

Sugary Drinks Distributor Tax Advisory Committee

Draft Strategic Plan

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Context

Sugary drinks are the primary contributor of sugar to the American diet. Unhealthy amounts of sugar, especially liquid sugar, are making communities sick, leading to obesity, type 2 diabetes, dental caries, and other illnesses that disproportionately impact low income communities and people of color.

In 2016, San Francisco voters took a stand against the soda industry and passed a tax on the distribution of their products, known as the Sugary Drinks Distributor Tax (SDDT) or “soda tax” to encourage reduced consumption and collect resources that can be invested in communities where consumption is greatest.

The focus of the inaugural SDDT Advisory Committee (SDDTAC) is on communities most targeted by soda industry marketing, most burdened by the health impacts associated with consumption, and most in need of investment. The SDDTAC is working to establish committee processes and structures and has embarked in a strategic planning process to inform and sustain this work into the future.

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The beverage industry spends millions on advertising and targets low income communities and communities of color. Subsidies make sugary drinks cheap and companies get a tax break when advertising to youth.

Low-income communities and communities of color...

- Experience the highest rates of chronic diseases such as type 2 diabetes, obesity, heart disease, and tooth decay.
- Have the highest concentration of sugary beverage consumption.
- Are disproportionately targeted by aggressive and exploitative marketing campaigns by the soda and sugary drinks industry.
- Experience one of the fastest growing wealth gaps between rich and poor.

The SDDTAC focuses on changing policies, systems, and environments to address:

- Poverty and social exclusion as a root cause of health inequities.
- Social determinants of health, including reducing barriers to housing, healthy food and beverages, education, safe neighborhoods and environments, employment, healthcare, and others.
- Health disparities from holistic approaches such as bio-psycho-social models and mind, body, spirit models that take into account the whole person and the communities in which they live.

Vision

What does the SDDTAC hope to achieve in the long term?

San Francisco improves health, eliminates health disparities, and achieves equity through effective services and changes to the environment, systems, and policies.

Nutrition is a key element of health and of diet-related chronic diseases as a type of health disparity especially relevant to the Sugary Drinks Distributor Tax. Additionally, "San Francisco" is defined to include government districts, agencies and departments; service providers; community organizations; and the City's diverse residents and communities.

What is a Sugar Sweetened Beverage?

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.

Mission

What does the SDDTAC do? Why does it exist?

SDDTAC makes funding recommendations that support services and other innovative, community-led work to decrease sugary beverage consumption and related chronic diseases.

Evaluation is critical and necessary to inform funding recommendation and to effectively decrease consumption. The SDDTAC has a mandate to evaluate and to develop recommendations from the evaluation findings.

Values

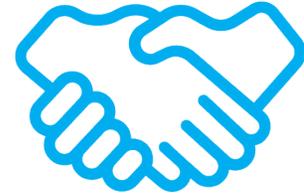
What does the SDDTAC do? Why does it exist?



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.



Prioritizing results and long-term impacts: funding should support policy, systems, and environmental changes that go beyond programming and focus on the systems that create 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 around the goal of improving health.



Building strong collaborations and partnerships: funding should support existing and new community-based partnerships and collaborations that leverage resources in order to increase capacity, effectiveness and impact of strategies, programs and services.



Eliminating structural inequities and achieving equity: including the multiple kinds of equity (e.g., health equity, racial equity) and the root causes of structural inequities and health disparities (e.g., systems of oppression, intentionally and unintentionally/implicitly biased policies, resource allocation decisions).

Priority Populations

SDDTAC funding will be prioritized for work that supports the following communities (individually and that overlap):

- **Low-income San Franciscans**
- **Black/African American, Pacific Islander, Native American, Latinx, Asian communities**
 - Populations shown to be consuming sugary drinks at a high rate
 - Populations disproportionately affected by diet sensitive chronic diseases (such as type 2 diabetes, obesity, heart disease, and/or tooth decay)
- **Children and youth 0-24 years old**



Cross-Cutting Approach to Strategies

Peer/promotora led approaches value community members as vehicles for promoting and enhancing change among peers by educating and sharing information with those who share the same language, culture, ethnicity and life experiences as them. By doing so, peer educators/promotoras are able to remove barriers to information and services.

Expand peer-led/promotora-led (community health worker) interventions within multiple strategies in order to:

- Promote the development of leadership, skills, and capacity of community members to become more effective leaders and decision-makers in their communities.
- Ensure that strategies and activities highlight and prioritize diverse cultural practices, traditional knowledge, and community perspectives.
- Value and involve communities in determining how strategies and activities are developed and implemented to advance positive health outcomes.
- Provide opportunities for community members to promote and enhance change by sharing information with their peers.
- Support skill building opportunities that lead to increased employability and employment.



Goal 1: Healthy People!



We know that the sugary drinks beverage industry targets low-income communities and communities of color in San Francisco. A focus on healthy people provides an opportunity to invest in community to address health inequities. To achieve this, the SDDTAC will recommend directing funds to community-led and informed strategies and initiatives, with a focus on priority populations. The SDDTAC will also recommend providing critical health-promoting education, programs and services to ensure people can access and navigate the services available to them.

Draft Strategies for Goal 1: Healthy People!

*Funding to support **healthy people** will be focused on the priority populations in San Francisco.*

- 1. Build community capacity and develop leadership to promote community power** to address the root causes of health inequities.
- 2. Provide health-promoting education, programs and services** that are free and low cost to ensure accessibility and engagement among priority populations.
- 3. Provide job readiness, skills training and career pathways** to support the health and well-being of priority populations (including carrying out the education, programs, and services outlined in strategy 2).

Goal 2: Healthy Places!

Having safe, equitable and healthy physical, economic, and social environments is critical to achieving SDDTAC's vision. To support healthy places in San Francisco, the SDDTAC has prioritized addressing the root causes of health inequities. Making sustainable reductions to sugary beverage consumption and diet-related chronic disease requires improvements to the City's infrastructure, built environment, and retail environment, as well as a reduction in income inequality and structural racism.

Draft Strategies for Goal 2: Healthy Places!

*Funding to support healthy places will be focused on the **places where priority populations are born, play, learn, live, work, get cared for, and gather**. The following strategies will be implemented throughout these places.*

1. **Expand access to healthy food, water, and oral health** (e.g., healthy retail, hydration stations, breastfeeding, healthy food vouchers)
2. **Decrease access and availability to sugary beverages**
3. **Increase opportunities for physical activity** (e.g., park improvements)
4. **Increase economic opportunities in priority neighborhoods** (e.g., via neighborhood associations led by long-term residents)
5. **Increase healthy messaging related to nutrition**



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
 - Increase food security
 - Increase in economic opportunity (not yet adopted)
- **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

More about the Sugary Tax

In November of 2016, the voters of San Francisco approved the passage of Proposition V. Proposition V established a 1 cent 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 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 in the City's Administrative Code. The ordinance stated that the Advisory 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.

