase economic opportunities in priority neighborhoods

Goal 2 Key Findings

- 2.1 SDDT funding has been leveraged to address structural, place-based inequities in neighborhoods most impacted by soda industry marketing and diet-related chronic disease.
- 2.2 Changes to the physical and retail environment in key neighborhoods have increased residents' access to water and healthy food today and for years to come.
- 2.3 SDDT funds supported the hyper-local economy in key neighborhoods and provided residents burdened by structural economic inequities with relief during the COVID-19 pandemic.
- 2.4 To prevent the development of diet-related chronic diseases, SDDT funds supported school-based oral health services and the ongoing implementation of SFUSD's Wellness Policy.
- 2.5 SDDT funding continued to address the safety concerns and economic inequities that reduce physical activity in SF neighborhoods most impacted by diet-related chronic disease.

SDDT Funding Focused on Mitigating Structural Inequities

- Recreation & Parks Scholarships: \$2,000,000
- Emergency Food: \$1,650,000
- Healthy Food Purchasing Supplements: \$1,000,000
- School Meals: \$1,000,000
- Peace Parks: \$895,000
- Water Access at SFUSD: \$340,000 (Fiscal Year 2018/2019 funds used Fiscal Year 2019/2020)
- Support to Implement SFUSD Wellness Policy: \$300,000
- Water Access for SF Recreation & Parks: \$300,000
- School-Based Sealant Application: \$250,000
- Oral Health Education and Case Management: \$200,000
- Healthy Retail: \$150,000



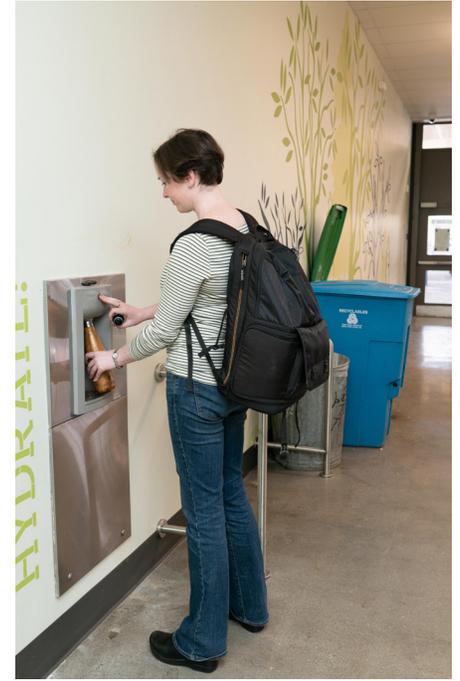
Finding 2.1. SDDT funding has been leveraged to address structural, place-based inequities in neighborhoods most impacted by soda industry marketing and diet-related chronic disease.

In Fiscal Year 2019/2020, the policy, systems, and environmental changes supported with SDDT funds were primarily targeted to Bayview Hunters Point, the Mission, and the Tenderloin—those neighborhoods in San Francisco most impacted by diet-related chronic diseases. SDDT work to address inequities was also implemented in children- and youth-focused settings.

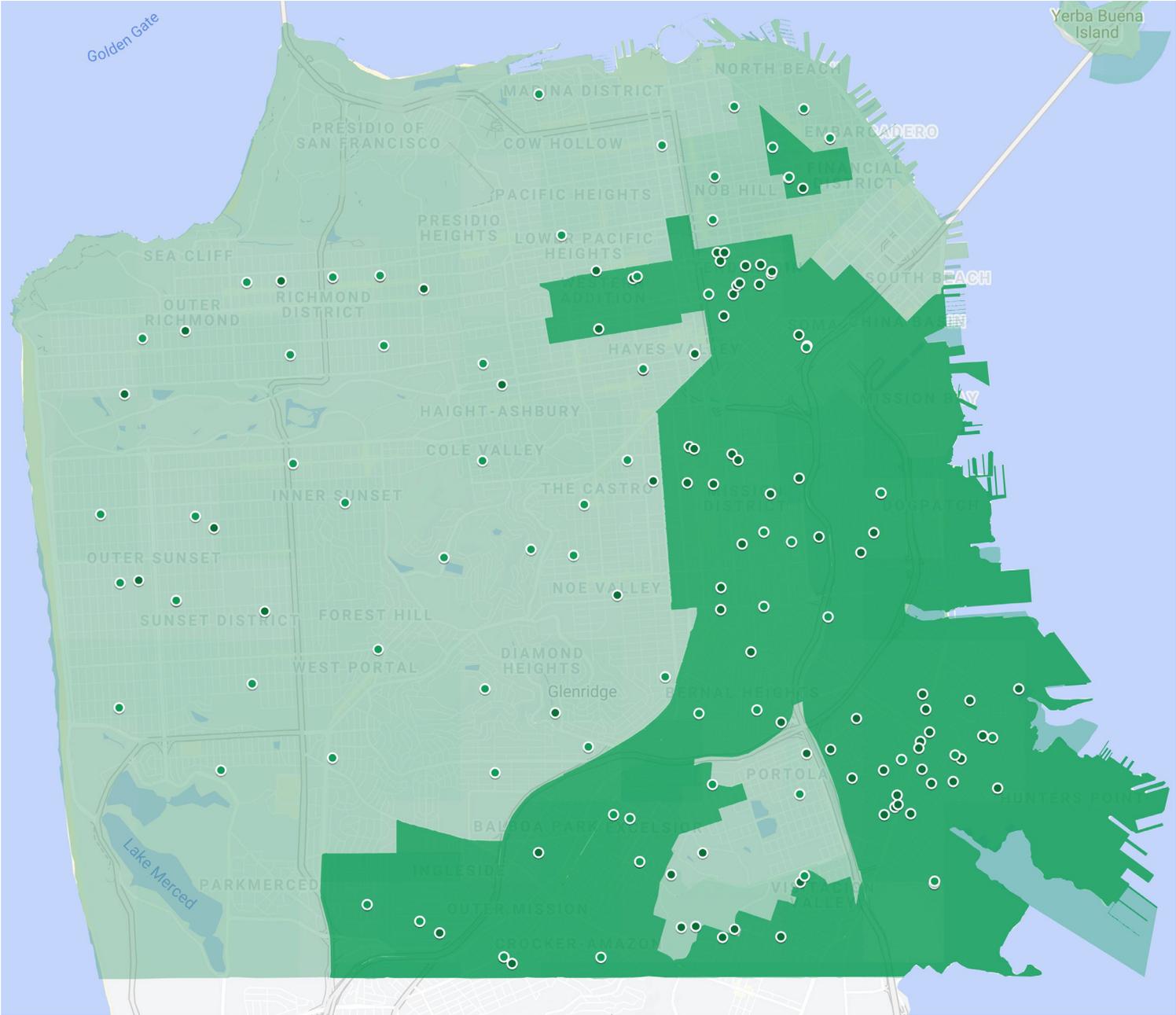
In Fiscal Year 2019/2020, SDDT funds addressed inequities related to:

- Physical infrastructure to ensure easy, free, and safe water access especially for children and youth
- The retail food environment
- Access to healthy food
- Dental care and preventative oral health treatments for children
- Access to safe, high-quality parks and engaging and affordable recreational activities

More information about the specific work that took place in Fiscal Year 2019/2020 in each of these areas is provided in the following pages.



SDDT Funding Focused on Supporting Neighborhoods Most Impacted by Diet-Sensitive Chronic Disease and Locations throughout the City Serving Priority Populations



Dots represent where SDDT investments have been targeted, including: SFUSD sites, Peace Parks, Healthy Retail stores, emergency food distribution sites, and newly installed hydration stations.

Neighborhoods where programming and services are focused are shown in darker green.

Finding 2.2. Changes to the physical and retail environment in key neighborhoods have increased residents' access to water and healthy food today and for years to come.

Increasing Access to Safe and No-Cost Drinking Water at Schools and Parks

SDDT funds have paid for the installation of hydration stations (and upgrades to some existing drinking fountains) in public spaces in key neighborhoods and at schools attended by children and youth in priority populations. The new stations are high-quality and visually appealing, encouraging community members to use them, beautifying public spaces, and serving as a model of community-based hydration stations.

18 New Hydration Stations



9 installed at 4 schools



9 installed at 9 city parks

“ The installation of water bottle filling stations is a game-changer for the students, families, and staff of Rosa Parks Elementary School. Keeping kids hydrated properly throughout the day will help us to fight childhood obesity and future rates of diabetes. Not to mention how the stations support the COVID safety protocols. ”

DARREN KAWAII, PRINCIPAL

ROSA PARKS ELEMENTARY LOCATED IN SAN FRANCISCO'S WESTERN ADDITION NEIGHBORHOOD



Improving Food Access and Supporting Small Business Owners in Key Neighborhoods

The San Francisco Office of Economic & Workforce Development's and Department of Public Health's Healthy Retail SF initiative supports small businesses—corner stores—to increase access to healthy and affordable food in priority neighborhoods. Funding supports business operations, physical changes/redesign of the store to improve the retail environment, and community engagement. Once accepted into the program, stores receive support and technical assistance over 3 years. Although the Healthy Retail initiative has existed for many years, SDDT funds have been used to support this work since 2018.

On average, individual Healthy Retail SF stores:

- Sold 21,000 additional units of produce annually (39% average increase) compared to sales before the program – resulting in an additional \$33,000 in revenue.
- Healthy Retail SF stores have also seen small decreases (3%) in sales of sugar-sweetened-beverage products.



Individual Healthy Retail Store Stats

39% = **\$33,000**

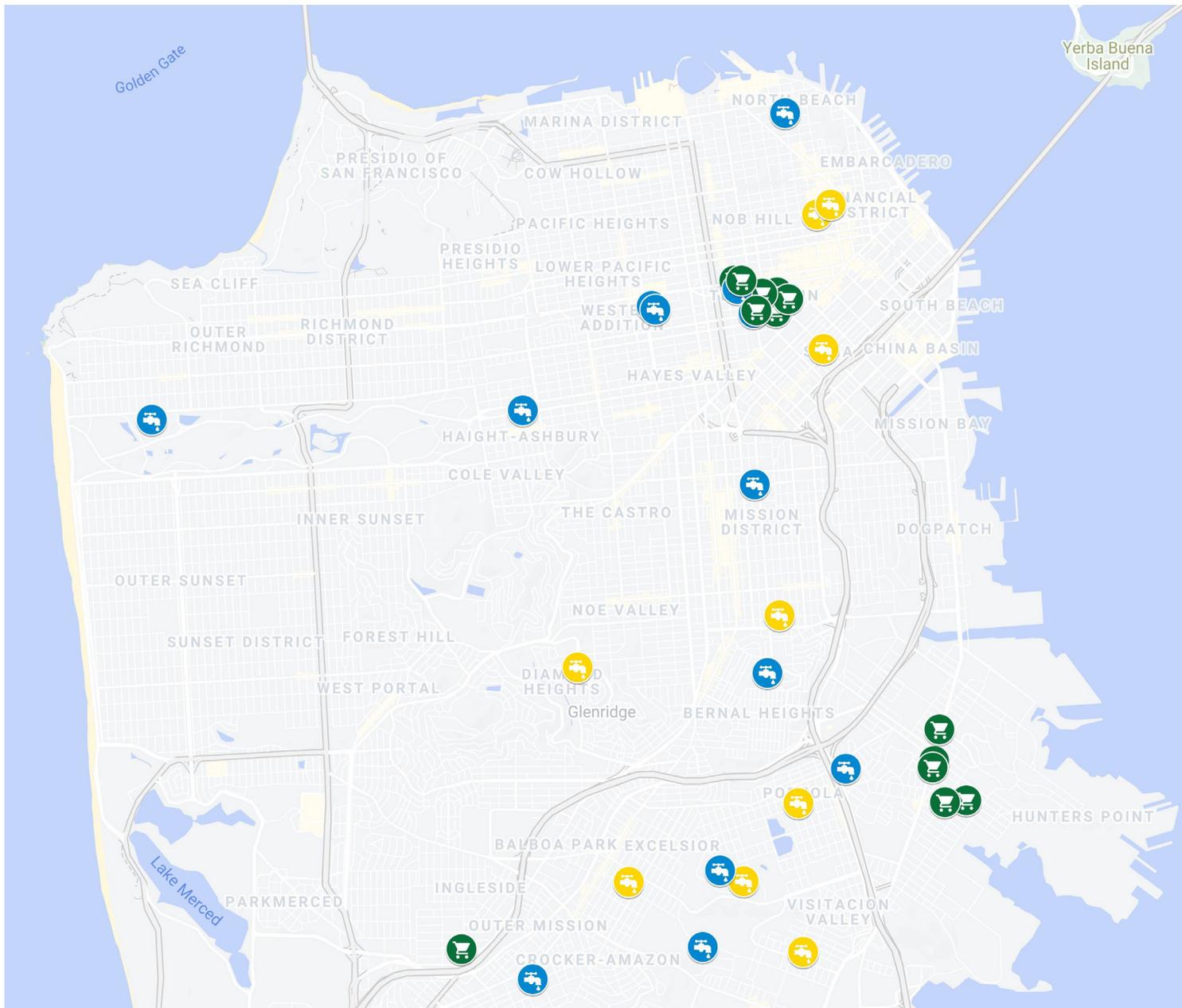
increase in
produce sales
(on average)

additional
annual revenue



3% decrease in sales of
sugar-sweetened beverages

Hydration Stations Installed and Healthy Retail Locations in Fiscal Year 2019/2020



Legend

-  Installed hydration stations
-  Hydration stations in progress, delayed due to COVID-19
-  Healthy retail

Highlight: Healthy Retail Stores

Ana's Market

Thelma Orozco and Bayardo Talavera's Ana's Market is the only store that provides fresh produce in their Oceanview neighborhood. Thelma and Bayardo were referred to the HRSF in 2014 at a time when the store was at risk of closing its doors. In the last five years their business has done the following:

- Obtained a long-term lease
- Replaced failing and outdated equipment
- Doubled gross sales and foot traffic into the store

As active community members, Thelma and Bayardo table at the annual OMI Health & Wellness Fair and the Minnie & Lovie Ward Recreational Center and are featured on a community mural located on the corner of Broad Street and Plymouth Avenue.

Achievements since 2014 store reset:

- Three-time increase in fruit
- Two-time increase in vegetables
- 20% increase in bottled-water options
- Dedicated shelf space to low-fat, low-sodium, low-sugar, whole-grain, organic items

Daldas Grocery

Daldas owner Satwinder Multani has been in the convenience-store business for over a decade and has always taken an interest in the communities his business serves. When Satwinder was presented with the opportunity to be a part of HRSF, he took it, noting that the program doesn't just benefit retailers but also "increases opportunities and options for some of the local residents," particularly in terms of access to products not easily found in the neighborhood.

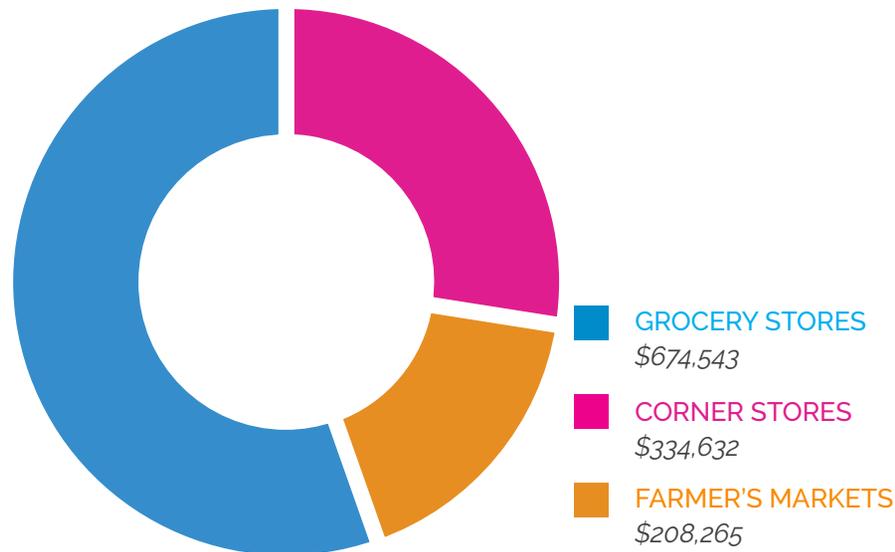
Finding 2.3. SDDT funds supported the hyper-local economy in key neighborhoods and provided residents burdened by structural economic inequities with relief prior to and during the COVID-19 pandemic.

Healthy Food Purchasing Supplements are provided to low-income residents to enable them to purchase fresh produce from local merchants and farmers market vendors. Limited to spending on healthy food, the supplements reduce food insecurity for individuals while also supporting good nutrition. Healthy Food Purchasing Supplement funding supports the distribution of EatSF fruit and vegetable vouchers to pregnant WIC clients, residents of single-room occupancy hotels (SROs), and families. These vouchers allow recipients to purchase fruits and vegetables at participating grocery stores and farmers markets. The funding also supports Market Match programs at 2 farmers markets – Heart of the City Farmers Market and Alemany Farmers Market. This program matches customers' CalFresh benefits with additional funds to purchase produce, thereby expanding customer's purchasing ability and supporting hundreds of small and mid-sized California farmers in Fiscal Year 2019/2020, work with vendors and merchants included training vendor and merchant staff on accepting the vouchers as payment, updating outreach materials, and increasing staffing to reduce transaction time for the Market Match programs.

In Fiscal Year 2019/2020, residents with low or no income used EatSF vouchers (one type of Healthy Food Purchasing Supplement) to purchase more than \$52,300 of fruits and vegetables at Healthy Retail SF corner stores.

By increasing an individual's or family's food budget and creating an incentive to purchase produce at the neighborhood farmers' market, the supplements also resulted in increased market sales paid with EBT (Electronic Benefits Transfer; the equivalent of a debit card which draws on CalFresh, CalWORKS, or other cash benefits available to the cardholder) compared to the previous year. While the Healthy Food Purchasing Supplements program has supported San Franciscans for many years, SDDT funds have allowed the program to expand to support more residents, offer market match vouchers throughout the year (rather than seasonally), and make necessary operational adjustments to protect workers and customers from COVID-19.

Value of EatSF Vouchers 4 Veggies Redeemed at Types of Retail in Fiscal Year 2019/2020



45% of Vouchers for Veggies redeemed in Fiscal Year 2019/2020 were spent at corner stores and farmer's markets, supporting small businesses and small farmers

More than 17,774 people

More than 17,774 unduplicated participants received Healthy Food Purchasing Supplements at the Heart of the City Farmers' Market (Civic Center) and Alemany Farmers' Market (Bernal Heights)

\$1.5 million of healthy food

Residents purchased more than \$1.5 million of fresh produce and healthy food using Vouchers 4 Veggies and Market Match incentives in Fiscal Year 2019/2020





Highlight: Market Match at Heart of the City Farmers Market

The Heart of the City Farmers Market, located at Civic Center Plaza, serves the extremely low-income Tenderloin neighborhood that lacks a grocery store. The Healthy Food Purchasing Supplement grants have been used to expand Market Match from a small seasonal program into a robust year-round program that residents rely on regularly. In Fiscal year 2019/2020, the Farmers Market added a second market day.

Because more than half of Heart of the City Farmers Market customers speak English as a second language—customer service (which exchanges tokens for EBT payments (Electronic Benefits Transfer; the equivalent of a debit card which draws on CalFresh, CalWORKS, or other cash benefits available to the cardholder) so that farmer-vendors do not need to process EBT payments) is provided in English, Cantonese, Mandarin, and Spanish—and outreach materials are translated into these languages as well as into Tagalog, Vietnamese, Arabic, and Russian.

Support for small, local farms

In June 2019, the Heart of the City Market expanded to three weekly market days by adding a Friday market day. Although the Friday market day stopped operating in late March 2020 to implement COVID-19-related safety measures at the Wednesday and Sunday markets, while in operation its customers were much more likely to use EBT and Market Match incentive/supplement tokens to purchase produce compared to other market days.

- \$72,705 in EBT sales and \$61,114 in Market Match incentives/supplements were distributed on Fridays from July to December 2019.
- While credit card sales on the busiest Friday in November (11/15/2019) were 16% of Wednesday sales, EBT sales were 40% of Wednesday sales. While the Friday market was open, over 600 EBT customers accessed Market Match supplements every week.

Purchases with EBT more than doubled!

\$34,175

November
2018



\$80,918

November
2019

SDDT-Supported Emergency Food

For decades, long standing structural inequities in the form of insufficient wages and limited job opportunities have prevented low-income residents from creating household savings to use in case of an emergency.

When many low-income community members lost wages, benefits, and employment due to the COVID-19 pandemic, SDDT funds were leveraged to address the significant increase in food insecurity among the low-income communities hardest hit by the economic downturn. In fact, SDDT funds were used as a community safety net that was quickly strengthened and expanded to meet basic food needs.



“In addition to distributing boxes of food as a result of the COVID-19/ Shelter-In-Place order... HOMEY developed a partnership... [that enables us] to purchase food directly from a great Latino vendor who obtains food from farmers market vendors and delivers fresh wonderful produce and food items... What a powerful eco-system of sharing resources and supporting local businesses and helping our community!

... We are providing food to undocumented families, monolingual Mayan speakers, disabled mothers, elders living in SROs, extremely poor families with young children under 5 years old and so many more... [this funding helps us] serve our community in a caring, compassionate, and community-led way, as we have always done in the city of St. Francis.”

ROBERTO ELIGIO ALFARO,
EXECUTIVE DIRECTOR,
HOMIES ORGANIZING THE MISSION TO EMPOWER YOUTH
(HOMEY)

Short-Term Childcare for Essential Workers

When the COVID-19 pandemic forced Recreation and Parks Department to halt programming and temporarily close facilities, the department provided childcare for essential workers (healthcare workers, activated disaster service workers, and other first responders).

Highlight: Workforce Development & Community Support

Nourishing Community with Food and Sustainable Skills

Originally from the South, Henresha appreciates California's focus on healthy living and feels proud of how "eco-friendly" her new home is. She loves to cook and dreams of opening her own Cajun restaurant one day. But, before participating in Farming Hope's 10-week apprenticeship program, Henresha was homeless with three young children and a baby on the way. "They kind of found me. I had no idea Farming Hope existed. A worker connected me to the program and set up my interview. I was just trying to support my family and also hoping to learn a different way of cooking." Henresha had some experience working at a fast food restaurant but, she elaborated, "before working here [at Farming Hope], I wasn't a veggie eater. I've learned how to get my kids [ages 6, 4, 3, and 4 months] to eat vegetables. They love carrots." Henresha enthusiastically shared that she has learned how to improve her chopping skills, balance flavors, grocery shop to find new foods, and gardening. She spoke at length about her newfound knowledge on re-planting and growing vegetables and herbs.

Earlier this year Henresha found a permanent place to live. She credits Farming Hope, Homeless Prenatal Program, and CalWORKS with connecting her to the resources and supports to find and move forward in her new home. She explains, "Farming Hope goes above and beyond. When I was pregnant and not working, they brought lunches for me. That helped a lot!" Henresha feels very happy in her new place, explaining: "It's been nice having my own place. It feels good to come home and go home and for my kids to have something of their own." Henresha is especially proud of giving back to the community and helping those who need it most. She finds joy in preparing food for people who live in shelters like she once did.

“ I know the feeling of not knowing if I'm going to eat today. Helping and listening to the preference of what they want to eat makes me feel good. It feels good to help people.. ”

HENRESHA
FARMING HOPE PARTICIPANT

“ When COVID-19 and shelter-in place happened, overnight we watched as our patients lost their jobs and public works and community programs either closed or became difficult to access. In response, I started a Patient Pantry to provide necessities to our pregnant patients and their families when they came for essential medical care. Initially it was diapers and formula and dried goods, but ISDDT funding has enabled us to offer beautiful, organic produce as well as other healthy, high calorie staples such as beans and rice.

We now stock 10 clinical sites with bags of fresh produce every week and do home deliveries for 50 families per week, many of whom are quarantined... which has allowed our clinical staff and providers—many of whom do deliveries themselves—to show up for our patients and build trust in a way that we have not done before...

In clinic, when patients are unable to carry both a bag of staples and a bag or box of produce (many of them are quite pregnant!) they chose the produce EVERY TIME! ”

MISA PERRON-BURDICK, MD,

MEDICAL DIRECTOR

*OBSTETRICS, MIDWIFERY, AND GYNECOLOGY CLINIC
ZUCKERBERG SAN FRANCISCO GENERAL HOSPITAL*



Highlight: Employment Training through Apprenticeships

Becoming Confident in the Kitchen

Hector enjoys volunteering at his church as a filmmaker, but church has been closed due to shelter-in-place orders in since March of 2020. He wasn't sure what he would learn through the Farming Hope apprenticeship program, but the name of the organization alone motivated him to take part. He explained, "I didn't think it was going to be this much of experience [opened his hands wide]. The number of meals that we make every day is quite a lot. And the quality of the food is very nice." Since participating, Hector has learned how to cut and slice different vegetables, measure and weigh ingredients with a scale, and prepare meals for his loved ones. "I didn't know how to cook anything [before Farming Hope]. I can cook for my family now. I'll be able to start cooking more at my house. It's just a matter of having the recipe and the ingredients. If I have to cook anything at my next job, I can do it. I didn't know how to cook anything [before the apprenticeship]. I can cook for my family now. I'll be able to start cooking more at my house. It's just a matter of having the recipe and the ingredients," he explains.

Hector also learned a great deal from his new experiences working in a vegetable garden, including planting seeds in the planter buckets, mixing compost and watering, and transporting the vegetables to the kitchen to cook. He shares, "Here it's different. It's for other people and they need to feel good about what they're eating." Working at Farming Hope has also helped Hector think about his goals of starting an auto-detailing business and how he will treat his employees: "Treat them good, don't put too much pressure on them. Just tell them, 'tomorrow you can do a better job.' Today you did ok, but you can do better."

“ If I have to cook anything at my next job, I can do it. I feel confident. ”

HECTOR
FARMING HOPE PARTICIPANT

Finding 2.4. To prevent the development of diet-related chronic diseases, SDDT funds supported school-based oral health services and the ongoing implementation of SFUSD's Wellness Policy.

SDDT funds have continued to support the implementation of SFUSD's Wellness Policy in a wide range of areas, including nutrition services, nutrition education, student leadership, staff wellness, and physical activity.

To improve the quality and appeal of school meals, some SDDT funding was used to increase the capacity of School Nutrition Services' kitchens: the central kitchen, warming kitchens (for small schools reliant on premade meals), and production kitchens at large middle and high schools. When SFUSD switched to distance learning in response to COVID-19, the redesigned central kitchen made it feasible to continue providing meals for students.

SFUSD Wellness Policy

Adopted by the San Francisco Unified School District Board of Education on April 28, 2015, the Wellness Policy addresses:

1. Nutrition services
2. Nutrition guidelines for all foods and beverages
3. Nutrition promotion
4. Nutrition education
5. Food and beverage marketing
6. Competitive Foods and Beverages
7. Physical education
8. Physical activity
9. Staff wellness

The policy also includes recommendations for implementing and monitoring the policy through a coordinated approach.

The vision of the policy is to make the healthy choice the easy and most-desired choice.



SFUSD

**SAN FRANCISCO
PUBLIC SCHOOLS**

Sanchez Elementary's serving line was recently upgraded with hot serving wells to provide school meals on compostable plates and eliminate pre-packaged meals. This serving model not only reduces the amount of packaging used during lunch, it provides a better dining experience. Students are able to see and smell the food before choosing what they would like for lunch!



BEFORE



MID-RENOVATION

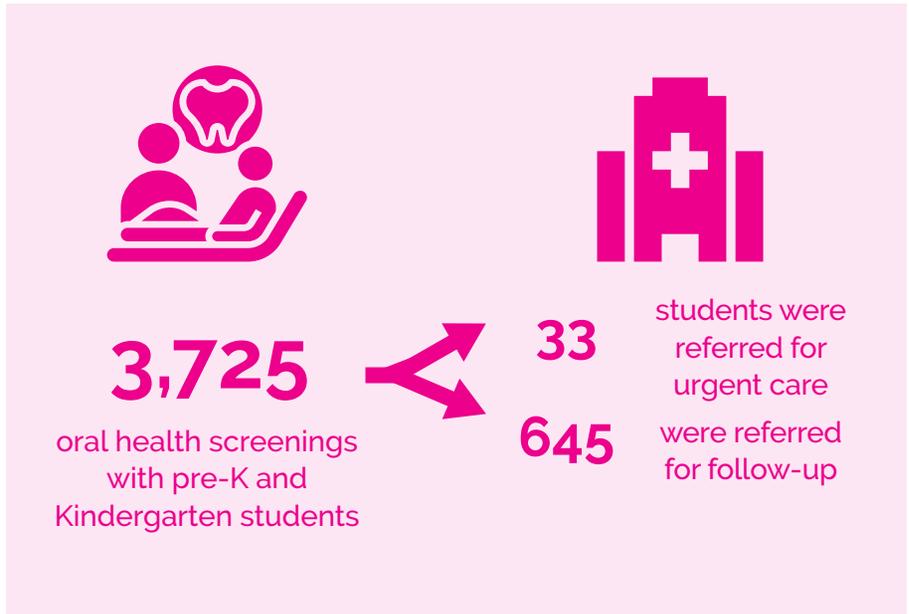


AFTER

School-Based Oral Health Screenings and Services

Dental cavities is a preventable diet-related chronic disease which disproportionately affects some children in SF. Sealants protect teeth from cavities. The school-based sealant application program serves SFUSD schools serving high risk target populations. Target schools are located in neighborhoods with the highest dental cavity rates, high rates of participation in free or reduced-price lunch programs, and a high percentage of low-income children of color.

Screenings, sealant placement and oral health education are provided at no cost to students or their families in school facilities during the normal school day. The school-based sealant program was paused in March 2020 in response to COVID-19. Before SFUSD switched to distance learning, the program:



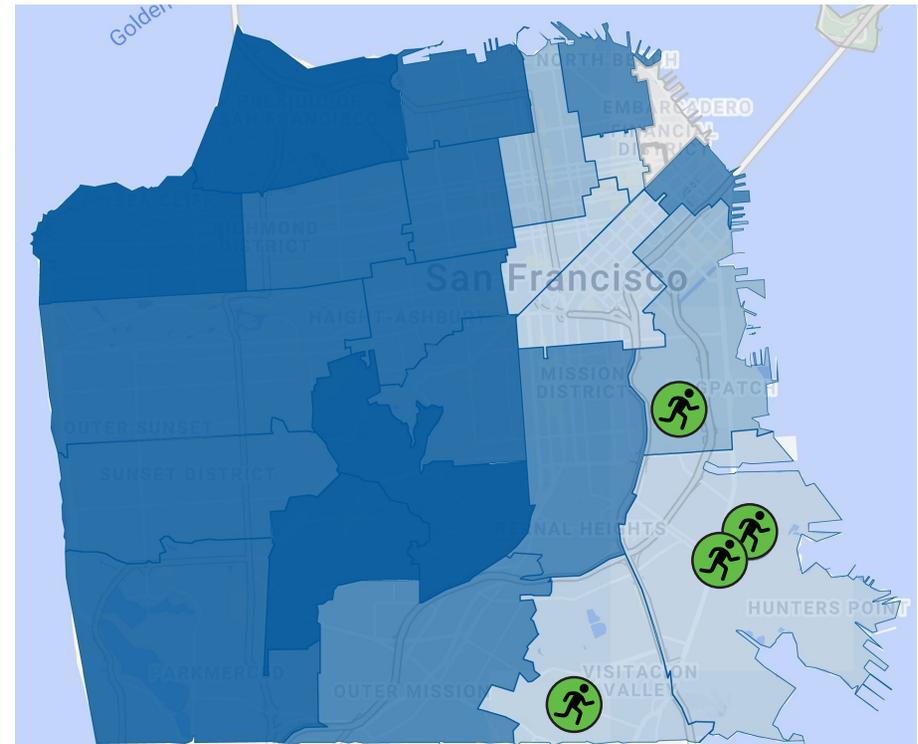


Finding 2.5. SDDT funding continued to address the safety concerns and economic inequities that reduce physical activity in SF neighborhoods most impacted by diet-related chronic disease.

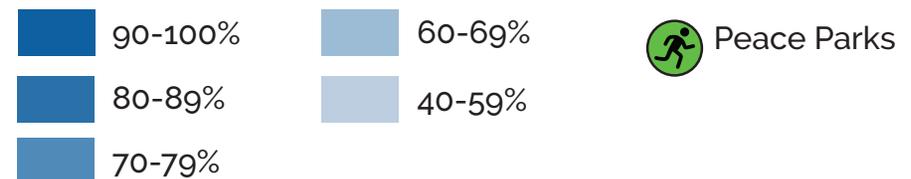
The neighborhoods in San Francisco where residents are least likely to feel safe during the day are the same neighborhoods with the highest rates of diet-related disease. Since physical activity is a protective factor that reduces the risk of developing many diet-related diseases, addressing the safety concerns that can prevent residents from exercising is critical to addressing health disparities. Perceived safety is also closely linked to the physical/built environment and public use – people typically feel safer when parks and other public spaces are regularly used for intended purposes (e.g., athletics, playing) and are in turn more likely to be physically active in these parks and other facilities.

Peace Parks

SDDT funding has supported the Recreation & Parks Department (RPD) Peace Parks initiative, which activates park properties in key neighborhoods with positive programming. The initiative works closely with 18-25-year-old neighborhood residents to increase how safe youth feel, increase how many youth use these parks for healthy activities, and support positive relationships between community members, police, and RPD employees.



Percent of residents who feel safe in their neighborhood



Source: 2019 San Francisco City Survey.

The Peace Parks Initiative supports physical activity and social connections in neighborhoods where residents feel less safe.

“Requity” Scholarships and Programming

SDDT funding also provides scholarships, outreach, and programs for low-income youth, youth whose households receive housing assistance (Section 8 vouchers, support from the Mayor’s Office on Housing & Community Development, or HOPE VI/public housing), and foster youth, allowing them to participate in Recreation & Parks Department (RPD) programming, thus reducing one of the economic factors that reduce how much physical activity people get. RPD calls these scholarships “Requity”—pronounced rec-quity—in recognition that they address economic inequities in recreational programming and facilities.



729 residents received a scholarship in Fiscal Year 2019/2020

Compared to 346 scholarship recipients in Fiscal Year 2018/2019

93% of recipients were children or youth under 25



Looking Back, Looking Forward

Prioritizing Long-Term Impacts

Most of the systemic inequities that drive health disparities and result in many poor health outcomes have been reinforced for decades—and even centuries. Achieving population-level change—especially related to reducing or eliminating inequities—requires long-term commitment, multi-pronged and multi-sector approaches, and a significant shift in what resources support and how they are allocated. The SDDTAC recognizes both the challenge of this work and that the work is absolutely critical. By supporting community leaders, changing environments and policies, and promoting health information tailored with and for impacted community members, SDDT funds have been leveraged to address immediate needs that contribute to long-term impacts.

The SDDT evaluation will continue to track SDDT-related impacts, sugary drink consumption, and trends in diet-sensitive chronic diseases for San Francisco. Metrics critical to assessing SDDT's long-term impacts include, but are not limited to:

- Sales data for sugary drinks/sugar-sweetened beverages
- Consumption of sugary drinks/sugar-sweetened beverages
- Food insecurity and physical proximity to affordable, healthy food
- Median household income and unemployment rates
- Experience with and treatment of dental caries
- Fruit and vegetable consumption
- Physical activity levels and physical fitness

Shorter-Term Outcomes

Average Sugary Drinks Distributor Tax Paid

The \$13.2 million collected in Fiscal Year 2019/2020 through SDDT is \$2.9 million less than the amount collected in the prior fiscal year: some 24.3 million *fewer* cans of soda distributed. This is an 18% decrease from Fiscal Year 2018/2019, slightly more of a decrease than the 16% decrease in the amount of other types of sales and use taxes collected.

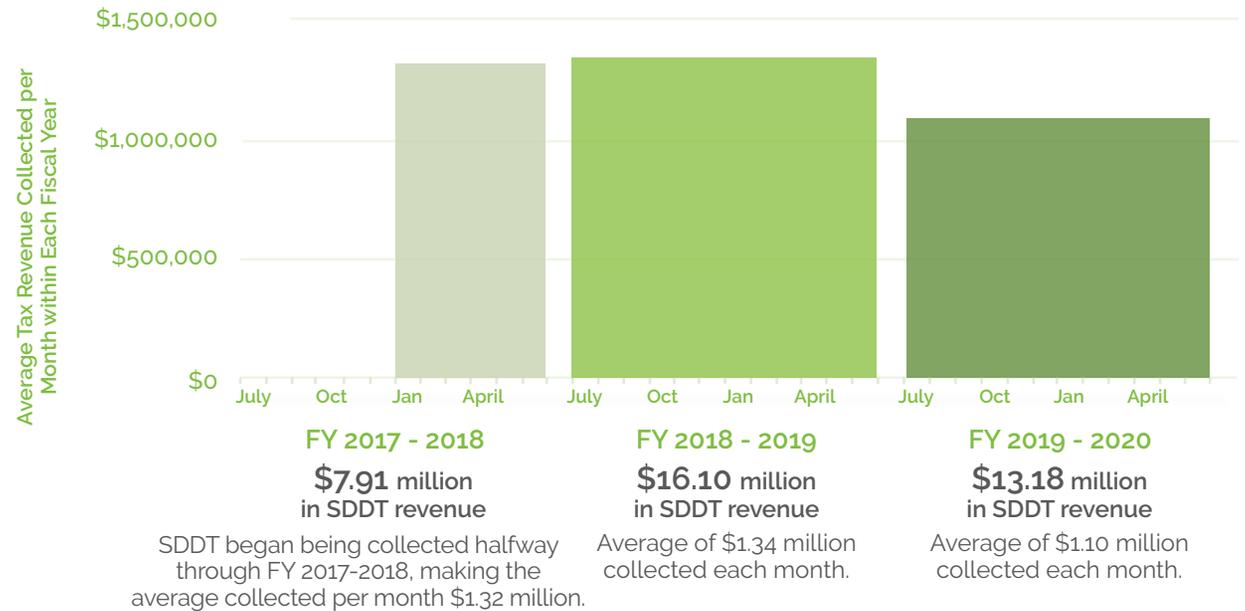
Source: City & County of San Francisco Office of the Controller, SFOpenBook <<https://openbook.sfgov.org/>>

Residents of color drink soda more often than White residents

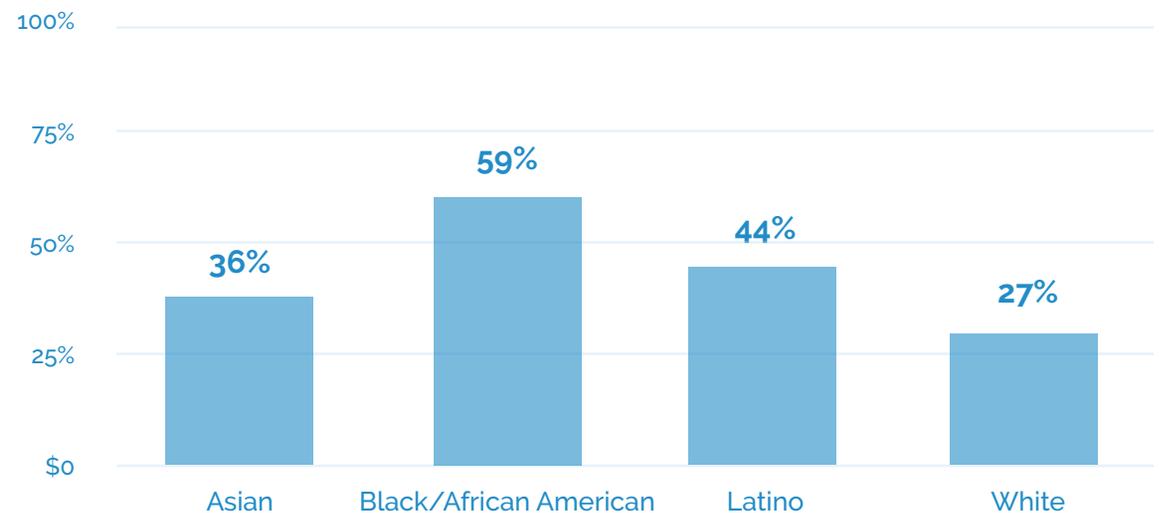
Every year, the beverage industry spends millions of dollars on advertising targeted to low income communities and communities of color.

Source: California Health Interview Survey, 2014-2016 as presented by the San Francisco Health Improvement Partnership (SFHIP) <<http://www.sfhip.org/chna/community-health-data/nutrition/>>

Average Sugary Drinks Distributor Tax Collected Each Month Tax Was Collected by Fiscal Year



Percent of San Francisco Residents (18+) Who Drank Regular Soda (i.e., that contains sugar) in Past Week

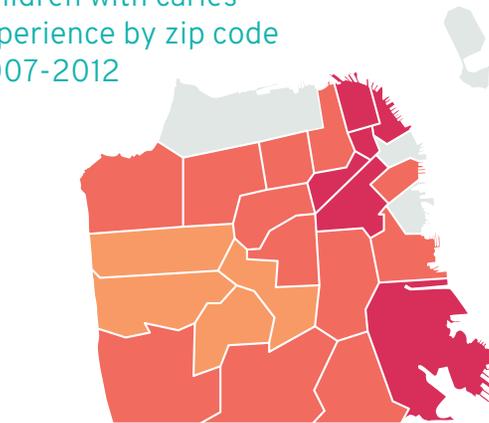


Longer-Term Outcomes

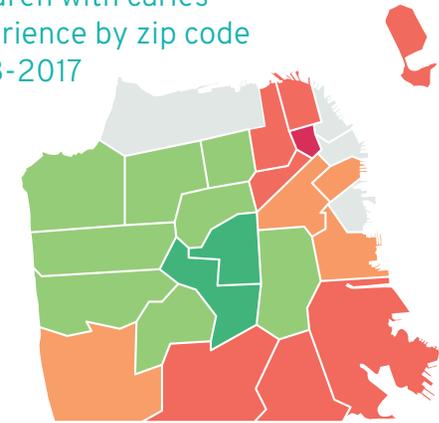
Fewer Children Have Caries — but Disparities Persist

Caries experience varies by ZIP code, with caries experienced more frequently in the Southern and Eastern ZIP codes of San Francisco. These geographic disparities are consistent across racial/ethnic groups.

Children with caries experience by zip code 2007-2012



Children with caries experience by zip code 2013-2017

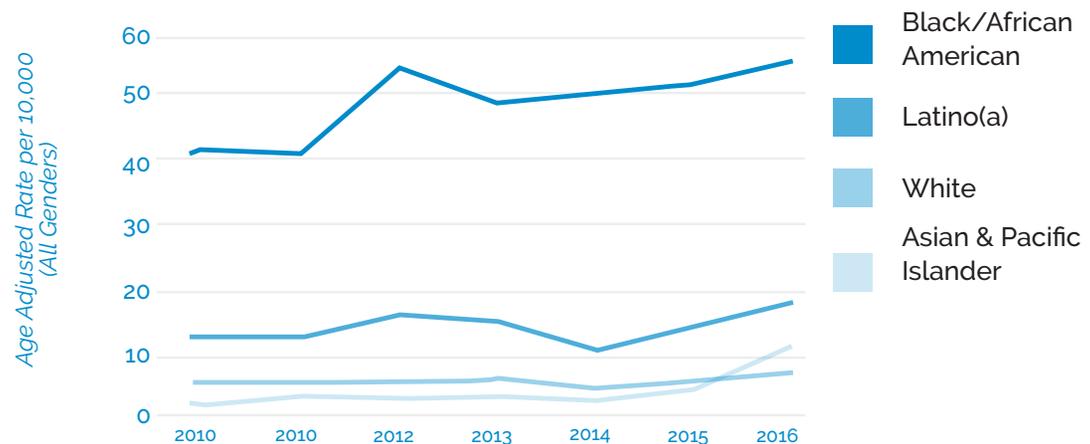


Source: SFUSD Kindergarten Dental Screening Surveillance data as presented in CavityFreeSF: San Francisco Children's Oral Health Strategic Plan 2020-2025.

Diabetes Hospitalizations

Hospitalizations primarily due to diabetes have been increasing -- and are already higher for San Francisco than the state overall. Black/African American San Franciscans are more than 5 times as likely as white residents to be hospitalized because of diabetes, and Latinx residents are twice as likely as White residents to be hospitalized due to diabetes

Hospitalization Rate from Diabetes



Source: California Office of Statewide Health Planning and Development: Age-Adjusted Rates of Hospitalizations for Diabetes (Primary and Comorbidity) per 10,000 residents, San Francisco 2005-2016.

Health Disparities Shorten Lives

In addition to being more likely to have and be hospitalized for diet-sensitive chronic diseases, Black/African American residents experience negative health outcomes earlier than San Franciscans of other racial/ethnic groups.

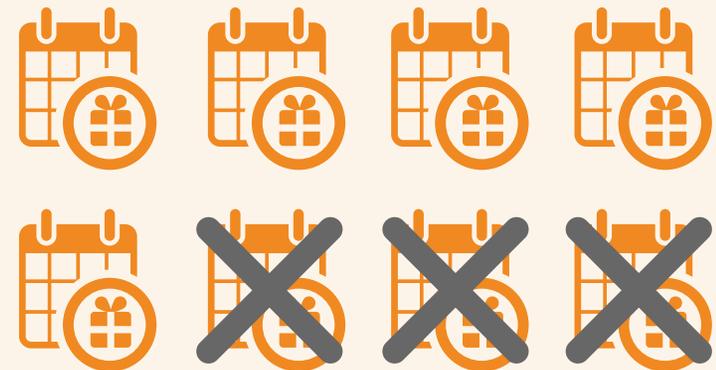
Hospitalized 30 Years Early



Black/African American residents in their 30s and 40s are as likely to be hospitalized for diet-sensitive diseases as residents of other race/ethnicities who are 60 and older.

Source: California Office of Statewide Health Planning and Development: Age-Adjusted Rates of Hospitalizations as reported in "San Francisco Sugary Drinks Distributor Tax Advisory Committee: August 2019 Data Report."

Dying 3-6 years Younger



Black/African American residents who die from diabetes die 3-6 years younger than residents of other racial/ethnic groups who die from diabetes.

Source: California Department of Public Health, VRBIS Death Statistical Master File Plus 2006-2018 as reported in "San Francisco Sugary Drinks Distributor Tax Advisory Committee: August 2019 Data Report."

Conclusions

This report presents evaluation data for Fiscal Year 2019/2020. Findings show that during this period funding for services, programs, policies, and environmental changes successfully aligned with the overall goals of the SDDTAC. Furthermore—and despite the challenges related to the COVID-19 pandemic—both the SDDTAC and those agencies and organizations supported with SDDT funds have shown unrelenting dedication to their work. They have also demonstrated that innovation, resilience, and commitment to their values have contributed to increased access to healthy food, increased consumption of fruit/vegetables, increased economic opportunity, and changes in the physical environment that will have positive impacts for years to come. Below are highlights summarizing the findings.

- 1. The structure and membership of the SDDT Advisory Committee in San Francisco is emerging as an effective way to identify culturally appropriate, de-siloed approaches to decreasing health harms from sugary drinks, expand local leadership, and meet community needs.** Evaluation findings demonstrate that the SDDT Advisory Committee members' diverse areas of expertise and lived experiences have enabled them to build, strengthen, and leverage partnerships that address both immediate needs and support systemic change. The Advisory Committee is building its legacy by maintaining their laser focus on supporting community-led work, eliminating structural inequities, and prioritizing results and long-term impacts.
- 2. To amplify positive impacts for San Franciscans, SDDT funds prioritized leadership in impacted communities.** In Fiscal Year 2019/2020, San Francisco effectively used SDDT funding to develop and strengthen the leadership of community members most impacted by both the health harms of sugary drinks and, interrelatedly, racist structures that have increased the negative effects of the COVID-19 pandemic. Grantees and funded partners/

strategies were responsive to priority communities by providing culturally relevant programming, prioritizing leadership development, and supporting tailored health promotion messaging to mitigate health harms. These successes contribute to the goal of Healthy People.

3. SDDT funds created job opportunities and strengthened career pipelines for priority populations.

A range of programs were funded that combined extensive job training experience with a focus on growing, preparing, and distributing healthy food. Examples include programs that work with formerly incarcerated community members, high school youth, transitional age youth, and other low-income community members to serve as community resilience leaders, culinary apprentices, and more.

4. To mitigate structural inequities in San Francisco neighborhoods, SDDT funds helped create and strengthen community collaborations and change systems which resulted in increased access to safe water, healthy foods, oral health care, access to parks, and overall increased wellness, even amidst the COVID-19 pandemic.

In Fiscal Year 2019/2020, SDDT funds were used to create long lasting changes that included increasing access to safe and no-cost drinking water at schools and parks in neighborhoods where priority populations live, play, and learn. SDDT funds were also used to improve food access through the Healthy Retail initiative which resulted in an increase of units of produce sold and generating additional revenue.

SDDT funds supported school-based oral health and the implementation of the SFUSD Wellness Policy, as well as increasing access to safe parks and affordable recreation activities. Funds were also used to support hyper-local economies prior to and during the COVID-19 pandemic, including providing healthy food purchasing supplements, which in turn supported small, local farms as well as local food vendors from priority communities. These strategies are evidence-based and are emerging as promising practices. These successes contribute to the goal of Healthy Places.

5. Building on strong relationships with impacted communities and institutions, SDDT funds were rapidly distributed to meet immediate pandemic-related needs for San Francisco's priority communities.

During the COVID-19 pandemic, SDDT funds were used to support emergency food distribution (including providing home deliveries of fresh produce to vulnerable residents) and to address the evolving urgent needs of many communities in San Francisco, including undocumented families, elders living in single room occupancy housing, and low-income families with young children.

Recommendations

- 1. Continue to address the immediate needs of priority communities by using SDDT funding to provide healthy food, expand economic opportunities, and support other strategies that address structural racism and inequities.**

Given the widening gap in health outcomes between communities in San Francisco, it is critical for SDDT to continue to fund programs and services that address income inequality, food insecurity, and other factors that limit access to healthy food, water, and safe physical environments.

- 2. Prioritize longer-term co-benefits that support sustainable economic opportunities.**

In addition to funding critical programs and services, SDDT funds should also prioritize policy and systems change strategies that address historic inequities. Examples could include providing childcare for essential workers during the COVID-19 pandemic, providing a basic targeted income for members of priority populations, and investing in work-led cooperatives. Through these innovative approaches, SDDT can continue to be an incubator of creativity, build new grassroots public health efforts, help redefine partnerships with community, and continue contributing directly to increase economic resources in priority communities.

- 3. Continue to amplify leadership of priority community members and organizations to ensure that programs, services, policies, and systems change reflect local priorities and needs.**

SDDT funding could be used to expand opportunities for members of priority communities to engage in developing programs and services and participate in developing policies and systems change efforts.

- 4. Expand partnerships with faith-based communities.**

SDDT funding could be used to partner with faith-based communities throughout San Francisco to expand opportunities to promote healthy food and beverage messages, increase access to healthy food, increase water consumption, and promote wellness policies.

- 5. Identify new strategies to promote water consumption through environmental changes given the challenges created by COVID-19.**

SDDT funding could be used to identify promising practices and gather community input on how to best increase water consumption through environmental changes given the pandemic.

- 6. Continue to support and expand job training opportunities.** SDDT funding has effectively combined job training opportunities with a focus on increasing food access, physical activity, and improving health outcomes. Funding should be continued and expanded to include other related job training opportunities.
- 7. Continue to leverage SDDT funds to mitigate the disproportionate impact of COVID-19 on San Franciscans most likely to develop diet-related chronic diseases.** The COVID-19 pandemic continues to disproportionately impact lower-income communities of color in San Francisco, and as moratoriums on evictions begin to phase out this fall/winter and in early 2021, the need for support networks and emergency response will likely intensify. The SDDT grantees and community partners can play a critical role in mitigating these potential harmful consequences by continuing to partners with members of priority communities.
- 8. Continue to provide ongoing backbone support for the SDDTAC to meet, review data, and identify recommendations for funding.** SFDPH provides ongoing backbone support to ensure that the SDDTAC functions smoothly, receives information and data related to SDDT, and identifies funding recommendations. Support includes providing support for the monthly Advisory Committee and Subcommittee meetings and coordinating with the evaluation team. This work is critical to sustain the SDDTAC's high quality and ongoing work.
- 9. Continue to support the data and evaluation infrastructure needed for long-term research.** SDDT funding also strengthened and expanded critical research infrastructure that will deepen understandings of the effects of sugary drinks on the health and well-being of San Franciscans. This research will also continue to be used to inform future funding efforts and innovative ways to address the health needs of diverse community members in culturally appropriate ways.

San Francisco Sugary Drinks Distributor Tax (SDDT) Evaluation Report 2019 - 2020

For more information please go to www.sfdph.org/sddtac and www.sodatax-sf.org

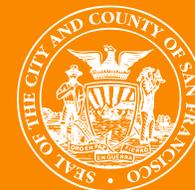
San Francisco Sugary Drinks Distributor Tax (SDDT)

Evaluation Report 2019 - 2020: Appendices

Prepared by:



raimi+
associates



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Prepared by Raimi + Associates



Appendix A: SDDT Advisory Committee

Development of the SDDT Advisory Committee

The work of the SDDT Advisory Committee (SDDTAC) should be highlighted as an important promising practice that helps “de-silo” the efforts of communities to eliminate health disparities and achieve health equity. The SDDTAC has established committee processes and structures in ways that will help sustain this work into the future. As scientists, health professionals, advocates and parents, the SDDTAC has worked to find the nexus between science, data and community interest. The Committee has worked diligently to keep the focus on the communities most targeted by soda industry marketing, most burdened by the health impacts associated with consumption, and most in need of investment. The structure of the Advisory Committee speaks to this commitment and surfaces as a key area to lift up as a promising practice. The SDDTAC formation focuses on representation, elevating an innovative and grounded approach in community.

Structure of the SDDT Advisory Committee

The following are guidelines for the structure of the SDDT Advisory Committee. The Committee shall consist of the following 16 voting members:

Seats 1, 2, and 3 shall be held by representatives of nonprofit organizations that advocate for health equity in communities that are disproportionately impacted by diseases related to the consumption of Sugar-Sweetened Beverages, as defined in Business and Tax Regulations Code Section 552, appointed by the Board of Supervisors.

Seats 4 and 5 shall be held by individuals who are employed at medical institutions in San Francisco and who have experience in the diagnosis or treatment of, or in research or education about, chronic and other diseases linked to the consumption of Sugar-Sweetened Beverages, appointed by the Board of Supervisors.

Seat 6 shall be held by a person who is under 19 years old at the time of appointment and who may be a member of the Youth Commission, nominated by the Youth Commission and appointed by the Board of Supervisors. If the person is under legal voting age and unable to be an elector for that reason, the person may hold this seat, but upon reaching legal voting age, the person shall relinquish the seat unless he or she becomes an elector, in which case the person shall retain the seat.

Seat 7 shall be held by a person appointed by the Director of the Office of Economic and Workforce Development or any successor office.

Seats 8 and 9 shall be held by persons appointed by the Board of Education of the San Francisco Unified School District. If at any time the Board of Education declines to appoint a member to Seat 8 or 9 and leaves the seat vacant for 60 days or longer, the Board of Supervisors may appoint a member of the public to fill the seat until such time as the Board of Education appoints a member.

Seat 10 shall be held by an employee of the Department of Public Health who has experience or expertise in the field of chronic disease prevention or treatment, appointed by the Director of Health.

Seat 11 shall be held by a person with experience or expertise in the field of oral health, appointed by the Director of Health.

Seat 12 shall be held by a person with experience or expertise in the field of food security or access, appointed by the Director of Health.

Seat 13 shall be held by an employee of the Department of Children, Youth & Their Families, appointed by the Director of that Department.

Seat 14 shall be held by an employee of the Recreation and Park Department, appointed by the General Manager of that Department.

Seat 15 shall be held by a parent or guardian of a student enrolled in the San Francisco Unified School District at the time of appointment, nominated by the San Francisco Unified School District's Parent Advisory Council, and appointed by the Board of Supervisors. If at any time the Parent Advisory Council declines to nominate a member to a vacant seat for 60 days or longer, the Board of Supervisors may appoint a member of the public to fill the seat until the seat becomes vacant again.

Seat 16 shall be held by a person with experience or expertise in services and programs for children ages five and under, appointed by the Board of Supervisors.

Seat Description		SDDTAC Member in FY2019-2020
Seat 1	Health Equity- Latino/Chicano/Indigena	Vanessa Bohm
Seat 2	Health Equity – Asian/Pacific Islander	John Maa
Seat 3	Health Equity – Black/African American	Joi Jackson-Morgan
Seat 4	Research/Medical Institutions	Roberto Ariel Vargas
Seat 5	Research/Medical Institutions	Jonathan Butler
Seat 6	Youth Seat	Aaron Kunz
Seat 7	Office of Economic and Workforce Development	Jorge Rivas (resigned December 2019, replaced with Larry McClendon)
Seat 8	San Francisco Unified School District	Saeeda Hafiz
Seat 9	San Francisco Unified School District	Lauren Heumann
Seat 10	Department of Public Health – Chronic Disease	Rita Nguyen
Seat 11	Department of Public Health - Oral Health	Irene Hilton
Seat 12	Department of Public Health - Food Access/Security	Shelley Dyer
Seat 13	Department of Children Youth and Their Families	Michelle Kim
Seat 14	Recreation and Parks Department	Linda Barnard
Seat 15	SFUSD Parent Advisory Council	Janna N. Cordeiro
Seat 16	Children 0-5 Years Old	Derik Aoki

Appendix B: SDDT-Funded Grants to Community-Based Organizations in FY19-20

Healthy Food Purchasing Supplement Grants

- EatSF/Vouchers 4 Veggies
- Heart of the City Farmers Market
- A Better Course

SDDT Healthy Communities Three-Year Grants

- Asociación Mayab
- Bayview Hunters Point Community Advocates
- BMAGIC
- Bounce Back and Healthy Generations Project
- Community Grows
- Community Well
- Farming Hope
- San Francisco African American Faith Based Coalition
- SisterWeb
- SoMa Community Action Network (SOMCAN)
- Urban Sprouts

Social Media Grants

- 18 Reasons
- 3rd Street Youth Center & Clinic
- Carnaval San Francisco
- Gum Moon Residence Hall
- Imprint City
- Mission High School
- Parents for Public Schools of San Francisco
- San Francisco Islamic School
- The Jamestown Community Center
- Ultimate Impact Inc.

SDDT Healthy Communities SUPPORT Grants

- 18 Reasons
- Asociación Mayab
- Bayview Clinic
- Bounce Back and Healthy Generations Project
- Children's Council
- Clinic by the Bay
- Community Grows
- Community Well
- Eat SF/SFGF
- Instituto Familiar de la Raza
- Jamestown Community Center
- Leah's Pantry
- Magic Tooth Bus
- Meals on Wheels SF
- Northridge Cooperative Housing Community Gardens
- Project Commotion
- Regents of UC/transitions clinic
- Regional Pacific Islander Task Force
- Renaissance Parents of Success
- Samoan Community Development Center
- SF African American Faith Based Coalition
- SF Brown Bombers
- SisterWeb
- St. Francis Living Room
- Urban Sprouts
- YMCA of SF

Oral Health Community Task Force Grants

- Chinatown Children's Oral Health Task Force
- Mission Children's Oral Health Task Force
- District 10 Children's Oral Health Task Force

Emergency Food Grants

Note: In addition to the community-based organizations listed below, SDDT COVID Emergency Food Grants were also given to SFUSD and the San Francisco Housing Authority.

- SFDPH MCAH partner organizations
- Latino Task Force (via fiscal sponsor: Mission Language Vocational Schools)
- African American Faith Based Coalition
- Farming Hope
- Bayview Hunters Point Community Advocates
- SF Produce Market

Appendix C: Healthy Food Purchasing Supplement Grants Overview FY19-20

Multi-year grants were administered by the San Francisco Public Health Foundation. In FY 2019-2020, grant funds from SDDT totaled \$1,350,931. All three of these grantees are focused on reducing food security.

Grantee Overview	Organization/Program Mission + Funded Program Description
<p>EatSF/Vouchers 4 Veggies</p> <p>FY 19-20 Budget: \$916,961</p> <p>Neighborhoods: City-wide</p>	<p>EatSF will increase food security and increase fruit and vegetable consumption. EatSF is a fruit and vegetable voucher program designed to make healthy food in neighborhood supermarkets, grocery stores and farmers markets affordable for low-income families and individuals. EatSF partners with the SFDPH Women, Infants, and Children (WIC) program to provide vouchers to pregnant WIC clients for 9 months. EatSF also partners with community-based organizations, social service agencies and safety net clinics in low-income neighborhoods to provide vouchers to their clients.</p> <p>Cissie Bonini Cissie.Bonini@ucsf.edu</p>
<p>Heart of the City Farmers Market</p> <p>FY 19-20 Budget: \$326,034</p> <p>Neighborhoods: City-wide</p>	<p>Heart of the City Farmers Market will increase food security and increase fruit and vegetable consumption through their Market Match program. Heart of the City Farmers Market is a farmer-operated market open every Sunday, Wednesday, and Friday at the UN Plaza in San Francisco’s Civic Center. The market attracts customers from across the city because of its high quality, affordable produce. Heart of the City Farmers Market has the distinction of being the largest farmers’ market to be part of the CalFresh/Electronic Benefit Transfer (EBT) program in California, and one of the five largest in the nation. The “Market Match” incentive program provides a dollar-for-dollar match of up to \$5 when an EBT purchase is made. This program allows CalFresh clients to expand their purchases of fresh, locally grown produce from California farmers. It also supports local farmers through direct sales to consumers.</p> <p>Kate Creps Kate@hotcfarmersmarket.org</p>
<p>A Better Course</p> <p>FY 19-20 Budget: \$107,936</p> <p>Neighborhoods: Southeast, Excelsior, Mission</p>	<p>A Better Course will increase food security and increase fruit and vegetable consumption through the Market Match program at California’s oldest farmers market - Alemany Farmers Market operated by San Francisco’s Real Estate Department. Since 2009, A Better Course has partnered with the Alemany Farmers Market to operate a Market Match incentive program for market shoppers using CalFresh/Electronic Benefit Transfer (EBT). This program allows CalFresh clients to expand their purchasing power to purchase fresh, locally grown produce from California farmers. A Better Course will also support Alemany Farmers Market to begin accepting EatSF Vouchers.</p> <p>Zetta Reicker Zetta@abettercourse.org</p>

Appendix D: Healthy Communities Three-Year Grantee Highlights FY19-20

Three-year grants administered by the San Francisco Public Health Foundation. Year 1 grants to 11 organizations totaled \$2,033,124.

Grantee Overview	Organization/Program Mission + Funded Program Description	Highlights from FY 2019-2020 Grant Reports
<p>Asociacion Mayab</p> <p>Year 1 Budget: \$200,000</p> <p>Neighborhood(s): Mission, Tenderloin</p> <p>Populations: Mayan</p> <p>Foci: physical activity and nutrition education, workforce</p>	<p>Asociacion Mayab provides cultural preservation and social services to Maya and other Indigenous immigrant communities in San Francisco. Funding will support our Decolonize Our Health Program that combines culturally and linguistically appropriate nutrition education, cooking demonstrations, dance, and physical activity programming to serve approximately 150 Maya individuals in the Mission and Tenderloin districts.</p> <p>Alberto Perez Rendon: aperendon@gmail.com</p>	<ul style="list-style-type: none"> - A group of 6 community experts was convened to create a new curriculum and train the trainer manual - The workgroup created a revised edition of the “Decolonize Our Health” program based on data from the pilot program - Provided training to 18 community members through a training partnership, which exceeded three-fold the goal of six participants - Provided Zumba classes and traditional classes in-person and online
<p>Bayview Hunters Point Community Advocates</p> <p>Year 1 Budget: \$150,207</p> <p>Neighborhood(s): Bayview Hunters Point</p> <p>Populations: Black/African American, immigrants</p> <p>Foci: PSE change strategy</p>	<p>Bayview Hunters Point Community Advocates aims to provide healthy, and quality food, that reaches all communities in our diverse neighborhood, through a cooperative owned and operated by and for Bayview-Hunters Point residents. Funding will support a community-owned co-op grocery store in the Bayview Hunters Point neighborhood to provide affordable healthy, high-quality food for vulnerable populations in southeast SF who suffer from a burden of chronic disease.</p> <p>Tony Kelly: tonykelly@astound.net</p>	<ul style="list-style-type: none"> - Drafted articles of incorporation and bylaws to incorporate as a co-op for food education and workforce development - Held organizational meetings; visited other co-ops; hired consultant for feasibility study; selected 13 community advisory board members - Conducted other market and industry research to support establishment of a Bayview co-op grocery - Started healthy food-box pick-up program, providing Bounty Bags in community

Grantee Overview	Organization/Program Mission + Funded Program Description	Highlights from FY 2019-2020 Grant Reports
<p>BMAGIC</p> <p>Year 1 Budget: \$175,966</p> <p>Neighborhood(s): Bayview Hunters Point</p> <p>Populations: Black/African American, low-income families, Latinx</p> <p>Foci: PSE change strategy, physical activity</p>	<p>BMAGIC's mission is to help create and maintain a deeper unified roadmap to social change while addressing the health and wellness needs of Bayview children, youth and their families. Funding will support the Bayview Park Rx Program will help us engage approximately 500 residents interested in chronic disease prevention and intervention through health and wellness activities, programs and park services.</p> <p>Lyslynn Lacoste: lyslynn@bayviewmagic.org</p>	<ul style="list-style-type: none"> - Identified populations and target counts for Park Rx intervention (3,525 at four clinics) - Hired a Community Engagement Coordinator to develop a campaign; developed 3 newsletters; engaged evaluator to develop plan - Hosted 4 Park Rx partner meetings; averaging 9 referrals per month before shelter-in-place orders - Connected with patients referred and enrolled 7 in scholarship program
<p>Bounce Back & Healthy Generations Project</p> <p>Year 1 Budget: \$198,875</p> <p>Neighborhood(s): Potrero Terraces and Annex public housing, (+influence local schools)</p> <p>Populations: Black/African American, Latinx, API children, families, individuals</p> <p>Foci: healthy eating, capacity building, workforce</p>	<p>Bounce Back Generation has promoted resilience to trauma in children since 2011. Our mission involves communities in their own healing. Funding will support community hiring to create and implement a wide public awareness campaign directed toward 300 Potrero/Bayview children to recognize the origins of negative coping behaviors and adopt resilient-building habits instead.</p> <p>Jennifer Dhillon: jennifer@bouncebackgeneration.org</p>	<ul style="list-style-type: none"> - Conducted outreach and a presentation series on the connection between sugary beverages and root causes of inequities - Hired 14 Community Resiliency Leaders, youth provided input on curriculum direction/focus and participated in health education learning - Trained new staff on BBG processes, as well as community outreach and facilitation support - Produced 5 videos for the online campaign “We Got This” on COVID, healthy cooking, stress and community-building
<p>Community Grows</p> <p>Year 1 Budget: \$174,460</p> <p>Neighborhood(s): Western Addition, Bayview-Hunters Point</p> <p>Populations: low-income youth and youth of color: Black/African American; Latinx, API, teens age 14-19 and TAY 19-25</p> <p>Foci: physical activity, healthy eating, youth leadership, workforce</p>	<p>Community Grows’ mission is to cultivate healthy youth through growing gardens in low-income, diverse communities, co-powering children to become healthy, eco-literate leaders. Funding will support our BEETS (Band of Environmentally Educated and Employable Teens) program will help employ 10 low-income youth of color to learn and lead health-focused workshops for 130 children and adults in the Western Addition and Bayview about nutrition, gardening and mindfulness, while building and maintaining edible gardens to increase access to fresh produce in their communities.</p> <p>Kelly ErnstFriedman: kelly@communitygrows.org</p>	<ul style="list-style-type: none"> - Hired 8 BEETs (Band of Environmentally Educated and Employable Teens); youth participated in 394 hours and earned \$6,030 - BEETs facilitated activities at Fall event on seasonal cooking; facilitated two workshops at Western Addition Beacon - BEETs stewarded and maintained African American Art and Culture Complex, Koshland Garden and the Buchanan Mall - Worked with consultants to updated evaluation tools

Grantee Overview	Organization/Program Mission + Funded Program Description	Highlights from FY 2019-2020 Grant Reports
<p>Community Well</p> <p>Year 1 Budget: \$162,469</p> <p>Neighborhood(s): District 11-Excelsior</p> <p>Populations: Asian, Latinx</p> <p>Foci: capacity building, physical activity, healthy eating, workforce</p>	<p>Community Well’s mission is to connect residents with high-quality holistic services supporting self-care and overall wellness. Funding will support program delivery of weekly classes on food as medicine, movement and emotional wellness. We aim to serve 1,285 historically underserved residents of southern SF districts, promoting healthy behaviors and reduced rates of chronic illness.</p> <p>Jennifer Moran: jenmoran@communitywellsf.com</p>	<ul style="list-style-type: none"> - Built capacity with local community by hiring 3 facilitators not yet affiliated with network to build infrastructure of weekly classes - Conducted a needs assessment; facilitated curriculum and survey development for weekly Food As Medicine classes and circles - Enrolled participants from priority populations into two cohorts; provided each cohort with 6-week transformative health program
<p>Farming Hope</p> <p>Year 1 Budget: \$195,440</p> <p>Neighborhood(s): Tenderloin, Mid-Market, and Mission</p> <p>Populations: very low-income and people experiencing homelessness</p> <p>Foci: Healthy eating, workforce development</p>	<p>Farming Hope’s culinary apprentice program provides workforce development to formerly incarcerated and homeless neighbors. Funding will employ trainees at Farming Hope's social enterprise restaurant and urban garden, supporting 20+ apprentices annually from Mission, SoMa and Tenderloin neighborhoods. This support will help feed 18,000 customers, while raising awareness about veggie-forward diets.</p> <p>Jamie Stark: jamie@farminghope.org and team@farminghope.org</p>	<ul style="list-style-type: none"> - Added 14,993 community meals to keep program growing; some to frontline workers, almost all to SROs and shelters/hotels run by the City - Averaged 365 apprentice paid hours during three months; identified and recruited 16 Culinary Apprentice Program participants - A total of 3 apprentices obtained full-time any employment or continued studies - Produced 42 pounds of organic produce grown in urban garden; 35 plants and quantities were adopted from garden by community members.
<p>San Francisco African American Faith Based Coalition</p> <p>Year 1 Budget: \$200,000</p> <p>Neighborhood(s): Western Addition, Bayview-Hunters Point, OMI</p> <p>Populations: Black/African American</p> <p>Foci: Healthy eating</p>	<p>The SF African American Faith Based Coalition is committed to advocating and serving the needs of the underserved African American community (primarily in the Bayview District) while promoting better and healthier living. Funding will aid in building capacity for the Coalition to provide services and serve at least 450 people over the three-year cycle with healthy food training and food security.</p> <p>Ernie Jackson: pastorelj@gmail.com</p> <p>Raynard Hillis: pastorrhh@gmail.com</p>	<ul style="list-style-type: none"> - Engaged 23 liaisons for 21 participating churches; appointed 2 Lead Liaisons to coordinate activities of food procurement, prep and delivery - In lieu of workshops, monitored and tracked which churches provided food service to their congregations and communities - Member churches provided hot meals and fresh produce to more than 3,500 households, representing over 30,000 individuals - Five chefs prepared food; close to 130 people delivered food; emergency food program operated at one or more of our churches every day - Developed coalition website and social media page to develop and implement a healthy food awareness campaign for coalition churches

Grantee Overview	Organization/Program Mission + Funded Program Description	Highlights from FY 2019-2020 Grant Reports
<p>SisterWeb</p> <p>Year 1 Budget: \$200,000</p> <p>Neighborhood(s): Bayview Hunters Point, District 10</p> <p>Populations: African American, Latinx, and Pacific Islander communities</p> <p>Foci: nutrition, physical activity</p>	<p>San Francisco Community Doula Network cultivates a network of peer doulas for women most impacted by adverse birthing experiences. Funding will pair 60 African American, Latinx, and Pacific Islander mothers and families with a doula from their community and provide them with specialized prenatal, peripartum, and postpartum care that includes one-to-one and group Healthy Eating and Active Living (HEAL) skills-building and coaching.</p> <p>Marna Armstead: m.armstead@sisterweb.org</p>	<ul style="list-style-type: none"> - Purchased and adapted curriculum to be used by doulas for (now future) workshops and individual sessions with mothers - Provided first half of doula nutrition training; discussed YMCA memberships with mothers as part of programming to resume FY 20-21 - Leveraged established referral system with 4 institutions and in-staff training to prenatal providers - Reallocated funds to doula wages; partnered with UC Berkeley on effectiveness of doula care on birth outcomes
<p>SoMa Community Action Network (SOMCAN)</p> <p>Year 1 Budget: \$175,708</p> <p>Neighborhood(s): SOMA, Tenderloin, Excelsior</p> <p>Populations: Filipino American</p> <p>Foci: PSE change strategy, Physical activity, health eating, capacity building</p>	<p>SOMCAN serves low-income, immigrant youth and families in SOMA, Excelsior, and the greater SF. Funding will support “Our Health/Kalusugan, Our Community/Bayan” project, which aims to empower, and build the leadership and civic engagement of SF Filipino residents to attain healthier lifestyles while advocating for healthier neighborhoods.</p> <p>Angelica Cabande: acabande@somcan.org</p>	<ul style="list-style-type: none"> - Conducted community outreach at schools, churches, partner organizations, events, and key institutions where Filipinos congregate - Recruited 9 Community Health Ambassadors from a diverse population of Filipino seniors, adults and youth; completed 8-hour training - Developed and implemented a community-led and community-implemented health assessment, including focus group with 18 participants - Disseminated educational materials electronically (English/Tagalog) in monthly newsletter to over 1,881 subscribers - Offered culturally relevant weekly physical dance fitness classes and wellness workshops

Grantee Overview	Organization/Program Mission + Funded Program Description	Highlights from FY 2019-2020 Grant Reports
<p>Urban Sprouts</p> <p>Year 1 Budget: \$200,000</p> <p>Neighborhood(s): Excelsior, Sunnysdale-public housing, Mission Bay, June Jordan High School</p> <p>Populations: Low-income of all ages, including youth</p> <p>Foci: PSE change strategy, nutrition-garden, workforce, capacity building, youth leadership</p>	<p>Urban Sprouts seeks to restore cultural connections to health and wellness; reduce health disparities among chronically under-resourced communities of color in Southeast SF; and ready our community for meaningful and gainful employment. Funding will support our annual work with 1600 low-income individuals of all ages through garden-based education, job-readiness, and community health & nutrition education programs in the Excelsior, Sunnysdale, and Mission Bay communities.</p> <p>Ileana Mar: ileana@urbansprouts.org</p>	<ul style="list-style-type: none"> - Taught group and one-on-one classes (live and online) on hands-on, garden-based education (soil cultivation, water-wise gardening, etc.) - Provided meditation classes for high school students and teachers weekly at the June Jordan Farm & Kitchen - Produced online media for community, emphasizing home gardening activities such as meditation, herbal medicine and food production - Hired 7 high school youth for the Sprout Out Fall 2019 Semester; 8 high school youth for the Sprout Out Spring 2020 Semester; 4 transitional aged youth as Program Assistants; 4 Sunnysdale Residents as program associates; and 1 Program Associate to support the education program - Maintained the gardens, supported the production of food, and distributed food at food pantries, hosted two community harvests, and continued to track the quality of fresh produce grown and distributed

Appendix E: Social Media Grantee Highlights

FY19-20

One-time grants of \$10,000 per grantee (10 grantees) administered by the San Francisco Department of Public Health.

Grantee Overview	Organization/Program Mission + Funded Program Description	Highlights from FY 2019-2020 Grant Reports
<p>18 Reasons</p> <p>Neighborhood(s): Mission</p> <p>Populations: Low-income adults, kids, teens, and families</p>	<p>18 Reasons is a community cooking school offering free cooking and nutrition classes to low-income adults, kids, teens, and families.</p> <p>For many years, we hosted a rotating art gallery featuring food-related art. We are excited to reignite our artistic creativity and host a special event in our classroom in the Mission to celebrate healthy beverages through art.</p> <p>Sarah Nelson: sarah@18reasons.org</p>	<p>47 posts</p> <ul style="list-style-type: none"> - Facebook followers: 9,010, Twitter followers: 10,600 - - 18 Reasons' audience is 78% women and 22% men - Most followers (71%) are between 24 and 44 years old <p>Lesson 6 of 18 Reasons' Cooking Matters series focused on water. They also distributed handouts on tap vs. bottled water and the true cost of water.</p>
<p>3rd Street Youth Center & Clinic</p> <p>Neighborhood(s): Bayview Hunters Point (BVHP)</p> <p>Populations: Black/African America, homeless youth</p>	<p>3rd Street Youth Center & Clinic serves more than 1200 young people, ages 12-24, from Bayview Hunters Point (BVHP) each year through a full-service primary health care clinic (a satellite clinic of the San Francisco Department of Public Health), behavioral health services like individual and group therapy, youth development programs, workforce development services, 3rd StrEATS, a food pantry/CSA program that gives young people and their families fresh organic produce twice a week.</p> <p>In the last two years, 3rd Street has built robust housing services which include HomePoint, the only rapid re-housing program for youth who are homeless in BVHP, helping them to identify and obtain immediate and permanent housing, and 3rd Street is now one of San Francisco's Youth Access Points, providing housing-focused case management that includes housing placement services, rental support, and move-in costs.</p> <p>Through this partnership with SDDT, 3rd Street is excited to foster the support and voices of youth participants of its leadership development and civic engagement program, 3rd Street's Leadership Academy (3LA), to help at</p>	<p>96 posts</p> <ul style="list-style-type: none"> - Facebook followers: 498, Twitter followers: 435, Instagram followers: 633 - 3rd Street posted SDDT-related content 36 times on Instagram for total of 5,019 views, reaching average of 139 youth each time

Grantee Overview	Organization/Program Mission + Funded Program Description	Highlights from FY 2019-2020 Grant Reports
	<p>least 300 young people gain access to critical information that can positively impact their health and wellness and community.</p> <p>Jason McMonagle: jason@3rdstyouth.org</p>	
<p>Carnaval San Francisco</p> <p>Neighborhood(s): City Wide</p>	<p>42 year old Carnaval San Francisco is the largest and oldest diverse, multi-cultural celebration in California held on Memorial Day weekend. We use our Grand Parade and two-day Street Fair to celebrate the region’s diversity but also use the opportunity to provide health education and health screening services to consumers as part of our block long Health and Wellness Pavilion.</p> <p>Our theme for 2020 is “Salud es Poder” or “Health is Power” and we will use a combination of social media, stage mentions, Drum Beat newsletter, and our Health and Wellness Pavilion to incorporate anti-sugary drink messaging and education for the diverse participants attending Carnaval San Francisco May 23rd and May 24th.</p> <p>Arturo Riera: a.riera@CarnavalSanFrancisco.org</p>	<p>30 posts</p> <ul style="list-style-type: none"> - Facebook followers: 20,304, Instagram followers: 6,152 - SDDT FB post reach: 10,659, FB post engagement: 177 - SDDT IG post reach: 10,993, IG post engagement: 349 - Reach = is the total number of unique people who see the content; Engagement = number of shares, likes, comments <p>Carnaval SF incorporated anti-sugary drink messaging into its Comparsa/contingent orientation tool kit and its Health and Wellness Pavilion partner focus during Salud es Poder, a virtual event held on May 24th, 2020.</p>
<p>Gum Moon Residence Hall</p> <p>Neighborhood(s): Chinatown, city-wide</p> <p>Populations: Asian immigrants</p>	<p>Gum Moon is a non-profit organization promoting affordable housing for survivors of domestic violence and trafficking women.</p> <p>Through our community projects known as Asian Women's Resource Center, we provide comprehensive family support programs such as parent-child interactive groups, parenting support and education classes, information and referral services to Asian immigrant families with children 0 to 5 years old.</p> <p>As a program partner, Gum Moon/AWRC is most excited to promote through our social media the SDDT app that our clients can use as an information and educational resource.</p> <p>Gloria Tan, awrcgloria@pacbell.net</p>	<p>53 posts</p> <ul style="list-style-type: none"> - Facebook followers: 189 <p>Gum Moon Residence Hall hosted an hour-long virtual event to celebrate Mother's Day with approx. 95 families from SF’s Chinatown, Richmond and Sunset districts. Staff presented info on the importance of drinking at least 8 cups of water daily and there was a discussion on benefits of hydration to overall health. Parents were taught how to read labels for sugar content. There were demonstrations on how to make flavored water with fruits, cucumbers and herbs (ex: mint) as well as a food demonstration on how to make avocado muffins. Gum Moon/AWRC has been sharing yoga videos with their families so that they continue to keep fit while Shelter-in-Place is in effect.</p>

Grantee Overview	Organization/Program Mission + Funded Program Description	Highlights from FY 2019-2020 Grant Reports
<p>Imprint City</p> <p>Neighborhood(s): Bayview</p> <p>Populations: Black/African America</p>	<p>Imprint City's Bayview Booms program activates and beautifies underutilized open spaces with healing arts, and wellness activities.</p> <p>We mostly work with community gardens and communities who have been underserved.</p> <p>We look forward to implementing the online tool to support and enhance our community's knowledge around drinking sugary beverages and health outcomes.</p> <p>Tyra Fennell: tyra@imprintcity.org</p>	<p>77 posts</p> <p>- Facebook followers: 1,372, Twitter followers: 765</p> <p>Imprint City is working on its Garden Project - Bayview Blooms Garden Crawl - which is currently scheduled for late August or early September. This is also when they will be able to do a health education training with their staff.</p>
<p>Mission High School</p> <p>Neighborhood(s): Mission</p> <p>Populations: High school seniors (12th grade students)</p>	<p>We are a senior Agricultural Economics class in the Urban Agriculture pathway at Mission High School.</p> <p>We are excited to expand our network of partners and recipients as we continue to focus on food justice work within our community.</p> <p>Mark D'Acquisto: dacquistom@sfusd.edu</p>	<p>13 posts</p> <p>- Facebook followers: 56, Twitter followers: 296, Instagram followers: 361)</p> <p>Mission High School did peer-to-peer teaching on sugar consumption before shelter-in-place. This work was also presented at the Sugar Tax committee meeting on 6/19.</p>
<p>Parents for Public Schools of San Francisco</p> <p>Neighborhood(s): City Wide</p> <p>Populations: Chinese, Latinx, and Black/African America, public school students and caregivers,</p>	<p>At Parents for Public Schools of San Francisco (PPS-SF) we aim to promote the fundamental value of public education and to pursue the success of every public school by sharing knowledge, bridging communities, and informing policy.</p> <p>Our programs help families to navigate SFUSD enrollment, understand education, and to become empowered engaged members of their school communities.</p> <p>PPS-SF is so excited to be a part of this community education initiative! We know that healthy students and families make for healthier schools! We look forward to enhancing community engagement and expanding the span of outreach through the use of our existing social media platforms in Chinese, English, and Spanish.</p> <p>Teresa Arriaga, Teresa@ppssf.org</p>	<p>142 posts</p> <p>- Facebook followers: 3,691, Spanish Account FB followers: 71, Twitter followers: 1,860</p> <p>- Boardwatch TW Account followers: 414, Instagram followers: 634</p>
<p>San Francisco Islamic School</p> <p>Neighborhood(s): City Wide</p>	<p>The San Francisco Islamic School (SFIS) is a non-profit education organization, established in 2005.</p> <p>SFIS, both full time and Sunday school, consists of volunteers, staff, and students of diverse ethnic, cultural and socio-economic backgrounds.</p> <p>Our curriculum and community enrichment programs allow individuals to develop their knowledge, identity, social skills and physical being with the goal that they may be able to effectively implement these attributes in their</p>	<p>47 posts</p> <p>- Facebook followers: 1,077, Twitter followers: 36)</p> <p>San Francisco Islamic School hosted a Zoom meeting with families that discussed the negative health outcomes of</p>

Grantee Overview	Organization/Program Mission + Funded Program Description	Highlights from FY 2019-2020 Grant Reports
	<p>daily lives and as contributors to society.</p> <p>Through our exciting partnership with SDDT, we are looking forward to bringing much-needed awareness of the health harms of sugary drinks and promote a healthy way of living by integrating nutrition into practice, with the hope of eliminating obesity and deadly diseases like type-2 diabetes from our future generations.</p> <p>Shahin Shaikh: Pto@sfislamicsschool.org, sana_shaikh@yahoo.com</p>	<p>sugar consumption. SFIS also distributed a health reminder infographic to families.</p>
<p>The Jamestown Community Center</p> <p>Neighborhood(s): Buena Vista</p>	<p>The Jamestown Community Center is excited to host a Spring Resource Fair at the Buena Vista Horace Mann K-8 Community school.</p> <p>We are excited to provide our families the opportunity to connect with other community members around food access and cooking with health in mind. This will be incorporated with other opportunities at the resource fair including but not limited to registration for summer youth programming, neighborhood soccer teams, dance and music classes.</p> <p>Myrna Melgar: myrna@jamestownsf.org</p>	<p>60 posts</p> <ul style="list-style-type: none"> - Facebook followers: 2,425, Twitter followers: 211) - Women were 64% of the audience that was engaged/reached - 18% of these women were between ages 25-34 and 17% of women were between ages 35-44 - The highest engagement age range among men was 25-34 years old (11% of overall engagement) - Most spoken languages are English, followed by Spanish - Other than the US, the country with the most reach was Mexico
<p>Ultimate Impact Inc.</p> <p>Neighborhood(s): City Wide</p> <p>Populations: Youth</p>	<p>Ultimate Impact is a youth development organization that uses the team sport of ultimate Frisbee as the framework for providing youth from underrepresented communities with increased opportunities, confidence, communication abilities, and conflict-resolution skills.</p> <p>Through weekly training sessions, peer interaction, and consistent adult mentorship, Ultimate Impact creates a positive environment for youth to have fun, be active, develop healthy habits, improve athletic skills, and build community.</p> <p>Ultimate Frisbee (commonly known as “Ultimate”) is a fun, fast-paced, non-contact team sport that is low cost, easy to learn, and can be played anywhere.</p> <p>We are looking forward to working with you to educate our youth about the importance of making healthy decisions when it comes to food and drinks.</p> <p>Rocky Beach: ocky@ultimate-impact.org</p>	<p>13 posts</p> <ul style="list-style-type: none"> - Facebook followers: 286, Twitter followers: 273

Appendix F: Healthy Communities SUPPORT

Grantees Highlights FY19-20

Nine-month grants administered by the San Francisco Public Health Foundation for one-time expenses to build the capacity of organizations doing work on topics supported with SDDT funds in communities disproportionately impacted by diet-sensitive chronic disease. Grants to 26 organizations totaled \$1,702,211.

Grantee	Organization's Programming Focuses on:	Organization/Program Mission + Funded Program Description
18 Reasons Budget: \$75,000	Neighborhoods(s): Tenderloin, Bayview, Western Addition, Mission, Excelsior Populations: Low-income teens and families Topics: food access, healthy eating	The mission of 18 Reasons is to empower our communities with the confidence and creativity needed to buy, cook, and eat good food every day. Our Cooking Matters program offers free cooking and nutrition classes to low-income adults, kids, and families in the Tenderloin, Western Addition, Excelsior, and the Mission neighborhoods. This funding will be used to build several areas of agency capacity. Sarah Nelson: sarah@18reasons.org
SF Brown Bombers Budget: \$20,000	Neighborhoods(s): Bayview Hunters Point Populations: 5-15 years old and their families Topics: physical activity	SF Brown Bombers is a youth development organization that provides Bayview Hunter's Point youth with leadership opportunities. This grant will help purchase a 12-15 passenger Van that will allow us to provide safe passage for youth ages 5 to 16 that we serve in the Bayview Hunter's Point community and beyond. Our efforts will work towards improving health disparities in our targeted communities. Ranon Ross: ranonross@hotmail.com
Children's Council Budget: \$66,930	Neighborhoods(s): Mission, Ingleside, Excelsior, Bayview, Hunters Point, and Visitation Valley Populations: Low-income children ages 0-5 Topics: healthy eating, active living, water consumption, capacity building	Children's Council works to ensure that all children in San Francisco are cared for in environments where they can develop socially, emotionally and cognitively. This grant will expand our Healthy Apple Program, pairing early educators with peer mentors to implement nutrition/physical activity best practices, establishing lifelong healthy habits for low-income children. April Homan: ahoman@childrenscouncil.org Julia Middleton: jmiddleton@childrenscouncil.org

Grantee	Organization's Programming Focuses on:	Organization/Program Mission + Funded Program Description
<p>Clinic by the Bay</p> <p>Budget: \$72,315</p>	<p>Neighborhoods(s): Excelsior</p> <p>Populations: working uninsured of SF</p> <p>Topics: clinical services, health coaching (healthy eating, physical activity)</p>	<p>Clinic by the Bay's mission is to understand and serve, with dignity and respect, the health & wellness needs of the working uninsured in the San Francisco Bay Area. This funding will help us serve our patients by updating our computer system allowing for better service provision and reporting of data.</p> <p>David Wallace: davidw@clinicbythebay.org</p>
<p>Eat SF/SFGF</p> <p>Budget: \$74,750</p>	<p>Neighborhoods(s): Tenderloin, SOMA, Western Addition, Bayview, Mission</p> <p>Populations: pregnant MediCal/SSI recipients, people w/ diet-related chronic disease, seniors, very low-income families</p> <p>Topics: healthy eating, food access</p>	<p>Vouchers4Veggies – EatSF addresses the unique food security issues in San Francisco by providing healthy food vouchers to low-income individuals through networks of community-based organizations and clinics. This grant will help improve service delivery mechanisms (explore debit cards vs. paper vouchers, improve website, develop geo-locating map) and streamline voucher processing systems, reaching more low-income, food insecure households and reduce operating costs.</p> <p>Cissie Bonini: Cissie.Bonini@ucsf.edu</p> <p>Note: Due to evolving limitations and opportunities related to the COVID-19 pandemic, part of the Healthy Communities SUPPORT grant for EatSF/Vouchers 4 Veggies supported the distribution of 100,912 emergency food vouchers.</p>
<p>Instituto Familiar de la Raza</p> <p>Budget: \$74,309</p>	<p>Neighborhoods(s): Mission, Excelsior, TL</p> <p>Populations: Latinx, Indigena, Mayan</p> <p>Topics: active living</p>	<p>The mission of Instituto Familiar de la Raza is to promote and enhance the health and well-being of the San Francisco Chicano/Latino/Indígena community. This grant will fund Paso a Paso, a health education and exercise intervention program to reduce the impact of chronic conditions, including cardiovascular disease, obesity, and diabetes, in the low-income Latinx community.</p> <p>Estela Garcia: estela.garcia@ifrsf.org</p>
<p>Jamestown Community Center</p> <p>Budget: \$31,700</p>	<p>Neighborhoods(s): Mission, Outer Excelsior, and Noe Valley</p> <p>Populations: Spanish speaking, Mexican and Central American</p> <p>Topics: healthy eating</p>	<p>Jamestown Community Center is developing a pilot program to train (4) promotoras to deliver nutrition education to families, that is linked to our after school cooking classes, completing a 2-generation learning model. This program will work with Asociacion Mayab, who will adapt their Decolonize Our Health curriculum to our communities.</p> <p>Jessica Linares: jessica@jamestownsfsf.org</p>

Grantee	Organization's Programming Focuses on:	Organization/Program Mission + Funded Program Description
<p>Northridge Cooperative Housing Community Gardens</p> <p>Budget: \$73,370</p>	<p>Neighborhoods(s): Bayview hunters Point</p> <p>Populations: Black/African American, API, transition age youth</p> <p>Topics: active living, workforce, healthy eating, food access</p>	<p>Northridge Coop Homes Community Garden's mission is to work with youth, to maintain and enhance our community garden, grow fresh produce, and distribute these throughout our community free of charge. Funds will support our community garden program, including education and outreach related to sugary drinks for 300 families. We will emphasize the importance of drinking water and ways to connect with our garden, benefitting from increased exercise, and healthy beverage alternatives from garden produce.</p> <p>Drew Becher: drew@sfparksalliance.org</p> <p>Note: Due to evolving limitations and opportunities related to the COVID-19 pandemic, part of the Healthy Communities SUPPORT grant for Northridge CommUNITY Gardens supported the distribution of 149 grocery bags/boxes and 282 meals to community members in priority populations.</p>
<p>Project Commotion</p> <p>Budget: \$16,565</p>	<p>Neighborhoods(s): Mission</p> <p>Populations: Latinx, children 8 months-14 years, families</p> <p>Topics: physical activity</p>	<p>Project Commotion's mission is to foster healthy development in children of all abilities through purposeful movement, play, and family and community relationships. Funding for digital equipment and consultant services will enable us to gather, use, and store data to assess and improve HEAL programming for 1,000+ Latinx youth and families.</p> <p>Ellie Mashhour: ellie@icrichild.org</p> <p>Susan Osterhoff: susan@projectcommotion.org</p>
<p>Regional Pacific Islander Task Force</p> <p>Budget: \$75,000</p>	<p>Neighborhoods(s): Southeast</p> <p>Populations: Pacific Islander</p> <p>Topics: HEAL-PSE change strategy, capacity building</p>	<p>Regional Pacific Islander Task Force is a collaborative of community leaders who volunteer their time to serve the PI community of the San Francisco Bay Area. We work with Tongan and Samoan churches to establish healthy eating policies, community gardening projects, and provide healthy snacks for PI youth, seniors, and mental health programs. Funding will help improve our social media and promotion of health education through the purchasing of new printers, computers, software, and evaluation software applications.</p> <p>Patsy Tito: patsy.tito@scdcsf.org</p> <p>Taunu'u Ve'e: tauvee@gmail.com</p>

Grantee	Organization's Programming Focuses on:	Organization/Program Mission + Funded Program Description
<p>Samoan Community Development Center</p> <p>Budget: \$75,000</p>	<p>Neighborhoods(s): Visitacion Valley, Bayview Hunter's Point, Potrero Hill, outer Mission</p> <p>Populations: Pacific Islander, children/youth/ youth adults between 0-24 years old, and low-income populations</p> <p>Topics: healthy eating</p>	<p>The Samoan Community Development Center's mission to promote an inclusive environment in the San Francisco Bay Area where Samoan and Pacific Islander voices are heard, and communities are served and thriving. Funds will help hire a consultant for curriculum development, purchase computer and software equipment for tracking, exercise equipment for community members, and provide community stipends for community leaders that can promote and empower the community to participate in workshops.</p> <p>Patsy Tito: patsy.tito@scdcsf.org</p> <p>Note: Due to evolving limitations and opportunities related to the COVID-19 pandemic, part of the Healthy Communities SUPPORT grant for the Samoan Community Development Center supported the distribution of 1,636 grocery bags/boxes to community members in priority populations.</p>
<p>SisterWeb</p> <p>Budget: \$75,000</p>	<p>Neighborhoods(s): Southeast</p> <p>Populations: Pregnant women, Black/African American, Latinx, API</p> <p>Topics: healthy eating, active living. Breastfeeding</p>	<p>SisterWeb: San Francisco Community Doula Network cultivates a network of peer doulas for women most impacted by adverse birthing experiences. Funding will help build long-term organizational capacity to continue providing the community doula program that pairs families with doulas from their community and provides specialized prenatal, peripartum, and postpartum care including one-to-one and group Healthy Eating and Active Living (HEAL) skills-building and coaching.</p> <p>Marna Armstead: m.armstead@sisterweb.org</p>
<p>St. Francis Living Room</p> <p>Budget: \$75,000</p>	<p>Neighborhoods(s): Tenderloin</p> <p>Populations: Low-income seniors, homeless</p> <p>Topics: healthy eating, food access</p>	<p>The St. Francis Living Room provides a nutritious breakfast to very low-income and homeless seniors (age 60 and up) who live in Tenderloin SROs or hotels, without kitchens or safe spaces to congregate. This grant help upgrade a 25+ year old kitchen to serve healthier, more nutritious breakfasts to an average of 75 very low-income seniors each weekday (335 clients/year).</p> <p>Jonathan Lowell: jonathan@sflivingroom.org</p> <p>Note: Due to evolving limitations and opportunities related to the COVID-19 pandemic, part of the Healthy Communities SUPPORT grant for St Francis Living Room supported the distribution of 4,108 meals to community members in priority populations.</p>

Grantee	Organization's Programming Focuses on:	Organization/Program Mission + Funded Program Description
Urban Sprouts Budget: \$45,019	Neighborhoods(s): Southeast: Sunnydale, Mission Bay, Excelsior Populations: Black/African American, Latinx, API, native Indian, hire low-income youth 13 or older Topics: physical activity, healthy eating, workforce development, food access	Urban Sprouts seeks to restore cultural connections to health and wellness; reduce health disparities among chronically under-resourced communities of color in Southeast SF; and ready our community for meaningful and gainful employment. Funds will aid in the completion of a multi-year strategic plan which includes codifying trauma-informed, anti-racist policies and procedures, and evaluation instruments that will support our work with 1600 low-income individuals of all ages. Ileana Mar: ileana@urbansprouts.org Note: Due to evolving limitations and opportunities related to the COVID-19 pandemic, part of the Healthy Communities SUPPORT grant for Urban Sprouts supported the distribution of 91 grocery bags/boxes (containing 115 pounds of produce) to community members in priority populations.
YMCA of SF Budget: \$75,000	Neighborhoods(s): Bayview, Mission, Vista Valley, Western Addition, Excelsior, Chinatown. (94127, 94102, 94108, 94112, 94115, 94124, 94134, 94107) Populations: Adults, overweight, SFHP Medi-Cal beneficiaries Topics: healthy eating, physical activity, water consumption	The YMCA's Diabetes Prevention Program (DPP) serves prediabetic adults (18 or older) through the promotion of daily food tracking, increased physical activity, and moderate weight loss. Funds will support operating and personnel expenses, the hiring of a coordinator to support program recruitment and enrollment, and increased access to services among other organization supports. Emily Turpin: ETurpin@ymcasf.org
Leah's Pantry Budget: \$75,000	Neighborhoods(s): Mid-market, Tenderloin, Bayview Hunters Point, Mission, Potrero Hill Populations: Transitional age youth, Black/African American, Latinx, adult caregivers Topics: Healthy eating	Leah's Pantry's mission is to improve the health, wellness, and resilience of communities through trauma-informed nutrition security. Funds will help development and implementation of nutrition education curricula, a communication toolkit, and a nutrition education evaluation framework based on the science of trauma and resilience. Adrienne Markworth: adrienne@leahspantry.org
Renaissance Parents of Success Budget: \$41,637	Neighborhoods(s): Bayview Hunters Point Populations: Black/African American Topics: Healthy eating, Acting living, workforce	Renaissance Parents of Success (RPOS) chronic disease prevention activities will focus on delivering education, programs & services. Titled 'For Our Optimal Destiny (FOOD)' the program will reinforce proven facts that food not only addresses initial hunger & desire, but also sets the path for future impacts on physical and emotional health. Funds will be used for IT equipment, applications, IT intern, IT consultant. Tempi Priestly: tempri_priestly@yahoo.com

Grantee	Organization's Programming Focuses on:	Organization/Program Mission + Funded Program Description
<p>Bayview Clinic</p> <p>Budget: \$75,000</p>	<p>Neighborhoods(s): Bayview Hunters Point</p> <p>Populations: Black/African American, Latinx, low income</p> <p>Topics: Healthy eating physical activity</p>	<p>Bayview Clinic's mission is to provide innovative health and wellness services to all, with the goal of African American health equity. Fund for consultant to lead a community assessment and awareness campaign, launch Food Pharmacy, material development, equipment.</p> <p>Brenda Crawford: bcrawford@MarinCityClinic.org</p>
<p>Community Grows</p> <p>Budget: \$74,699</p>	<p>Neighborhoods(s): Western Addition, Bayview Hunters Point</p> <p>Populations: low-income teen youth- African American, Latinx, API</p> <p>Topics: Workforce development, healthy eating</p>	<p>Community Grows' mission is to cultivate healthy youth through growing gardens in low-income, diverse communities, co-powering children to become healthy, eco-literate leaders. Fund will support expansion of teen youth development and workforce readiness program BEETs: hire consultant to support curriculum/program development, purchase a 15-passenger van to provide more workshops to other neighborhoods.</p> <p>Kelly ErnstFriedman: kelly@communitygrows.org</p>
<p>SF African American Faith Based Coalition</p> <p>Budget: \$75,000</p>	<p>Neighborhoods(s): Western Addition, Bayview-Hunters Point, OMI</p> <p>Populations: Black/African American</p> <p>Topics: Healthy eating,</p> <p>Food security</p>	<p>The SF African American Faith Based Coalition is committed to advocating and serving the needs of the underserved African American community (primarily in the Bayview District) while promoting better and healthier living. Funds will aid in building capacity for the Coalition to provide services and serve at least 450 people over the three-year cycle with healthy food training and food security.</p> <p>Ernie Jackson: pastorelj@gmail.com</p> <p>Raynard Hillis: pastorrh@gmail.com</p>
<p>Asociacion of Mayab</p> <p>Budget: \$75,000</p>	<p>Neighborhoods(s): Mission, Tenderloin</p> <p>Populations: Maya</p> <p>Topics: Healthy eating, active living</p>	<p>Asociacion Mayab provides cultural preservation and social services to Maya and other Indigenous immigrant communities in San Francisco. Funds will support Decolonize Our Health Program that combines culturally and linguistically appropriate nutrition education, cooking demonstrations, dance, and physical activity programming to serve Maya individuals in the Mission and Tenderloin districts.</p> <p>Alberto Perez Rendon: aperendon@gmail.com</p>
<p>Bounce Back and Healthy Generations Project</p> <p>Budget: \$74,850</p>	<p>Neighborhoods(s): Potrero Annex and Terraces public housing</p> <p>Populations: Black/African American, Latinx, API, very low-income families, youth</p> <p>Topics: Healthy eating, workforce development</p>	<p>BBG's mission involves communities in their own healing. Funds will support creating instructional videos on food preparation, nutrition, stress reduction, produced, filmed and edited by PTA residents.</p> <p>Jennifer Dhillon: jennifer@bouncebackgeneration.org</p>

Grantee	Organization's Programming Focuses on:	Organization/Program Mission + Funded Program Description
Community Well Budget: \$74,713	Neighborhoods(s): Excelsior Populations: Black/African American, Latinx, API, youth and pregnant women Topics: Healthy eating, physical activity	Community Well's mission is to connect residents with high-quality holistic services supporting self-care and overall wellness. Funds will be used to create system for program management, database, consultants, website design. Jennifer Moran: jenmoran@communitywellsf.com
Magic Tooth Bus Budget: \$74,988	Neighborhoods(s): Chinatown, Bayview/Hunters Points, SOMA, and Mission Populations: Children of low income Topics: Oral health	Magic Tooth Bus is to provide oral hygiene education in schools-preschools, and K-12. Funds will support hiring oral health educator, consultant for architectural design, staff training, supplies, etc. magictoothbus@gmail.com
Meals on Wheels SF Budget: \$61,366	Neighborhoods(s): Tenderloin, SOMA, Bayview Populations: Income seniors and adults with disabilities Topics: Healthy eating, food security	Meals on Wheels SF provides Meals/grocery delivery, service linkages, nutrition education. Funds will be used for registered dietician, Chief Food and Operations officer, and consultant with plant-based menu expertise. Ashley McCumber: amccumber@mowsf.org Janice Levy: jlevy@mowsf.org
Regents of UC/transitions clinic Budget: \$75,000	Neighborhoods(s): Bayview Hunters Point Populations: Black/African American impacted by criminal justice system Topics: Health eating	Regents of UC/transitions clinic provides health education, healthy produce, and enhanced services to individuals and families. Funds will be used for consultants, intern stipends, and refrigerators. Christine Morris: Christine.Morris@ucsf.edu

Appendix G: Oral Health Community Task Force Grants Overview FY19-20

Multi-year grants administered by the San Francisco Department of Public Health. These grants support three community task forces addressing children's oral health with \$150,000 per task force annually.

Grantee	Mission and Program
Chinatown Children's Oral Health Task Force	The Chinatown Task Force on Children's Oral Health is led by NICOS Chinese Health Coalition. This task force targets parents/guardians and other caregivers living in Chinatown, as well as Asian American and Chinese-speaking low-income families living throughout San Francisco. Andrea Zhou: andreazhou@nicoschc.org
Mission Children's Oral Health Task Force	The Mission Children's Oral Health Task Force is led by CARECEN SF (Central American Resource Center). This task force targets parents/guardians and other caregivers living in the San Francisco Mission District, but also Latino and Spanish-speaking low-income families living throughout San Francisco. Kati Barahona-López: kbarahona@carecensf.org
District 10 Children's Oral Health Task Force	The District 10 Children's Oral Health Task Force is led by APA Family Support Services. This task force targets parents/guardians and other caregivers living in the District 10 area of San Francisco (Visitacion Valley/Bayview Hunters Point), but also African American and other low-income families living throughout San Francisco. Justin Adeyanju: justin.adeyanju@apafss.org

Appendix H: COVID Emergency Food Grantees Highlights FY19-20

One-time grants administered by either the San Francisco Department of Public Health or the San Francisco Public Health Foundation (depending on existing contracts to ensure grants could support emergency food in a timely manner). Grants to 26 organizations totaled \$1,650,000.

Grantee and Funding Allocation	Priority Populations	Highlights from FY 2019-2020 Grant Reporting
SFDPH MCAH partner organizations \$200,000	Low Income Prenatal/ Breastfeeding People	<i>No data received</i>
Latino Task Force (via fiscal sponsor: Mission Language Vocational Schools) \$200,000	Undocumented Families	<i>Limited data received</i> In FY 2019-2020, Mission Food Hub (one of multiple community-based organizations which the Latino Task Force supported for food distribution) distributed 2,330 grocery bags/boxes of food to residents. Using these funds, Mission Food Hub also distributed 9,320 additional grocery bags/boxes of food in the beginning of FY 2020-2021.
SFUSD/EOC \$300,000	SFUSD Families	In FY 2019-2020, SFUSD Nutrition Services provided 66,778 meals with emergency food funds from SDDT. Using these funds, SFUSD also provided 23,982 meals at the beginning of FY 2020-2021.
SF Housing Authority/EOC \$300,000	Public housing sites - Potrero and Sunnysdale	In FY 2019-2020, the San Francisco Housing Authority provided 2,350 grocery bags/boxes to residents of public housing. Using these funds, the Housing Authority also provided 4,041 grocery bags/boxes at the beginning of FY 2020-2021.
African American Faith Based Coalition \$200,000	Community residents affiliated with African American Faith Based organizations	<i>No data received</i>

Grantee and Funding Allocation	Priority Populations	Highlights from FY 2019-2020 Grant Reporting
Farming Hope \$30,000	Low Income Families	22,919 meals distributed
Bayview Hunters Point Community Advocates (BVHPCA) \$20,000	Low Income BV families/seniors	In FY 2019-2020, BVHPCA distributed 525 grocery bags/boxes to community members. Using these funds, BVHPCA also provided 1,890 grocery bags/boxes at the beginning of FY 2020-2021.
SF Produce Market \$400,000	Low income: faith based, Bayview Hunters Point, CBOs, Pregnant/Breastfeeding, undocumented, etc.	Between April and July 2021, and in partnership with more than 15 community-based organizations (details in tables below), the San Francisco Produce Market distributed 15,292 grocery bags/boxes and 36,725 meals.

Additional Detail for SF Produce Market: Grocery Bags/Boxes Distributed

SF Produce Market Distributor Organization	Grocery Bags/Boxes Distributed
NOW Hunters Point	1,952
Wise Health	1,841
Healthcare providers from Zuckerberg SF General Hospital Obstetrics, Midwifery, Gynecology Clinic, 6G, Labor & Delivery, as well as Public Health Clinics: Potrero Hill, Mission Neighborhood, Silver Avenue.	1,740
La Raza Community Resource Center	1,500
3RD Street Youth Center & Clinic	1,322
RCTA/1065 Oakdale-- Food Pantry Pickup	1,305
3rd Baptist Church /AA Faith-based Coalition	918
Florence Fang Asian Community Garden	875

SF Produce Market Distributor Organization	Grocery Bags/Boxes Distributed
HOMEY	800
Bayview Hunters Point Community Advocates	646
Women's Building	560
CARECEN SF	511
HealthRight360	439
Homeless Prenatal Program	430
Homeless Prenatal: Jelani House	158
SisterWeb	150
Southeast Health Center Food Pharmacy	145

Additional Detail for SF Produce Market: Meals Distributed

SF Produce Market Distributor Organization	Meals Distributed
SF New Deal	19,973
Double Rock Baptist Church/ AA Faith-based Coalition	4,923
Episcopal Community Services	4,635

SF Produce Market Distributor Organization	Meals Distributed
Farming Hope	3,865
3rd Baptist Church /AA Faith-based Coalition	2,192
Bayview Senior Services	1,137

Appendix I: Government Agencies That Received SDDT Funds in FY19-20

San Francisco Department of Public Health

Program or Work Supported with SDDT Funds in FY 19-20	Mission and Program
Oral Health School Based Education and Case Management and the School Based Sealant Application \$450,000	Support school-based and school-linked preventive oral health programs, such as sealant application, within SFUSD schools serving high risk target populations.
Healthy Food Purchasing Supplement Grants	See Appendix C.
SDDT Healthy Community Three-Year Grants	See Appendix D.
SDDT Social Media Grants	See Appendix E.
SDDT Healthy Community SUPPORT Grants	See Appendix F.
Oral Health Community Task Forces	See Appendix G.

San Francisco Office of Economic and Workforce Development

Program or Work Supported with SDDT Funds in FY 19-20	Mission and Program
Healthy Retail \$150,000	Supporting small business to increase healthy food access in high risk and impacted communities and neighborhoods by 1) supporting business operations; 2) promoting community engagement; and 3) improving the retail environment,

San Francisco Recreation and Parks Department

Program or Work Supported with SDDT Funds in FY 19-20	Mission and Program
Water Access \$300,000	Installation or upgrade of existing hydration station(s) in public spaces that target high risk populations that are disproportionately targeted by the sugary drink industry (community identified public spaces).
Peace Parks \$895,000	Program and staffing support for the Peace Parks Programs for high-risk populations – increasing physical activity by activating park facilities and supporting community cohesion in priority neighborhoods (Bayview/Hunters Point, Visitacion Valley, Potrero Hill).
Recreation Scholarships \$2,000,000	Initiative to expand recreation scholarships and outreach to youth under 18 and living in public and low-income subsidized housing.

San Francisco Unified School District

Program or Work Supported with SDDT Funds in FY 19-20	MISSION AND PROGRAM
Wellness Policy \$300,000	Funding for community-based organizations to support SFUSD implementation of the district Wellness Policy. Funded work includes Health Education, Physical Activity Opportunities, Healthy Eating/Food Security, Water Promotion, and Community Based Participatory Research.
Nutrition Services + Student Action \$1,500,000	<p>To improve the quality and appeal of school meals to increase participation in school meal programs and support nutrition education. Funding to target schools with the largest populations of high-risk students that are disproportionately targeted by the sugary drinks industry.</p> <p>Support student led efforts to decrease consumption of sugary drinks and increase awareness of sugary drinks consumption among students.</p>
Hydration Stations at SFUSD Schools \$340,000	Installation of hydration stations at low-income schools serving students with health disparities. SDDTAC recommends alternate funding years between SFUSD for public schools and city agencies to install public domain venues. Within SFUSD, hydration stations have been prioritized for low-income schools serving students with health disparities to elevate the schools to the Silver or Gold standard for hydration stations (i.e., one on each floor, centrally located, and conduct water education).

Appendix J: SDDT Evaluation Methodology for Fiscal Year 2019-2020

In early 2020, the SDDTAC and SFDPH contracted with Raimi + Associates to conduct the evaluation of SDDT funding allocations. The Fiscal Year 2019/2020 report is informed by the SDDTAC Strategic Plan and is organized into the following key findings related to each of the goal areas:

1. SDDT funds strengthen community leadership to support Healthy People
2. SDDT funds create Healthy Places by helping mitigate structural, place-based inequities

Data Collection

Quantitative Data Collection

The FY 2019-20 data sources include:

- **Quarterly Program Updates:** Both as part of grant management and program evaluation requirements, Health Communities grantees are required to complete program updates quarterly. Grantees must use the provided template and upload a template as well as all deliverables to their project specific Google drive folder. Quarterly program updates were due January 15th, April 15th and July 15th.
- **Biannual Report:** Funded programs are required to complete a biannual report using a template. Reports are due every January 15th and July 15th and must be uploaded to their project specific Google drive folder.

- **Annual Reporting:** All funded programs and partners must submit annual data that highlights demographics, numbers reached, COVID specific program updates (e.g., emergency food), qualitative stories and key quotes, and technical assistance received and/or provided.

Qualitative Data Collection

Stories hold the potential to tell powerful narratives of the impact of SDDT funding in and with priority communities. In addition to the quantitative data collection and reporting, the evaluation included interviews with selected grantees.

Data Limitations

Although these data are important and can inform the work and future funding recommendations for SDDT, there are limitations to consider (as is the case with all data). A strength of these data is that they reflect data from nearly all recipients of SDDT funds. However, due to the COVID pandemic, not all funded agencies were able to submit robust data. This likely has resulted in an underestimate of the reach and impacts of SDDT funding.

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San Francisco Business and Tax Regulations Code

ARTICLE 8:

SUGARY DRINKS DISTRIBUTOR TAX ORDINANCE

Sec. 550.	Short Title.
Sec. 551.	Findings and Purpose.
Sec. 552.	Definitions.
Sec. 553.	Imposition of Tax; Deposit of Proceeds.
Sec. 554.	Registration of Distributors; Documentation; Administration.
Sec. 555.	Credits and Refunds.
Sec. 556.	Technical Assistance to the Tax Collector.
Sec. 557.	Municipal Affair.
Sec. 558.	Not a Sales and Use Tax.
Sec. 559.	Severability.
Sec. 560.	Amendment.

SEC. 550. SHORT TITLE.

This Article shall be known as the “Sugary Drinks Distributor Tax Ordinance.”

(Added by Proposition V, 11/8/2016)

SEC. 551. FINDINGS AND PURPOSE.

The U.S. Department of Health and Human Services, the U.S. Department of Agriculture, and the World Health Organization, based on a summary of the available evidence linking intake of added sugar and sugar-sweetened beverages (SSBs) to adverse health outcomes including obesity and diabetes, have recommended that Americans consume no more than 10% of their daily calories in the form of added sugar. Yet, standard single serving sizes of SSBs provide all (in a 20-ounce serving of many SSBs) or nearly all (in a 12-ounce serving) of the recommended maximum daily added sugar amount for most adults, and generally exceed the recommended maximum daily added sugar amount for children.

Numerous organizations and agencies, including the American Heart Association, American Diabetes Association, American Academy of Pediatrics, Institute of Medicine of the National Academies, American Medical Association, and the Centers for Disease Control, recommend limiting intake of added sugar and SSBs to improve health. Sugary beverages, though they can contain hundreds of calories in a serving, do not signal “fullness” to the brain and thus facilitate over-consumption.

Studies show that sugary beverages flood the liver with high amounts of sugar in a short amount of time, and that this “sugar rush” over time leads to fat deposits and metabolic disturbances that cause diabetes, cardiovascular disease, and other serious health problems. Diseases connected to sugary beverages disproportionately impact minorities and low-income communities. For example, diabetes hospitalizations are more than triple in low-income communities as compared with higher income areas. African American death rates from DM2 are five times higher than San Francisco’s overall rate. DM2 is the fifth leading

cause of death in SF (which is an underestimate, since heart disease, the leading killer, is often a result of DM2); DM2 reduces the lifespan of San Franciscans by eight to ten years.

As recently as 2010, nearly a third of children and adolescents in San Francisco were obese or overweight; and in San Francisco, 46.4% of adults are obese or overweight, including 61.7% of Hispanics and 51.3% of African Americans. Nationally, childhood obesity has more than doubled in children and tripled in adolescents in the past 30 years; in 2010, more than one-third of children and adolescents were overweight or obese. Every additional sugary beverage consumed daily can increase a child's risk for obesity by 60%; and one or two sugary beverages per day increases the risk of Type II diabetes by 26%.

Sugary beverages, including sweetened alcoholic drinks, represent nearly 50% of added sugar in the American diet, and, on average, 11% of daily calories consumed by children in the U.S.

Seven percent of San Franciscans are diagnosed with diabetes, and it is estimated that the City and County of San Francisco pays over \$87 million for direct and indirect diabetes care costs.

This Article 8 is intended to discourage the distribution and consumption of sugar-sweetened beverages in San Francisco by taxing their distribution. Mexico, where an average of 163 liters of sugar-sweetened beverages are consumed per person each year, enacted an excise tax on sugary drinks, with the result that the purchase of taxed sugar sweetened beverages declined by 12% generally and by 17% among low-income Mexicans. The Mexico data indicate that, when people cut back on SSBs, to a significant extent they choose lower-caloric or non-caloric alternatives. This body of research demonstrates that taxation can provide a powerful incentive for individuals to reduce their consumption of SSBs, which in turn will reduce obesity and DM2.

The City of Berkeley became the first city in the United States to follow in Mexico's footsteps, by passing a one-cent-per-ounce general tax on distributors of SSBs within the city limits. It is estimated that the City of Berkeley, which began implementing the tax in March 2015, will collect at least \$1.2 million from the tax annually.

(Added by Proposition V, 11/8/2016)

SEC. 552. DEFINITIONS.

Unless otherwise defined in this Article 8, terms that are defined in Article 6 of the Business and Tax Regulations Code shall have the meanings provided therein. For purposes of this Article, the following definitions shall apply.

“Beverage for Medical Use” means a beverage suitable for human consumption and manufactured for use as an oral nutritional therapy for persons who cannot absorb or metabolize dietary nutrients from food or beverages, or for use as an oral rehydration electrolyte solution formulated to prevent or treat dehydration due to illness. “Beverage for Medical Use” also means a “medical food” as defined in Section 109971 of the California Health and Safety Code. “Beverage for Medical Use” shall not include beverages commonly referred to as “sports drinks,” or any other similar names.

“Bottle” means any closed or sealed container regardless of size or shape, including, without limitation, those made of glass, metal, paper, plastic, or any other material or combination of materials.

“Bottled Sugar-Sweetened Beverage” means any Sugar-Sweetened Beverage contained in a Bottle that is ready for consumption without further processing, such as, and without limitation, dilution or carbonation.

“Caloric Sweetener” means any substance or combination of substances that is suitable for human consumption, that humans perceive as sweet, and that adds calories to the diet of any human who consumes it. “Caloric Sweetener” includes, but is not limited to, sucrose, fructose, glucose, other sugars, and high fructose corn syrup.

“City” means the City and County of San Francisco.

“Distribution” includes:

(a) The transfer in the City, for consideration, of physical possession of Sugar- Sweetened Beverages, Syrup, or Powder by any person other than a common carrier. “Distribution” also includes the transfer of physical possession in the City by any person other than a common carrier, without consideration, for promotional or any other commercial purpose.

(b) The possession, storage, ownership, or control in the City, by any person other than a common carrier, of Sugar-Sweetened Beverages, Syrup, or Powder for resale in the ordinary course of business, obtained by means of a transfer of physical possession outside the City or from a common carrier in the City.

“Distribution” does not include:

(a) The return of any Sugar-Sweetened Beverages, Syrup, or Powder to a person, if that person refunds the entire amount paid in cash or credit.

(b) A retail sale or use.

“Distributor” means any person engaged in the business of Distribution of Bottled Sugar- Sweetened Beverages, Syrup, or Powder. A Distributor does not include a common carrier. Where a common carrier obtains physical possession of Sugar-Sweetened Beverages, Syrup, or Powder outside the City and transfers physical possession of the Sugar-Sweetened Beverages, Syrup, or Powder in the City, the transferee of the Sugar-Sweetened Beverages, Syrup, or Powder is a Distributor.

“Milk Product” means: (a) any beverage whose principal ingredient by weight is natural liquid milk secreted by an animal. “Milk” includes natural milk concentrate and dehydrated natural milk, whether or not reconstituted; and (b) any plant-based substance or combination of substances in which (1) water and (2) grains, nuts, legumes, or seeds constitute the two greatest ingredients by volume. For purposes of this definition, “Milk Product” includes, but is not limited to, soy milk, almond milk, rice milk, coconut milk, hemp milk, oat milk, hazelnut milk, or flax milk;

“Natural Fruit Juice” means the original liquid resulting from the pressing of fruit, the liquid resulting from the complete reconstitution of natural fruit juice concentrate, or the liquid resulting from the complete restoration of water to dehydrated natural fruit juice.

“Natural Vegetable Juice” means the original liquid resulting from the pressing of vegetables, the liquid resulting from the complete reconstitution of natural vegetable juice concentrate, or the liquid resulting from the complete restoration of water to dehydrated natural vegetable juice.

“Nonalcoholic Beverage” means any beverage that is not subject to tax under California Revenue and Taxation Code sections 32001 *et seq.* as “beer, wine or distilled spirits.”

“Powder” means any solid mixture, containing one or more Caloric Sweeteners as an ingredient, intended to be used in making, mixing, or compounding a Sugar-Sweetened Beverage by combining the Powder with one or more other ingredients.

“Sugar-Sweetened Beverage” means any Nonalcoholic Beverage intended for human consumption that contains added Caloric Sweetener and contains more than 25 calories per 12 fluid ounces of beverage, including but not limited to all drinks and beverages commonly referred to as “soda,” “pop,” “cola,” “soft drinks,” “sports drinks,” “energy drinks,” “sweetened ice teas,” or any other similar names. “Sugar-Sweetened Beverage” does not include:

(a) Any beverage sold for consumption by infants, which is commonly referred to as “infant formula” or “baby formula,” or any product whose purpose is infant rehydration.

(b) Any Beverage for Medical Use.

(c) Any beverage designed as supplemental, meal replacement, or sole-source nutrition that includes proteins, carbohydrates, and multiple vitamins and minerals (this exclusion does not include beverages commonly referred to as “sports drinks,” or any other similar names, which are defined as Sugar-Sweetened Beverages).

(d) Any Milk Product.

(e) Any beverage that contains solely 100% Natural Fruit Juice, Natural Vegetable Juice, or combined Natural Fruit Juice and Natural Vegetable Juice.

“Sugary Drinks Distributor Tax” or “Tax” means the general excise tax imposed under Section 553.

“Syrup” means any liquid mixture, containing one or more Caloric Sweeteners as an ingredient, intended to be used, or actually used, in making, mixing, or compounding a Sugar-Sweetened Beverage by combining the Syrup with one or more other ingredients.

(Added by Proposition V, 11/8/2016)

SEC. 553. IMPOSITION OF TAX; DEPOSIT OF PROCEEDS.

(a) Effective January 1, 2018, for the privilege of engaging in the business of making an initial Distribution within the City of a Bottled Sugar-Sweetened Beverage, Syrup, or Powder, the City imposes a Sugary Drinks Distributor Tax, which shall be a general excise tax, on the Distributor making the initial Distribution of a Bottled Sugar-Sweetened Beverage, Syrup, or Powder in the City.

(b) The Tax shall be calculated as follows:

(1) One cent (\$0.01) per fluid ounce of a Bottled Sugar-Sweetened Beverage upon the initial Distribution within the City of the Bottled Sugar-Sweetened Beverage; and

(2) One cent (\$0.01) per fluid ounce of a Sugar-Sweetened Beverage that could be produced from Syrup or Powder upon the initial Distribution of Syrup or Powder. The Tax for Syrups and Powders shall be calculated using the largest volume of Sugar-Sweetened Beverage that would typically be produced by the amount of Syrup or Powder based on the manufacturer’s instructions or, if the Distributor uses the Syrup or Powder to produce a Sugar-Sweetened Beverage, the regular practice of the Distributor.

(c) The Tax is a general tax. Proceeds of the Tax are to be deposited in the General Fund.

(Added by Proposition V, 11/8/2016)

SEC. 554. REGISTRATION OF DISTRIBUTORS; DOCUMENTATION; ADMINISTRATION.

(a) Each Distributor shall register with the Tax Collector according to rules and regulations of the Tax Collector, but no earlier than 30 days after the effective date of Article 8.

(b) Each Distributor shall keep and preserve all such records as the Tax Collector may require for the purpose of ascertaining compliance with Article 8.

(c) Except as otherwise provided under Article 8, the Tax shall be administered pursuant to Article 6 of the Business and Tax Regulations Code.

(Added by Proposition V, 11/8/2016)

SEC. 555. CREDITS AND REFUNDS.

The Tax Collector shall refund or credit to a Distributor the Tax that is paid with respect to the initial Distribution of a Bottled Sugar- Sweetened Beverage, Syrup, or Powder: (a) that is shipped to a point outside the City for Distribution outside the City; or (b) on which the Tax has already been paid by another Person; or (c) that has been returned to the Person who Distributed it and for which the entire purchase price has been refunded in cash or credit.

(Added by Proposition V, 11/8/2016)

SEC. 556. TECHNICAL ASSISTANCE TO THE TAX COLLECTOR.

(a) The Department of Public Health shall provide to the Tax Collector technical assistance to identify Bottled Sugar-Sweetened Beverages, Syrups, and Powders subject to the Tax.

(b) All City Departments shall provide technical assistance to the Tax Collector to identify Distributors of Bottled Sugar-Sweetened Beverages, Syrups, and Powders.

(Added by Proposition V, 11/8/2016)

SEC. 557. MUNICIPAL AFFAIR.

The People of the City and County of San Francisco hereby declare that the taxation of the distribution of Sugar-Sweetened Beverages, Syrups and Powders, and that the public health impact of Sugar-Sweetened Beverages, separately and together constitute municipal affairs. The People of the City and County of San Francisco hereby further declare their desire for this measure to coexist with any similar tax adopted at the local or state levels.

(Added by Proposition V, 11/8/2016)

SEC. 558. NOT A SALES AND USE TAX.

The tax imposed by this measure is a general excise tax on the privilege of conducting business within the City and County of San Francisco. It is not a sales tax or use tax or other excise tax on the sale, consumption, or use of sugar-sweetened beverages.

(Added by Proposition V, 11/8/2016)

SEC. 559. SEVERABILITY.

If any provision of this measure, or part thereof, or the applicability of any provision or part to any person or circumstances, is for any reason held to be invalid or unconstitutional, the remaining provisions and parts shall not be affected, but shall remain in full force and effect, and to this end the provisions and parts of this measure are severable. The voters hereby declare that this measure, and each portion and part, would have been adopted irrespective of whether any one or more provisions or parts are found to be invalid or unconstitutional.

(Added by Proposition V, 11/8/2016)

SEC. 560. AMENDMENT.

The Board of Supervisors may by ordinance amend or repeal Article 8 of the Business and Tax Regulations Code without a vote of the people except as limited by Article XIIC of the California Constitution.

(Added by Proposition V, 11/8/2016)

[Print](#)

San Francisco Administrative Code

ARTICLE XXXIII: SUGARY DRINKS DISTRIBUTOR TAX ADVISORY COMMITTEE

- Sec. 5.33-1. Creation of Advisory Committee.
- Sec. 5.33-2. Membership.
- Sec. 5.33-3. Organization and Terms of Office.
- Sec. 5.33-4. Powers and Duties.
- Sec. 5.33-5. Meetings and Procedures.
- Sec. 5.33-6. Sunset.

SEC. 5.33-1. CREATION OF ADVISORY COMMITTEE.

There is hereby established the Sugary Drinks Distributor Tax Advisory Committee (the “Advisory Committee”) of the City and County of San Francisco.

(Added by Proposition V, 11/8/2016)

SEC. 5.33-2. MEMBERSHIP.

The Advisory Committee shall consist of the following 16 voting members.

- (a) Seats 1, 2, and 3 shall be held by representatives of nonprofit organizations that advocate for health equity in communities that are disproportionately impacted by diseases related to the consumption of Sugar-Sweetened Beverages, as defined in Business and Tax Regulations Code Section 552, appointed by the Board of Supervisors.
- (b) Seats 4 and 5 shall be held by individuals who are employed at medical institutions in San Francisco and who have experience in the diagnosis or treatment of, or in research or education about, chronic and other diseases linked to the consumption of Sugar-Sweetened Beverages, appointed by the Board of Supervisors.
- (c) Seat 6 shall be held by a person who is under 19 years old at the time of appointment and who may be a member of the Youth Commission, nominated by the Youth Commission and appointed by the Board of Supervisors. If the person is under legal voting age and unable to be an elector for that reason, the person may hold this seat, but upon reaching legal voting age, the person shall relinquish the seat unless he or she becomes an elector, in which case the person shall retain the seat.
- (d) Seat 7 shall be held by a person appointed by the Director of the Office of Economic and Workforce Development or any successor office.
- (e) Seats 8 and 9 shall be held by persons appointed by the Board of Education of the San Francisco Unified School District. If at any time the Board of Education declines to appoint a member to Seat 8 or 9 and leaves the seat vacant for 60 days or longer, the Board of Supervisors may appoint a member of the public to fill the seat until such time as the Board of Education appoints a member.

- (f) Seat 10 shall be held by an employee of the Department of Public Health who has experience or expertise in the field of chronic disease prevention or treatment, appointed by the Director of Health.
- (g) Seat 11 shall be held by a person with experience or expertise in the field of oral health, appointed by the Director of Health.
- (h) Seat 12 shall be held by a person with experience or expertise in the field of food security or access, appointed by the Director of Health.
- (i) Seat 13 shall be held by an employee of the Department of Children, Youth & Their Families, appointed by the Director of that Department.
- (j) Seat 14 shall be held by an employee of the Recreation and Park Department, appointed by the General Manager of that Department.
- (k) Seat 15 shall be held by a parent or guardian of a student enrolled in the San Francisco Unified School District at the time of appointment, nominated by the San Francisco Unified School District's Parent Advisory Council, and appointed by the Board of Supervisors. If at any time the Parent Advisory Council declines to nominate a member to a vacant seat for 60 days or longer, the Board of Supervisors may appoint a member of the public to fill the seat until the seat becomes vacant again.
- (l) Seat 16 shall be held by a person with experience or expertise in services and programs for children five and under, appointed by the Board of Supervisors.

(Added by Proposition V, 11/8/2016)

SEC. 5.33-3. ORGANIZATION AND TERMS OF OFFICE.

- (a) Members of the Advisory Committee shall serve at the pleasure of their respective appointing authorities, and may be removed by the appointing authority at any time.
- (b) Appointing authorities shall make initial appointments to the Advisory Committee by no later than September 1, 2017. The initial term for each seat on the Advisory Committee shall begin September 1, 2017 and end December 31, 2018. Thereafter, the term for each seat shall be two years. There shall be no limit on the number of terms a member may serve. A seat that is vacant on the Advisory Committee shall be filled by the appointing authority for that seat.
- (c) Members of the Advisory Committee shall receive no compensation from the City, except that the members in Seats 4, 5, 7, 10, 11, 12, 13, and 14 who are City employees may receive their respective City salaries for time spent working on the Advisory Committee.
- (d) Any member who misses three regular meetings of the Advisory Committee within any 12-month period without the express approval of the Advisory Committee at or before each missed meeting shall be deemed to have resigned from the Advisory Committee 10 days after the third unapproved absence. The Advisory Committee shall inform the appointing authority of any such resignation.
- (e) The City Administrator shall provide administrative and clerical support for the Advisory Committee, and the Controller's Office shall provide technical support and policy analysis for the Advisory Committee upon request. All City officials and agencies shall cooperate with the Advisory Committee in the performance of its functions.

(Added by Proposition V, 11/8/2016)

SEC. 5.33-4. POWERS AND DUTIES.

The general purpose of the Advisory Committee is to make recommendations to the Mayor and the Board of Supervisors on the effectiveness of the Sugary Drinks Distributor Tax in Business Tax and Regulations Code Article 8. Starting in 2018, by March 1 of each year, the Advisory Committee shall submit to the

Board of Supervisors and the Mayor a report that (a) evaluates the impact of the Sugary Drinks Distributor Tax on beverage prices, consumer purchasing behavior, and public health, and (b) makes recommendations regarding the potential establishment and/or funding of programs to reduce the consumption of Sugar-Sweetened Beverages in San Francisco. Within 10 days after the submission of the report, the City Administrator shall submit to the Board of Supervisors a proposed resolution for the Board to receive the report.

(Added by Proposition V, 11/8/2016)

SEC. 5.33-5. MEETINGS AND PROCEDURES.

(a) There shall be at least 10 days' notice of the Advisory Committee's inaugural meeting. Following the inaugural meeting, the Advisory Committee shall hold a regular meeting not less than four times each year.

(b) The Advisory Committee shall elect officers and may establish bylaws and rules for its organization and procedures.

(Added by Proposition V, 11/8/2016)

SEC. 5.33-6. SUNSET.

Unless the Board of Supervisors by ordinance extends the term of the Advisory Committee, this Article XXXIII shall expire by operation of law, and the Advisory Committee shall terminate, on December 31, 2028. In that event, after that date, the City Attorney shall cause this Article XXXIII to be removed from the Administrative Code.

(Added by Proposition V, 11/8/2016)

City and County of San Francisco



Sugary Drinks Distributor Tax Advisory

Committee Bylaws

I. Name and Membership:

In accordance with the provisions of Article XXXII of the San Francisco Administrative Code, there shall be a Sugary Drinks Distributor Tax Advisory Committee (“Committee”) composed of 16 voting members, appointed as follows:

Seats 1, 2, and 3 shall be held by representatives of nonprofit organizations that advocate for health equity in communities that are disproportionately impacted by diseases related to the consumption of Sugar-Sweetened Beverages, as defined in Business and Tax Regulations Code Section 552, appointed by the Board of Supervisors. (3 Members)

Seats 4 and 5 shall be held by individuals who are employed at medical institutions in San Francisco and who have experience in the diagnosis or treatment of, or in research or education about, chronic and other diseases linked to the consumption of Sugar- Sweetened Beverages, appointed by the Board of Supervisors. (2 Members)

Seat 6 shall be held by a person who is under 19 years old at the time of appointment and who may be a member of the Youth Commission, nominated by the Youth Commission and appointed by the Board of Supervisors. If the person is under legal voting age and unable to be an elector for that reason, the person may hold this seat, but upon reaching legal voting age, the person shall relinquish the seat unless he or she becomes an elector, in which case the person shall retain the seat. (1 Member)

Seat 7 shall be held by a person appointed by the Director of the Office of Economic and Workforce Development or any successor office. (1 Member)

Seats 8 and 9 shall be held by persons appointed by the Board of Education of the San Francisco Unified School District. If at any time the Board of Education declines to appoint a member to Seat 8 or 9 and leaves the seat vacant for 60 days or longer, the Board of Supervisors may appoint a member of the public to fill the seat until such time as the Board of Education appoints a member. (2 Members)

Seat 10 shall be held by an employee of the Department of Public Health who has experience or expertise in the field of chronic disease prevention or treatment, appointed by the Director of Health. (1 Member)

Seat 11 shall be held by a person with experience or expertise in the field of oral health, appointed by the Director of Health. (1 Member)

Seat 12 shall be held by a person with experience or expertise in the field of food security or access, appointed by the Director of Health. (1 Member)

Seat 13 shall be held by an employee of the Department of Children, Youth & Their Families, appointed by the Director of that Department. (1 Member)

Seat 14 shall be held by an employee of the Recreation and Park Department, appointed by the General Manager of that Department. (1 Member)

Seat 15 shall be held by a parent or guardian of a student enrolled in the San Francisco Unified School District at the time of appointment, nominated by the San Francisco Unified School District's Parent Advisory Council, and appointed by the Board of Supervisors. If at any time the Parent Advisory Council declines to nominate a member to a vacant seat for 60 days or longer, the Board of Supervisors may appoint a member of the public to fill the seat until the seat becomes vacant again. (1 Member)

Seat 16 shall be held by a person with experience or expertise in services and programs for children five years old and under, appointed by the Board of Supervisors. (1 Member)

II. Purpose

The purpose of the Committee is to make recommendations to the Mayor and the Board of Supervisors on the effectiveness of the Sugary Drinks Distributor Tax, as established by Article 8 of the San Francisco Business Tax and Regulations Code. Starting in 2018, by March 1 of each year, the Advisory Committee shall submit to the Board of Supervisors and the Mayor a report that (a) evaluates the impact of the Sugary Drinks Distributor Tax on beverage prices, consumer purchasing behavior, and public health, and (b) makes recommendations regarding the potential establishment and/or funding of programs to reduce the consumption of Sugar-Sweetened Beverages in San Francisco.

III. Attendance

Committee members are expected to attend each regular or special meeting of the Committee. Committee staff shall maintain a record of members' attendance.

Any member who misses three regular Committee meetings within any 12-month period without the express approval of the Advisory Committee at or before each missed meeting shall be deemed to have resigned from the Advisory Committee.

If any member cannot attend a meeting of the Committee, the member shall notify the Committee Staff in writing of the member's intent to be absent and the reason for the absence, and shall indicate whether the member seeks approval of the absence from the Advisory Committee. Such notice shall be given not less than 72-hours in advance of the meeting. Any request for approval of the absence shall be placed before the Committee at its next meeting for review and possible action.

A Committee member's absence shall be approved if the member has shown good cause for the absence. For purposes of attendance, good cause exists where the absence is due to

unforeseen circumstances, such as illness or emergency. Good cause shall not extend to planned vacations or professional or personal scheduling conflicts.

IV. Election of Officers and Terms of Offices

The Committee shall elect Co-Chairs annually at the first regularly scheduled meeting of the calendar year.

The election of Co-Chairs may be held at a regular or special meeting of the Committee. The Co-Chairs or any two members may call a special meeting for the election of officers, if needed, or call for such an election at a regular Committee meeting.

V. Duties of the Co-Chairs

The duties of the Co-Chairs are to:

Preside at all meetings of the Committee, and perform all other duties necessary to ensure a productive body that is engaged in all facets of the Committee's work;

Set the agenda for Committee meetings in consultation with other members and with Committee staff; and

Prior to each meeting, decide who will facilitate and lead the meeting.

VI. Committee Meetings

a. Regular Meetings

Regular Meetings of the Committee shall be open and public. The Committee shall hold its regular meetings on the third Wednesday of every month at 5 PM. Please check the meeting notice for location at www.sfdph.org/sddtac. If a recommendation is made by DPH that a Regular Meeting be canceled or changed, the Committee or the Co-Chairs may cancel the Regular Meeting or fix another time therefor. Written notice of cancellation or of a change in a Regular Meeting time must be given at least seventy-two (72) hours before the scheduled time of such Regular Meeting. The Committee must hold a minimum of 4 meetings per year.

b. Special Meetings

Special Meetings of the Committee shall be open and public. Special Meetings shall be held at such times as the Committee may determine, or may be called by the Co-Chairs at any time. Written notice of a Special Meeting must be given at least seventy-two (72) hours before the scheduled time of such Meeting. Special Meetings shall be held at the regular meeting place except that the Committee may designate an alternate meeting place provided that the notice designating the alternate meeting place is issued 15 days prior to the date of the Special Meeting.

c. Public Comment

Members of the public are entitled to comment on any matter on the calendar prior to action being taken by the Committee on that item or prior to calling the next item on the agenda. In addition, the agenda shall provide an opportunity for members of the public to address the Committee on items within the subject matter jurisdiction of the Committee and have not been the subject of public comment on other items on the agenda. Upon the

specific findings of the Committee and support thereof, the presiding Co-Chair may set a reasonable time limit for each speaker, based on such factors as the complexity and nature of the agenda item, the number of anticipated speakers for that item, and the number and anticipated duration of other agenda items. Individual Committee members and Committee staff should refrain from entering into any debates or discussion with speakers during public comment.

d. Minutes of Meetings

DPH shall maintain written minutes of Committee meetings. A draft copy of the minutes of each meeting shall be provided to each member before the next regular meeting of the Committee. Approved Committee minutes shall be made available at the San Francisco Main Library, posted on the DPH website and by email ten (10) days after the meeting approving the minutes.

VII. Subcommittees

a. Standing Subcommittees

Upon approval by a majority of the members of the Committee, standing subcommittees may be formed to advise the Committee. The Chair of the Committee shall name the Chair and members of each subcommittee.

b. Special Subcommittees

Upon approval by a majority of the members of the Committee, special or ad-hoc subcommittees may be formed. Special subcommittees shall be formed for a specific purpose and cease to exist after completion of that purpose.

VIII. Quorum

The presence of a majority of members is required to conduct a meeting and shall constitute a quorum for all purposes. The only official business that can be transacted in the absence of a quorum is: (1) to take measures to obtain a quorum; (2) to fix the time to which to adjourn; (3) to take a recess; or (4) to adjourn.

IX. Rules of Order and Compliance with Open Meeting Requirements

a. All meetings shall be conducted in accordance with Robert's Rules of Order.

b. The Committee and its subcommittees shall perform its duties in compliance with all applicable provisions of the San Francisco Charter, California's Ralph M. Brown Act (California Government Code §§54950 et seq.), and the San Francisco Sunshine Ordinance (San Francisco Administrative Code Chapter 67).

X. Voting

Each member present at Advisory Committee meetings must vote on all motions and questions put before the Committee by voting "for" or "against," unless abstaining from the vote.

XI. Technical Assistance

Under Chapter 5 of the Administrative Code, the City Administrator is charged with providing administrative and clerical support to the Committee. The City Administrator has

delegated this function to the Department of Public Health (DPH). In addition, the Controller's Office shall provide technical support and policy analysis for the Advisory Committee upon request. All City officials and agencies shall cooperate with the Advisory Committee in the performance of its functions.

XII. Order of Business

The order of business at any Regular Meeting shall be as follows:

- a. Call to Order/Roll Call
 - Approval of Absences
- b. Approval of Minutes
- c. Review and Consideration of Regular Agenda
- d. General Public Comment
- e. DPH Staff Report
- f. Funding Update
- g. New Business
- h. Subcommittee Update
- i. Committee Members' Proposed Future Agenda Items
- j. Announcements
- k. Adjournment

These Bylaws were adopted by the Sugary Drinks Distributor Tax Advisory Committee on February 6, 2019.