



Sugar-Sweetened Beverage Taxation – Industry Arguments

Counter Messages and Evidence

Updated August 2, 2021

This SSB tax evidence sheet contains common opposition arguments against SSB taxation and effective counterarguments backed by the latest research.

Taxing sugar-sweetened beverages (SSBs) is an effective, evidence-based public health response against rising rates of obesity, diabetes, and heart disease. To date, at least 46 countries, cities, and regions have instituted SSB taxes. SSB taxes decrease SSB consumption and encourage consumers to make healthier beverage choices, which can help to reduce obesity risk and subsequent risk of developing diet-related noncommunicable diseases (NCDs). SSBs impact geographies at a population level, encouraging behavior change through this policy intervention. Countries looking to address growing rates of obesity, type 2 diabetes and heart disease should strongly consider SSB taxes as part of a package of comprehensive healthy food policies. Using fact sheets provided by the Global Food Research Program at the University of North Carolina, Chapel Hill combined with additional analysis, this document attempts to lay out many industry arguments regarding SSB taxation in one document.

SSB Taxes: An Overview

SSB taxes are most frequently implemented as a type of excise tax – a tax applied to a specific product and levied on producers or distributors. Excise taxes help to incentivize behavior change because they can have a direct impact on the price of the product. These taxes also reduce administrative burden because rather than being collected from many different retailers, they can be collected directly from a smaller number of producers or distributors. Excise taxes can be applied as a specific tax, an ad valorem tax, or a mix of the two. A specific tax is a fixed amount of tax applied per unit volume, or it may be based on product characteristics, such as sugar content. South Africa and the United Kingdom have specific SSB taxes based on the sugar content of beverages. Ad valorem taxes are value-based taxes. They are applied as a percentage of the total value of the product, such as 20% of a beverage's retail price. [1] The World Health

¹ USA (8 local), Canada (Newfoundland Labrador), Bermuda, Mexico, Dominica, Barbados, Panama, Ecuador, Peru, Chile, Norway, Finland, Latvia, United Kingdom, Ireland, Belgium, France, Hungary, Spain (Catalonia), Portugal, St. Helena, Morocco, Mauritius, Seychelles, South Africa, Saudi Arabia, Bahrain, Qatar, United Arab Emirates, Oman, India, Thailand, Malaysia, Maldives, Philippines, Brunei, Cook Islands, Fiji, Palau, French Polynesia, Kiribati, Nauru, Samoa, Tonga, Vanuatu. Source: Popkin, B. M., & Ng, S. W. (2021). Sugar-sweetened beverage taxes: Lessons to date and the future of taxation. *Plos Medicine*, *18*(1), e1003412.





Organization (WHO) recommends SSB excise taxes, whether as a specific tax or ad valorem tax, raise SSB prices by at least 20% to have the greatest impact. [2 3]

KEY MESSAGES on SSB TAXES:

- Sugar consumption is a major contributor to the globally rising rates of obesity and diet
 related NCDs. Liquid forms of sugars found in sugar-sweetened beverages are particularly
 harmful to the body. Liquid sugars are less satisfying to the body and have no added
 nutritional value. When we consume these beverages, we may feel full, but we do not
 subsequently reduce the amount of food we eat, so total calorie intake increases.
- SSB taxes are an effective public health policy to reduce excess sugar consumption and over time will reduce the burden of obesity and NCDs.
- SSB taxes curb the consumption of sugary drinks and can lead people to choose healthier alternatives.
- Growing evidence from countries with SSB taxes shows that these policies, contrary to
 industry arguments, do not lower wages, reduce employment, or have any negative impact
 on the economy.

INDUSTRY ARGUMENTS AGAINST SSB TAXES & EVIDENCE TO COUNTER CLAIMS:

Industry claim #1: There is no evidence to demonstrate that SSB taxes will reduce obesity or diet-related NCDs.

Industry claim #2: SSB taxes unfairly target the beverage and sugar industries even though many other foods are high in sugar and contribute to obesity.

Industry claim #3: Individuals – not governments – should be responsible for their health, including deciding what to eat/drink.

Industry claim #4: SSB taxes disproportionately harm poor people.

Industry claim #5: SSB taxes will harm the economy and cause job losses.

Industry claim #6: SSB taxes give money to ineffective and corrupt government agencies.

Industry claim #1: There is no evidence to demonstrate that SSB taxes will reduce obesity or diet-related NCDs.





The beverage industry claims:

 "SSB taxes are not the solution to obesity or type 2 diabetes. Obesity and diabetes rates are not falling in countries where consumption of carbonated soft drinks and fruit drinks have declined."

The evidence says:

- Taxes on SSBs have decreased consumption where policies have been enacted.
- The two major causes of obesity and related health issues are drinking SSBs and consuming excess sugar.

Counter Messages:

- Numerous studies show that decreasing consumption of SSBs reduces the risk of obesity, type 2 diabetes, heart disease, and tooth decay.
- SSB taxes impact people at the population level which increases their impact.
- SSB taxes are a fairly recent policy intervention. As of today, researchers have found that SSB taxes in various geographies have led to reduced purchasing of taxed products compated to expected trends (see Table 1). These policies will need to be in place for several years, and adjust for inflation and market trends, in order to reveal reductions in obesity rates and diet-related NCDs.
- Ideally, countries will implement a package of evidence-based healthy food policies (as opposed to a single policy approach), as done in Chile, to reduce the burden of obesity and diet-related NCDs.

- Overconsumption of sugar, especially SSBs, is a major cause of obesity, diabetes and heart disease. [4 5]
 - O Drinking SSBs, regardless of other behaviors, can lead to weight gain, overweight and obesity. There is a clear link between increased SSB consumption and increased caloric intake. Decreasing SSB consumption can reduce the prevalence of obesity and dietrelated diseases. Intake of calories from sugary drinks is not compensated for by an equivalent reduction in calories from other foods. When we drink sodas and other sugary drinks, we may feel full, but we do not subsequently reduce the amount of food we eat, so total calorie intake increases. [6-15]
 - Sugars in drinks alter the body's metabolism, affecting insulin, cholesterol, and metabolites that cause high blood pressure and inflammation. These changes to the body increase the risk of type 2 diabetes, cardiovascular disease, tooth decay, metabolic syndrome, and liver disease. [16-22]
 - Reduced SSB consumption can lower risk factors for cancer. Overweight and obesity are risk factors for 13 of the 15 major types of cancer. [7 17 20 23]





A cohort study found that consuming two or more glasses per day of soft drinks was
associated with a 17% higher risk of death, compared to consumption of less than two
glasses per day. One to two glasses of sugar-sweetened soft drinks per day was
associated with a 59% higher risk of death from digestive diseases. [24] More details can
be found here: English

• SSB taxes have proven to reduce sugar consumption.

- Three years following the implementation of Mexico's sugary drink tax, consumption
 declined particularly among moderate (1 serving/week) and high consumers (1
 serving/day) of SSBs. [25] More details can be found here: English, Spanish, Portuguese
- Almost one year after Philadelphia's (Pennsylvania, US) implementation of a 1.5 cents per ounce beverage tax, daily consumption of added sugar decreased 22% (15 grams) for children who had consumed about one regular soda daily prior to the tax. Adult consumption of added sugar decreased by approximately 6 grams per day. [26]
 Philadelphia's SSB tax was also found to reduce the odds of daily regular soda consumption by 40%. [27]
- A few months following the implementation of Berkeley's (California, US) 1 cent per ounce SSB tax, low-income adults reported a 21% decline in their consumption of SSBs, and an increase in water consumption. Three years after the tax was implemented, consumption was reduced by about a half-drink per day, while water consumption increased by a full drink per day. [28-30] More details can be found here: English
- An analysis of Seattle's (Washington, US) 1.75 cent per ounce SSB tax found that implementation of the tax led to a small substitution to sweet snacks, such as candy or confections. Calories of sweets sold increased by 4% two years after implementation. This small increase does not offset the larger reductions in sales of SSBs following the tax's implementation (for more information on the reduction in sales, see Table 1). [31]

SSB taxes are effective in reducing consumption of SSBs.

- A study of low, medium, and high SSB consumers in South Africa found that the SSB tax led to reduced consumption of SSBs among all participants in the year following implementation. [32] More details can be found here: English
- Two years following the implementation of Thailand's sugar content based SSB tax of 14%, average daily SSB consumption declined by 2.8%. Consumption of carbonated beverages decreased the most, with a 17.7% reduction in average daily consumption. [33 34]
- Preliminary evaluations of the impact of Mauritius' SSB tax (implemented in 2013 at 10.5% and raised to 21% in 2016) on youth (aged 12 to 17) SSB consumption found that by 2017, the tax reduced the probability that boys will consume any SSBs by 11%. [35]
- See Appendix Table 1, which outlines the latest evidence on several evaluated country
 and city level SSB taxes' impact on sales and provides information about the tax rate and
 structure.





 A meta-analysis of studies from areas with SSB taxes found that they witnessed a significant reduction in beverage purchases and dietary intake compared to areas without SSB taxes. [36]

• SSB taxes save lives and save money.

- A modeling study estimating the impact of Mexico's one peso per liter tax on sugary beverages found that Mexico will save almost US\$ 4.00 in healthcare spending for every dollar spent on the tax's implementation. The study also estimates that over 10 years the SSB tax will lead to over 200,000 fewer cases of obesity and 61,000 fewer cases of type 2 diabetes. Doubling the tax would almost double the cost savings and health impact of this policy. [37] More details can be found here: English
- The impact of reduced SSB consumption on oral health is one of the first health benefits that can be observed because of SSB taxes. Mexico's tax has also been estimated to yield immediate reductions in the number of individuals having experienced dental caries (decayed, missing or filled teeth) with a significant decline within the first quarter after the tax was implemented. [38]
- A modeling study of 11%, 20% and 25% SSB taxes in Thailand found that SSB taxes would lead to reductions in weight and obesity prevalence. The implementation of 11%, 20%, and 25% taxes led to average weight reductions of 0.5 kg, 0.9 kg, and 1.1 kg, and reductions in obesity prevalence of 1.7%, 3.8%, and 4.9%, respectively, in three years. [39]
- A modeling study of the UK's SSB tax found that the tax could result in over 19,000 fewer cases of type 2 diabetes per year, and nearly 270,000 fewer decayed, missing, or filled teeth annually. [40]

Industry claim #2: SSB taxes unfairly target the beverage and sugar industries even though many other foods are high in sugar and contribute to obesity.

The beverage industry claims:

- "It is shortsighted to target SSBs because all calories are equal."
- "SSBs account for just a portion of calories in the average person's diet.
 Obesity is caused by many factors."

The evidence says:

- SSBs promote excess calorie intake which can lead to obesity and type 2 diabetes.
- SSBs provide calories your body doesn't need in a way that is actively harmful to your health.

Counter Messages:

SSBs are one of the largest contributors of added sugar to diets.





 While some foods might be high in sugar, SSBs are particularly easy to overconsume because they don't make the body feel full and can actually create cravings for more food and drinks.

Counter Evidence:

- SSBs are a major contributor of increased calorie intake and, in most countries, is the leading source of added sugar in diets.
 - Globally, between 1980 and 2008, obesity prevalence rose from 4.8% to 9.8% in men and from 7.9% to 13.8% in women. Increased availability and consumption of ultraprocessed foods, including SSBs, is a major driver in the global obesity epidemic. [6 41]
 - In most low- and middle-income countries, daily calories per person from SSBs are increasing. [42]
 - SSB intake in the Latin American region is increasing, and on average, Latin Americans consume very high levels of added sugar, in some cases, more than triple the amount recommended by the WHO. Beverages are the largest source of sugar in the diets of most children, adolescents, and young adults in the region. In the Caribbean and Central America, average daily SSB consumption is particularly high, with 1.9 and 1.6 average daily 8-ounce servings per adult, compared with 0.6 globally. [43-45]
 - The World Health Organization and World Cancer Research Fund recommend that individuals should consume no more than 10% (and ideally less than 5%) of their total calories from added sugar. For an average 2,000 calorie diet, this is 12.5 teaspoons of sugar. On average, a single 335 ml can of soft drink contains around 40g of added sugars, or around 10 teaspoons. [46 47]
 - Based off the global average daily SSB consumption (4.8 ounces per person per day), adults are consuming half of the maximum sugar intake just from SSBs.²
 [45]
- Calories from liquid sugars are less satisfying and promote excess calorie consumption.
 - SSBs have no nutritional value. In fact, compared to calories from solid food, liquid calories found in SSBs are less satisfying and won't lead to the same feeling of fullness compared to eating an equal number of solid food calories. Liquid calories from SSBs are often referred to as "empty calories" because they lack nutritional value. Liquid sugars, such as those found in SSBs, are also less satisfying to the body than solid sugars. A comparison study assessing the intake of liquid (soda) versus solid sugars (jellybeans) concluded that consumption of liquid sugars led to a higher overall intake of calories than consumption of sugary foods. [48-50]

² In the Caribbean, where average daily SSB consumption is 1.9 servings, adults are consuming almost 20 teaspoons of sugar per day just from SSBs. In Central America, where average daily SSB consumption is 1.6 servings, adults are consuming over 16 teaspoons on sugar per day just from SSBs. (Singh et al., 2015)





 Liquid sugars found in SSBs are particularly harmful to the body. The liver absorbs liquid sugar more quickly (compared to solid sugars). This alters the body's metabolism, affecting insulin, cholesterol, and metabolites that cause high blood pressure and inflammation. This can increase risk of type 2 diabetes, cardiovascular disease, tooth decay, and liver disease. [17 18 48 51]

Industry claim #3: Individuals – not governments – should be responsible for their health, including deciding what to eat/drink.

The beverage industry claims:

- "Individuals are responsible for their own dietary choices."
- "Weight control is an issue of 'calories in and calories out.' Lack of physical activity and bad diets are more to blame than SSBs."
- "Governments should limit their responsibility to educating consumers about proper nutrition and stop interfering with consumer choices."
- "Taxes force everyone to bear the burden of people who make bad decisions and consume too many SSBs."

The evidence says:

- Taxes will not prevent consumers from purchasing SSBs but can decrease the amount and frequency that are purchased.
- Governments can promote healthy behaviors by implementing policies that help the population to make the healthy choice the default choice.
- The public have shown support for government action through sugary drink taxes, marketing regulations and easy to understand labels.
- SSBs provide a high concentration of easily consumed sugar and calories difficult to offset by exercise.

Counter Messages:

- A tax on sugary drinks, which makes sugary drinks more expensive, has been shown to cut
 consumption of these drinks. Consumers will still have the freedom to choose to buy and
 consume sugary drinks.
- If people choose to buy fewer sugary drinks, they can spend their savings on other goods and services.
- People with type 2 diabetes and other diet-related diseases lose time and face health and financial impacts. SSB taxes can reduce the burden placed on individuals, families, institutions, and countries.
- While exercise is important component of a healthy lifestyle, overwhelming scientific
 evidence shows that reducing calorie intake is the most effective way to limit weight gain
 and encourage weight loss.





- Did you know? It would take 16 minutes of running or one mile of walking to burn the calories from a 8 oz (237ml) can of regular soft drink, or 40 minutes of running and 2.5 miles of walking to offset the average intake of a 20 oz (591 ml) soft drink. [52]
- SSB taxes reduce SSB consumption while incentivizing consumers to consume water (or other healthier alternatives).

- SSB taxes change/promote healthier behaviors by encouraging the purchase and consumption of healthier beverages, such as water.
 - Mexico's SSB tax increased purchases of untaxed beverages by 4% in the first year of the tax, primarily driven by increased purchases of bottled water. Mexico's SSB tax also led to an 11% increase in the purchase of healthier beverages (such as water) among high purchasers of SSBs (households who purchased more than 150.3ml per capita per day of SSBs prior to the implementation of the SSB tax). [53 54] More details can be found here: English
 - o Implementation of a 10% tax on SSBs in Barbados led to a 4.3% decrease in weekly SSB sales at a grocery store chain, while sales of non-SSBs (including bottled water, coconut water, juices, and unsweetened milk) increased by 5.2%. Bottled water sales increased by an average of 7.5%. [55]
 - One year after implementation of South Africa's SSB tax, purchases of non-taxed beverages increased by 10%, compared to trends prior to the announcement of the tax.
 [56] More details can be found here: English, Spanish, Portuguese
 - A modeling study found that in Chile, a price increase of 10% for soft drinks was associated with a 6.3% increase in the consumption of water, indicating that a tax on soft drinks could lead to increases in substitutions for healthier beverages. [57]
 - Within months of the implementation of Berkeley's (California, US) 1 cent per ounce SSB tax, low-income adults reported a 21% decline in their consumption of SSBs, and an increase in water consumption. In the following year, sales of water increased by 15.6%; three years after implementation, consumption of SSBs was reduced by about a half-drink per day, while water consumption increased by a full drink per day. [28-30] More details can be found here: English
 - Tonga's SSB tax led to significant increases in local manufacturing of bottled water. The value of bottled water manufacturing increased by 143%. [58]
- Changes to diet, rather than physical activity, are more effective at weight loss and reducing risks for NCDs.
 - Industry actors often try to shift the blame for obesity and NCDs to lack of physical activity rather than diet and their unhealthy products, despite clear evidence of the link between unhealthy foods and drinks, obesity, and NCDs. [59-65] For example:
 - In email exchanges between a vice president of Coca-Cola and several prominent public health figures (all of whom had received funding from the





- company) leading up to the Coca-Cola-sponsored 2012 and 2014 International Congresses of Physical Activity and Public Health, Coca-Cola deliberated with public health researchers on what topics to present at the Congresses and pushed for topics focusing on the role of physical activity in NCD prevention, despite also declaring that they had no role in the deliberations about the agenda and topic areas of the Congresses. [59]
- There have been numerous examples of industry in countries around the world pushing for a greater emphasis on physical activity as the solution to NCDs. In South Africa, industry actors, such as the Beverage Association of South Africa and Nestlé South Africa, have partnered with departments in the national government, including the Department of Basic Education, to promote physical activity and physical education programs as the solutions to rising rates of NCDs. Throughout Latin America and the Caribbean, companies such as Coca-Cola, PepsiCo, Nutresa, and Postobón have launched physical activity programs to educate about healthy lifestyles, while also promoting their own products. [60 62 66]
- Multiple systematic reviews exploring the impact of diet and exercise on weight loss have found that calorie reduction is more effective than exercise in reducing body weight. [67-69]
- Studies have found considerable support for SSB taxes from individuals.
 - A survey of adults in the United Kingdom found high level of support for the UK SSB tax. 70% of respondents supported the tax, and 71% believed it would be effective. [70]
 - A survey of one thousand adults in Quebec, Canada found that 60% of adults supported the implementation of a SSB tax. [71]
 - A survey of over two thousands adults in Australia found over half of respondents (55%)
 supported taxing SSBs to help prevent overweight and obesity in the population. [72]
 - A survey of nearly 400 adults in Saudi Arabia found that of surveyed adults who consumed soft drinks, over half (56%) supported an SSB tax.[73]
 - Support for SSB taxes increases when tax revenues are allocated for health promotion programs.
 - A survey of nearly 20,000 adults in the United States, United Kingdom, Canada, Mexico, and Australia found that support for SSB taxes increased by 9% if the revenues from the tax were earmarked to be spent on subsidizing healthy foods. [74]
 - Studies in Canada and Australia found that support for SSB taxes increased by 17% when revenues were reinvested into programs to fight obesity. In Australia, 77% of respondents supported SSB tax revenue being earmarked to fund obesity prevention programs. [71 75]





Industry claim #4: SSB taxes disproportionately harm poor people.

The beverage industry claims:

- "Taxes on SSBs disproportionately hurt low-income people."
- "Poorer communities are more likely to rely on SSBs as a cheap energy source"

The evidence says:

- SSB taxes benefit low-income populations by encouraging reduction of SSB consumption.
- Low-income individuals are disproportionately impacted by health conditions linked to overconsumption of SSBs.

Counter Messages:

- Obesity and type 2 diabetes are more prevalent in low-income populations compared to high income populations.
- Type 2 diabetes and heart disease are costly for families both economically and as a long-term health burden. These costs include loss of productivity, reduction of quality of life, and the need for caregiving resources.
- Lower-income consumers are more responsive to price increases and are more likely to
 reduce consumption of SSBs than higher income consumers. They can then use the money
 they save from reducing their SSB purchases in other ways. The benefits of reducing SSB
 consumption among lower-income populations outweigh costs these populations may face
 as a result of the tax.

- SSB consumption is highest among low-income populations. Low-income populations are also disproportionately impacted by overweight, obesity, and diet-related NCDs. [76 77]
 - In many countries, lower-income households consume more SSBs, so they suffer more from obesity, diabetes, and other diet-related illnesses. [78-82]
 - The costs of diet-related diseases (treatment costs, loss in productivity, loss of quality of life, family members providing care) are also a heavier burden on lower-income households compared to higher-income households. [83] Moreover lower income households have the highest prevalence of untreated and poorly treated NCDs. [84]
 - Lower-income consumers are more price-responsive, meaning SSB taxes are particularly effective at reducing purchasing and consumption among these groups. [36 85]
 - The beverage industry aggressively markets its products in low-income areas, which contributes to this population's high levels of consumption. [81 86-88]
- SSB taxes have progressive health benefits.





- A systematic review of the effects of an SSB price increase on purchases and consumption found that, for a 20% SSB tax, lower-income households would pay between 0.1% to 1% of their annual household income in SSB taxes (equating to less than US\$ 20 per year) compared to higher-income households paying between 0.03% to 0.6% of their annual household income (or around US\$ 15-17 per year). [89]
- o In Brazil, a 10% increase in the price of SSBs was estimated to reduce calories consumed from SSBs by 10% among the poor and by 6.3% among the non-poor. [82 90]
- A study of Mexico's SSB tax found the low-SES group had the greatest reductions in SSB purchasing. This group also increased their consumption of untaxed (healthier) beverages by 13% two years after the tax's implementation. [53] More details can be found here: English
- Another study of Mexico's tax found purchases of unhealthy beverages by low-income households in Mexico reduced more dramatically than purchases by medium- and highincome households. [91]
- Decreases in soft drink beverage expenditures were greater in low-income households compared to high-income households, following Tonga's SSB tax. [92]
- Before the announcement of South Africa's SSB tax, lower socioeconomic status households purchased more taxed sugar-sweetened carbonates than higher socioeconomic status households. After the implementation of the tax, lower socioeconomic households experienced larger reductions in purchases. Lower socioeconomic status households purchased on average 8.2 fewer grams of sugar per person per day after the tax's implementation, compared to a reduction of 2.1 grams for higher socioeconomic status households. [56] More details can be found here: English, Spanish, Portuguese
- A modelling study of the impact of a 20% SSB tax in Australia found that the lowest income populations experience the greatest health gains and highest healthcare costs savings. [93]

Industry claim #5: SSB taxes will harm the economy and cause job losses.

The beverage industry claims:

- "Taxes on SSBs will have an adverse economic impact."
- "Taxes will eliminate jobs—in food retail, beverage manufacturing, and in the sugar industry—and in turn hurt struggling families."

The evidence says:

- SSB taxes have not led to job losses. SSBs remain a major profit generator for the beverage industry.
- SSB consumption increases the risk of chronic diseases that are a huge burden to taxpayers supporting national health systems.





Counter Messages:

- SSB taxes reduce purchases of sugary beverages but have not proven to reduce untaxed beverage purchases or revenues, especially since purchases of healthier beverages, like water, increase when SSBs are taxed.
- There has been no documented link between SSB taxes and job losses in the beverage industry.

- Studies from the US, Mexico, and UK have found no significant job losses for the beverage manufacturing or the food retail industry or other negative economic impacts following SSB taxes. [94]
 - In Berkeley (California, US), food retail store revenues have not declined after the SSB tax, and employment in the food sector increased 7% between July 2014 and June 2016, 15 months following the tax's implementation. [29 95]
 - San Francisco (California, US) saw no impacts on employment in the overall economy, private sector, beverage manufacturing, supermarkets and other grocery stores, convenience stores, or limited-service restaurants two years following the implementation of an SSB tax. [96]
 - Evaluations of Philadelphia's (Pennsylvania, US) SSB tax one and 2.5 years after implementation found no statistically significant changes to unemployment claims for supermarkets, soft drink manufacturers, and other relevant industries following the implementation of the SSB tax, compared to neighboring counties without SSB taxes.
 [97 98] More details can be found here: English.
 - An analysis of the impact of the SSB and nonessential food taxes in Mexico found no decrease in total employment, employment in commercial stores, or national unemployment after the implementation. [99]
 - A simulation of the impact of an SSB tax between 20% and 50% in Brazil found that the tax would increase gross domestic product by between R\$ 2.4 billion (US\$ 460 million) and R\$ 3.8 billion (US\$ 736 million), and would generate between 69,000 and 200,000 jobs, depending on the tax rate. [100]
 - A simulation model of the impact of a 20% SSB tax in Illinois and California found that the implementation of the tax would result in a net employment gain in both states.
 [94]
 - Despite decreasing the number of high-in sugar beverages sold in the UK, the UK's SSB tax was not associated with a long-term negative impact on the stock valuation of UK beverage manufacturers. [101 102] More details can be found here: <u>English</u>, <u>Spanish</u>, <u>Portuguese</u>.





- A systematic review of 11 studies analyzing the economic impact of diet-related fiscal policies (primarily SSB taxes) found no robust evidence for a negative economic impact from the implementation of these policies. [103]
- A study on the impact of a set of Chilean laws that produced a 24.7% reduction in SSB purchases found no reduction in employment or wages paid to manufacturers. [104]
- SSB consumption contributes to diet-related diseases that lead to productivity losses and pose a huge financial burden to national healthcare systems. SSB taxes can reduce consumption of SSBs and ultimately reduce risk for diet-related diseases, not only providing revenue for economies but also reducing healthcare costs.
 - A 2018 study estimated that sugary drink consumption in Mexico led to a productivity loss of US\$ 1.4 billion. More than half of this productivity loss is due to premature death (from diet-related diseases). [105] More details can be found here: English
 - The average cost to the United States healthcare system of treating issues linked to SSB consumption is around 10 cents per 12-oz soft drink. [106] More details can be found here: English
 - A study in Australia projected that a 20% tax on SSBs would improve health outcomes and reduce healthcare costs by AU\$ 425 million (US\$ 329 million), and provide productivity gains in the paid (by AU\$ 751 million or US\$ 581 million) and unpaid sectors (by AU\$ 1172 million or US\$ 906 million) of the economy. [107]
 - A study modeling the impact of a 20% SSB tax in South Africa estimated the tax may avert 72,000 premature deaths and save over ZAR 5 billion (US\$ 330 million) in healthcare costs over 20 years. [108]
 - A study modelling the impact of a statewide SSB tax of US\$ 0.02 per ounce in California (US) estimated the tax would save US\$ 1.8 billion in health care costs over 10 years.
 [109]
- Obesity and diet-related noncommunicable diseases negatively impact the economy by decreasing worker productivity and increasing job absenteeism. [82]
 - A study from Mexico estimated productivity losses of US\$ 1.4 billion due to low worker productivity and premature mortality from SSB consumption. [82 105]
 - Studies from the US and other countries show obesity has a profound impact on worker productivity while at work (presenteeism) as well as absenteeism and pre-mature retirement. [110-114]
- SSB taxes lead to greater sales of untaxed, healthier beverages. This offsets reductions in SSB revenues. Multiple geographies with SSB taxes have seen increases in total beverage sales and revenues for beverage manufacturers, despite decreases in SSB sales.
 - While the UK SSB tax (2016) led to reductions in the total volume of sugar in beverages purchased per capita per day and in the mean sugar content per beverage, total UK beverage sales rose by 7% in the period from 2015 to 2018. [115] More details can be found here: English





- After the implementation of a SSB tax in France, revenues for beverage manufacturers increased despite a decline in sugary drink consumption. [116]
- Mexico's SSB tax increased purchases of untaxed beverages by 4%, primarily driven by increased purchases of bottled water. Mexico's SSB tax also led to an 11% increase in the purchase of healthier beverages (almost entirely bottled water) among high SSB purchasers (households who purchased more than 150.3ml per capita per day of SSBs prior to the implementation of the SSB tax). [53 54] More details can be found here: English
- In the year following implementation of Berkeley's (California, US) SSB tax, the sales of plain waters increased by 15.6%. [29]
- A modeling study measuring price elasticity found that in Chile, a price increase of 10% for soft drinks was associated with a 6.3% increase in the consumption of water, indicating that a tax on soft drinks could lead to increases in substitutions for healthier beverages. [57]
- Following implementation of a 10% SSB tax in Barbados, non-SSB sales (including bottled water, coconut water, juices, and unsweetened milk) rose by 5.2%, driven by a 7.5% increase in bottled water sales. [55] *More details can be found here: English*
- Tonga's SSB tax led to significant increases in local manufacturing of bottled water. The value of bottled water manufacturing increased by 143%. [58]
- Evaluations of other healthy food policies have found no evidence of negative economic impacts as a result of the policies' implementation.
 - A year and a half following implementation of Chile's Law of Food Labelling and Advertising, a package of evidence-based food policies, researchers found that the law did not negatively impact employment or wages. [117] More details can be found here: English, Spanish.
- Preliminary studies have shown that SSB taxes will not have a disproportionate impact on small retailers.
 - Estimates of the Philadelphia (Pennsylvania, US) tax's impact on SSB purchases at small stores, such as small grocery stores, gas stations, and convenience stores, and independent retailers were found to be near zero and not statistically significant. The greatest decreases in purchases were estimated to be at large grocery stores and warehouse clubs. [26]
 - In Berkeley, Oakland, and San Francisco (California, US), three cities with SSB taxes, over 100 retailers were evaluated on their perceptions of SSB taxes. When asked how the SSB tax has affected their business, the majority (70%) of both small and large retailers responded with "minimally or no effect." [118]

Industry claim #6: SSB taxes give money to ineffective and corrupt government agencies.





The beverage industry claims:

 "SSB taxes just line the pockets of wasteful, corrupt government agencies and officials."

The evidence says:

 SSB taxes can provide critical resources for public health programs to combat accelerating health crises like obesity that impact all citizens.

Counter Messages:

- Revenues from taxed SSBs can be reinvested into programs to support healthy eating and other social needs.
- Investment in public health and education programs is necessary to reduce the enormous future costs of obesity and diet-related diseases.
- As economies work to recover from the COVID-19 pandemic, SSB taxes can generate much needed revenue for governments, in addition to improving public health.

- Revenues raised by SSB taxes can be reinvested into programs to improve public health, such as subsidizing drinking water infrastructure and healthy meals in schools or providing funding for health communications campaigns. [82]
 - In the Philippines, significant portions of the revenues from taxes on alcohol, tobacco, and sugar-sweetened beverages are earmarked to provide funding for the country's National Health Insurance subsidies and for health facility upgrades. This earmarking has provided a sustained and significant source of revenue, tripling resources for health in 5 years (2013 2018). [119]
 - Revenues from Thailand's tax on tobacco and alcohol products are used for the Thai
 Health Promotion Foundation, which uses the revenues to fund programs dedicated to
 the prevention of tobacco use, unsafe alcohol use, and unsafe driving. [119]
 - Revenue from the UK's SSB tax will be used to promote children's health, including funding sport and physical education programs and school breakfast programs in schools. [120]
 - US\$ 2 million of Berkeley's (California, US) SSB tax revenue has been allocated for programs designed to improve nutrition. [121]
 - In the United States, nearly all cities with SSB taxes have invested tax revenues in programs that explicitly benefit low-income and other marginalized populations. [122]
 - Of the over US\$ 133 million in SSB tax revenue collected between 2018 and 2021, 85% (US\$ 113 million) were used to support work and programs in communities that experience health inequities, discrimination, and exclusion. [123]





- In the United States, SSB taxes are also being used as a community engagement tool for those who are most impacted by the harmful health effects of SSBs and to counter the perception that these taxes unfairly impact lower-income communities.
 - For example, in San Francisco (California), the Shape UP coalition was launched to help mobilize community members to advocate for policy change. The coalition's work included exploring attitudes towards SSB regulations among the communities most affected by SSB intake and heavily targeted by beverage industry marketing. This enabled a community voice to be involved in policy deliberations, and highlighted not only the need for regulations to reduce SSB intake among this community, but also a need for greater availability of free, clean drinking water. This work supported the passage of San Francisco's SSB tax, led to the school district and multiple health care facilities in the region prohibiting the sale or distribution of SSBs, and led to a partnership with the San Francisco Public Utilities Commission to deploy new filtered tap water stations at public venues in low-income communities. [124]
- SSB taxes have been used to fund essential programs.
 - Seattle's (Washington, US) soda tax revenues are earmarked to support education and programs that promote healthy diets for low-income communities. [125 126]
 - Philadelphia's (Pennsylvania, US) sugary beverage tax supports pre-Kindergarten, community schools, and improvements to parks, recreation centers, and libraries. Between July 2017 and March 2020, this tax will raise US\$ 244.2 million in revenue, of which US\$ 93.3 million will go to pre-Kindergarten education and community schools. [97]
- As economies work to recover from the COVID-19 pandemic, SSB taxes can generate much needed revenue for governments, in addition to improving public health.
 - US\$ 5 million of revenue from Seattle's (Washington, US) SSB tax were used to provide supermarket vouchers to over 6,000 Seattle families in response to the COVID-19 crisis.
 [127]
 - US\$ 1.65 million in funds from San Francisco's (California, US) Sugary Drinks Distributor
 Tax were used to provide emergency food relief for people who are struggling to afford
 food due to COVID-19. [128]
 - In India, revenues from a duty on tobacco are earmarked for the National Disaster
 Response Fund. These funds have been used for medical supplies needed for COVID-19.
 [119]

For more information on SSB taxes, please consult the following resources:

- Resources page from the Global Food Research Program at the University of North Carolina, Chapel Hill
 - o Fact sheet: Why Tax Sugary Drinks?
 - Fact sheet: Taxation and Price of Sugary Drinks: Countering Industry Claims





- Resources created by the Pan American Health Organization
 - o Sugar-sweetened beverage taxation in the Region of the Americas
- Research alerts created by the Food Policy Program at the Global Health Advocacy Incubator

o Caribbean:

 SSB tax in Barbados reduced purchases of sugary beverages and increased purchases of non-SSBs (English)

Latin America:

- Comprehensive Chilean policy package significantly reduced purchases of sugary beverages (English)
- No negative economic impact from Chile's food policy law: jobs and wages not reduced (English, Spanish)
- High consumers of sugar-sweetened beverages in Mexico reduced purchases of sugary beverages after implementation of tax (English)
- Productivity loss from diseases associated with sugary drink consumption in Mexico creates significant economic burden (English)
- Sugary drinks tax in Mexico helped reduce consumption of soft drinks after just
 3 years (English, Spanish, Portuguese)
- Mexican tax on sugar-sweetened beverages is cost-effective and will improve health (English)

South Africa:

- South Africa's food industry deploys a variety of strategies to derail public health policies (English, Spanish, Portuguese)
- South African study shows first evidence of positive impact of sugary drinks tax on South Africans' dietary behaviors (English)
- South Africa's sugary drink tax successfully raises price of SSBs (English)
- Misleading evidence at heart of beverage industry arguments against SSB taxes (English)
- Industry used economic arguments and misused evidence during South Africa's sugary drinks tax policymaking process (English)
- New study indicates South Africa tax on sugary drinks is working (<u>English</u>, <u>Spanish</u>, <u>Portuguese</u>)

United Kingdom:

- UK tax on sugar-sweetened beverages accelerated reductions in overall sugar content (English)
- UK tax on sugary beverages decreased number of high-in-sugar beverages and did not hurt UK manufacturers' value in the stock market (<u>English</u>, <u>Spanish</u>, Portuguese)

United States:

The societal benefit of taxes on SSBs (English)





- One year later: Philadelphia, Pennsylvania Beverage Tax significantly reduced sales of sugary drinks (English)
- Debunking employment claims one year after Philadelphia's beverage tax (English)
- Reduction in SSB consumption sustained over 3 years after implementation of tax in Berkeley (English)
- Seattle SSB tax significantly reduced purchases of SSBs (English, Spanish, Portuguese)

Global:

- How the tobacco industry hooked kids on sugary drinks (English)
- High consumption of both 100% fruit juice and SSBs is associated with increased risk of death (English)
- Large study links high consumption of soft drinks with increased risk of death (English)





Appendix

Table 1: Tax rate and effectiveness (reduced sales) by geography

Country/	Tax rate and relevant details	Impact
geography		
Barbados	 10% tax on SSBs, including carbonated soft drinks, juice drinks, sports drinks, fruit juices Excludes bottled waters, 100% juices, coconut water, unsweetened milk and powdered drink Implemented in 2015 	By October 2016, one year after implementation, the tax: 1) Decreased weekly SSB grocery store sales by 4.3% 2) Increased sales of non-SSBs by 5.2%. [55]
Berkeley (California, United States)	 1 cent per ounce tax on beverages with caloric sweeteners Excludes dairy drinks, diet sodas, fruit juice Implemented in 2015 	By 2016, one year following implementation, the volume of SSBs sold decreased by 10%. [29 30]
Catalonia (Spain)	 O.08 Euro per liter for SSBs containing 5-8 grams of sugar per 100ml O.12 Euro for SSBs containing more than 8g of sugar per 100ml Includes soda drinks, fruit juices, sports drinks, teas and coffees, energetic drinks, sweetened milks, and flavored waters Excludes natural fruit juices, fermented milk drinks, and drinkable yogurts Implemented in 2017 [129 130] 	Within the first year of implementation, the sale of taxed beverages decreased 7.7% at one major supermarket chain, representing 10% of the Catalan market share. [131] In 2019, two years after implementation, the tax reduced regular cola purchases by 12.1%. [130]
Chile	A tiered tax of: 18% on SSBs containing at least 6.25 grams of sugar per 100ml	By the end of 2015, one year following the 3% tax increase (from 15% to 18%), the tax led to a:





	 10% on SSBs with less than 6.25 grams of sugar per 100ml Includes all non-alcoholic drinks with added sweeteners Excludes 100% fruit juices and dairy-based beverages These tax rates were implemented in October 2014, increasing the tax rate of SSBs containing high amounts of sugar by 3% (from 15% to 18%) 	 3.4% decrease in the volume, and 4.0% decrease in calories of monthly households purchases of beverages containing at least 6.25 g of sugar per 100ml [132]
Cook County (Illinois, United States)	 1 cent per ounce tax on SSBs and ASBs Included sodas, sweetened teas and coffees, energy and sports drinks, and fruit drinks Excluded 100% juices, milk, and milk substitutes Implemented in August 2017 [133 134] 	 From its implementation in August 2017 to December 2017, the tax led to a 25.7% decrease in the volume of taxed beverages sold (including both SSB and ASB). Following the repeal of the tax in December 2017, volume sold returned to pre-tax levels. [134]
Mexico	 1 peso per liter (~10% price increase) tax on all nonalcoholic beverages with added sugar Excludes 100% juices and artificially sweetened beverages Implemented in January 2014 	 Reduced purchases by 6% by the end of 2014, the first year of implementation [54] Reduced purchases by 10% by the end of 2015, 2 years after implementation [85] Sustained its impact and decreased purchases by another 2% during the third year of implementation [135]
Philadelphia (Pennsylvania, United States)	 1.5 cents per ounce tax on sugar-sweetened and artificially sweetened beverages (ASBs) Excludes products containing more than 50% milk and 100% fruit juices 	1) By December 2017, one year following implementation, purchases of taxed beverages (both SSBs and ASBs) decreased by 38%. [136]





	Implemented in January 2017 [27 136]	2) Two years following implementation, taxed beverages purchased at independent stores in Philadelphia decreased by 42%. [137]
Oakland (California, United States)	 1 cent per ounce on SSBs Excludes products with 25 calories or less per 12 ounces and milk products Implemented in July 2017 	One year following implementation, volume of taxed SSBs sold decreased by 8%. [138]
Saudi Arabia	 50% tax on carbonated beverages Includes any drink containing dissolved carbon dioxide gas 100% tax on energy drinks Implemented in June 2017 	By 2018, six months following implementation, the tax led to a 33% reduction in carbonated drink volume sales [139]
Seattle (Washington, United States)	 1.75 cent per ounce tax on SSBs with at least 40 calories per 12 ounces Excludes diet sodas, milk products, 100% fruit juices, and powders and concentrates [140] Implemented in January 2018 	In the first year of implementation, the volume sold of all taxed beverages fell by 22%. Sales of soda fell by 29%. [141]
South Africa	 Sugar-content based tax of 2.21 cents ZAR for each gram of sugar in a beverage that contains over 4g sugar per 100mL. Excludes fruit juices Implemented in 2018 	Compared to expected trends prior to the implementation of the tax, by March 2019, one year after implementation, there was a: 1) 51% reduction in sugar, a 52% reduction in calories; 2) 29% reduction in volume of beverages purchased per person per day after the tax was implemented. [56] More details on this study can be found here: English, Spanish, Portuguese





United	
Kingdom	

Sugar-content based tax of:

- £0.24 per liter for products containing more than 8g sugar per 100ml,
- £0.18 per liter for 5-8g sugar per 100ml,
- Products containing less than 5g of sugar per 100ml are exempt
- Includes soft drinks and excludes fruit juices and milk-based drink
- Implemented in 2018

By 2018, two years after the tax's announcement and months after its implementation:

 The volume of sales of soft drinks subject to the tax fell by 30%. [115]

More details on this study can be found here: <u>English</u>





References

- Pan American Health Organization. Sugar-sweetened beverage taxation in the Region of the Americas. Washington, D.C., 2020.
- 2. World Health Organization. Using price policies to promote healthier diets: WHO Regional Office for Europe, 2015.
- 3. Thow AM, Downs SM, Mayes C, Trevena H, Waqanivalu T, Cawley J. Fiscal policy to improve diets and prevent noncommunicable diseases: from recommendations to action. Bulletin of the World Health Organization 2018;96(3):201
- 4. World Health Organization. Guideline: sugars intake for adults and children: World Health Organization, 2015.
- 5. Park H, Yu S. Policy review: Implication of tax on sugar-sweetened beverages for reducing obesity and improving heart health. Health Policy and Technology 2019;8(1):92-95
- 6. Hu FB. Resolved: there is sufficient scientific evidence that decreasing sugar-sweetened beverage consumption will reduce the prevalence of obesity and obesity-related diseases. Obes Rev 2013;14(8):606-19 doi: 10.1111/obr.12040[published Online First: Epub Date] |.
- 7. World Cancer Research Fund. *Diet, nutrition, physical activity and cancer: a global perspective: a summary of the Third Expert Report*: World Cancer Research Fund International, 2018.
- Hauner H, Bechthold A, Boeing H, et al. Evidence-based guideline of the German Nutrition Society: carbohydrate intake and prevention of nutrition-related diseases. Ann Nutr Metab 2012;60 Suppl 1:1-58 doi: 10.1159/000335326[published Online First: Epub Date] |.
- Malik VS, Pan A, Willett WC, Hu FB. Sugar-sweetened beverages and weight gain in children and adults: a systematic review and meta-analysis. Am J Clin Nutr 2013;98(4):1084-102 doi: 10.3945/ajcn.113.058362[published Online First: Epub Date] |.
- 10. Malik VS, Schulze MB, Hu FB. Intake of sugar-sweetened beverages and weight gain: a systematic review. Am J Clin Nutr 2006;84(2):274-88 doi: 10.1093/ajcn/84.1.274[published Online First: Epub Date]|.
- 11. Te Morenga L, Mallard S, Mann J. Dietary sugars and body weight: systematic review and meta-analyses of randomised controlled trials and cohort studies. Bmj 2013;**346**
- 12. Vartanian LR, Schwartz MB, Brownell KD. Effects of soft drink consumption on nutrition and health: a systematic review and meta-analysis. Am J Public Health 2007;**97**(4):667-75 doi: 10.2105/ajph.2005.083782[published Online First: Epub Date] |.
- 13. Mourao D, Bressan J, Campbell W, Mattes R. Effects of food form on appetite and energy intake in lean and obese young adults. Int J Obes (Lond) 2007; **31**(11):1688-95 doi: 0803667 [pii] 10.1038/sj.ijo.0803667 [published Online First: Epub Date] |.
- 14. DiMeglio DP, Mattes RD. Liquid versus solid carbohydrate: effects on food intake and body weight. Int J Obes Relat Metab Disord 2000;**24**(6):794-800
- 15. DellaValle DM, Roe LS, Rolls BJ. Does the consumption of caloric and non-caloric beverages with a meal affect energy intake? Appetite 2005;44(2):187-93
- 16. Malik VS. Sugar sweetened beverages and cardiometabolic health. Curr Opin Cardiol 2017;**32**(5):572-79 doi: 10.1097/HCO.000000000000439[published Online First: Epub Date] |.
- 17. Malik VS, Popkin BM, Bray GA, Després J-P, Hu FB. Sugar-sweetened beverages, obesity, type 2 diabetes mellitus, and cardiovascular disease risk. Circulation 2010;**121**(11):1356-64
- 18. Malik VS, Popkin BM, Bray GA, Després J-P, Willett WC, Hu FB. Sugar-sweetened beverages and risk of metabolic syndrome and type 2 diabetes: a meta-analysis. Diabetes care 2010;**33**(11):2477-83
- 19. Anand SS, Hawkes C, De Souza RJ, et al. Food consumption and its impact on cardiovascular disease: importance of solutions focused on the globalized food system: a report from the workshop convened by the World Heart Federation. Journal of the American College of Cardiology 2015;66(14):1590-614
- 20. Malik VS, Hu FB. Sugar-Sweetened Beverages and Cardiometabolic Health: An Update of the Evidence. Nutrients 2019;**11**(8) doi: 10.3390/nu11081840[published Online First: Epub Date]|.
- 21. Deshpande G, Mapanga RF, Essop MF. Frequent sugar-sweetened beverage consumption and the onset of cardiometabolic diseases: cause for concern? Journal of the Endocrine Society 2017;1(11):1372-85
- 22. Imamura F, O'Connor L, Ye Z, et al. Consumption of sugar sweetened beverages, artificially sweetened beverages, and fruit juice and incidence of type 2 diabetes: systematic review, meta-analysis, and estimation of population attributable fraction. Bmj 2015;**351**
- 23. Joh H-K, Lee DH, Hur J, et al. Simple sugar and sugar-sweetened beverage intake during adolescence and risk of colorectal cancer precursors. Gastroenterology 2021
- 24. Mullee A, Romaguera D, Pearson-Stuttard J, et al. Association Between Soft Drink Consumption and Mortality in 10 European Countries. JAMA Internal Medicine 2019;**179**(11):1479-90 doi: 10.1001/jamainternmed.2019.2478[published Online First: Epub Date] |.





- 25. Sánchez-Romero LM, Canto-Osorio F, González-Morales R, et al. Association between tax on sugar sweetened beverages and soft drink consumption in adults in Mexico: open cohort longitudinal analysis of Health Workers Cohort Study. bmj 2020;369
- 26. Cawley J, Frisvold D, Hill A, Jones D. The impact of the Philadelphia beverage tax on purchases and consumption by adults and children. Journal of health economics 2019;67:102225
- 27. Zhong Y, Auchincloss AH, Lee BK, Kanter GP. The short-term impacts of the Philadelphia beverage tax on beverage consumption. American journal of preventive medicine 2018;55(1):26-34
- 28. Lee MM, Falbe J, Schillinger D, Basu S, McCulloch CE, Madsen KA. Sugar-sweetened beverage consumption 3 years after the Berkeley, California, sugar-sweetened beverage tax. American journal of public health 2019;109(4):637-39
- 29. Silver LD, Ng SW, Ryan-Ibarra S, et al. Changes in prices, sales, consumer spending, and beverage consumption one year after a tax on sugar-sweetened beverages in Berkeley, California, US: A before-and-after study. PLoS medicine 2017;14(4):e1002283
- 30. Falbe J, Thompson HR, Becker CM, Rojas N, McCulloch CE, Madsen KA. Impact of the Berkeley excise tax on sugarsweetened beverage consumption. American journal of public health 2016; 106(10):1865-71
- 31. Oddo VM, Leider J, Powell LM. The Impact of Seattle's Sugar-Sweetened Beverage Tax on Substitution to Sweets and Salty Snacks. The Journal of Nutrition 2021
- 32. Wrottesley SV, Stacey N, Mukoma G, Hofman KJ, Norris SA. Assessing sugar-sweetened beverage intakes, added sugar intakes and body mass index before and after the implementation of a sugar-sweetened beverage tax in South Africa. Public Health Nutrition 2020:1-26
- 33. Phulkerd S, Thongcharoenchupong N, Chamratrithirong A, Soottipong Gray R, Prasertsom P. Changes in Population-Level Consumption of Taxed and Non-Taxed Sugar-Sweetened Beverages (SSB) after Implementation of SSB Excise Tax in Thailand: A Prospective Cohort Study. Nutrients 2020;12(11):3294
- 34. Osornprasop S, Phulkerd S, Gowachirapant S. Lessons Learned from Thailand's Obesity Prevention and Control Policies: The World Bank, 2018.
- 35. Cawley J, Daly MR, Thornton R. The Effect of Beverage Taxes on Youth Consumption and BMI: Evidence from Mauritius: National Bureau of Economic Research, 2021.
- 36. Teng AM, Jones AC, Mizdrak A, Signal L, Genç M, Wilson N. Impact of sugar-sweetened beverage taxes on purchases and dietary intake: Systematic review and meta-analysis. Obesity Reviews 2019; 20(9):1187-204
- 37. Basto-Abreu A, Barrientos-Gutiérrez T, Vidaña-Pérez D, et al. Cost-Effectiveness Of The Sugar-Sweetened Beverage Excise Tax In Mexico. Health Affairs 2019;**38**(11):1824-31
- 38. Hernández-F M, Cantoral A, Colchero MA. Taxes to Unhealthy Food and Beverages and Oral Health in Mexico: An Observational Study. Caries Research:1-10
- 39. Phonsuk P, Vongmongkol V, Ponguttha S, Suphanchaimat R, Rojroongwasinkul N, Swinburn BA. Impacts of a sugar sweetened beverage tax on body mass index and obesity in Thailand: A modelling study. Plos one 2021;**16**(4):e0250841
- 40. Briggs AD, Mytton OT, Kehlbacher A, et al. Health impact assessment of the UK soft drinks industry levy: a comparative risk assessment modelling study. The Lancet Public Health 2017;**2**(1):e15-e22
- 41. Malik VS, Willett WC, Hu FB. Global obesity: trends, risk factors and policy implications. Nature Reviews Endocrinology 2013;9(1):13-27
- 42. Popkin BM, Hawkes C. Sweetening of the global diet, particularly beverages: patterns, trends, and policy responses. The Lancet Diabetes & Endocrinology 2016; 4(2):174-86
- 43. Sandoval RC, Roche M, Belausteguigoitia I, et al. Excise taxes on sugar-sweetened beverages in Latin America and the Caribbean. Revista Panamericana de Salud Pública 2021;45
- 44. Popkin BM, Reardon T. Obesity and the food system transformation in Latin America. Obesity Reviews 2018;19(8):1028-64
- 45. Singh GM, Micha R, Khatibzadeh S, et al. Global, regional, and national consumption of sugar-sweetened beverages, fruit juices, and milk: a systematic assessment of beverage intake in 187 countries. PloS one 2015;10(8):e0124845
- 46. World Cancer Research Fund. Curbing global sugar consumption. Effective food policy actions to help promote healthy diets & tackle obesity: WCRF London, 2015.
- 47. World Health Organization. Taxes on sugary drinks: Why do it?: World Health Organization, 2017.
- 48. Malik VS, Hu FB. Fructose and cardiometabolic health: what the evidence from sugar-sweetened beverages tells us. Journal of the American College of Cardiology 2015;66(14):1615-24
- 49. Mourao DM, Bressan J, Campbell WW, Mattes RD. Effects of food form on appetite and energy intake in lean and obese young adults. International journal of obesity 2007;**31**(11):1688-95





- 50. DiMeglio DP, Mattes RD. Liquid versus solid carbohydrate: effects on food intake and body weight. International journal of obesity 2000;**24**(6):794-800
- 51. Te Morenga LA, Howatson AJ, Jones RM, Mann J. Dietary sugars and cardiometabolic risk: systematic review and meta-analyses of randomized controlled trials of the effects on blood pressure and lipids. The American journal of clinical nutrition 2014;**100**(1):65-79
- 52. Heyward VH, Gibson A. *Advanced fitness assessment and exercise prescription 7th edition*. Champaign Illinois: Human kineticsPublishing, 2014.
- 53. Ng SW, Rivera JA, Popkin BM, Colchero MA. Did high sugar-sweetened beverage purchasers respond differently to the excise tax on sugar-sweetened beverages in Mexico? Public health nutrition 2019;22(4):750-56
- 54. Colchero MA, Popkin BM, Rivera JA, Ng SW. Beverage purchases from stores in Mexico under the excise tax on sugar sweetened beverages: observational study. bmj 2016;**352**
- 55. Alvarado M, Unwin N, Sharp SJ, et al. Assessing the impact of the Barbados sugar-sweetened beverage tax on beverage sales: an observational study. International Journal of Behavioral Nutrition and Physical Activity 2019;16(1):13
- 56. Stacey N, Edoka I, Hofman K, Swart EC, Popkin B, Ng SW. Changes in beverage purchases following the announcement and implementation of South Africa's Health Promotion Levy: an observational study. The Lancet Planetary Health 2021;5(4):e200-e08
- 57. Guerrero-López CM, Unar-Munguía M, Colchero MA. Price elasticity of the demand for soft drinks, other sugar-sweetened beverages and energy dense food in Chile. BMC public health 2017;17(1):1-8
- 58. Teng A, Puloka V, Genç M, et al. Sweetened beverage taxes and changes in beverage price, imports and manufacturing: interrupted time series analysis in a middle-income country. International Journal of Behavioral Nutrition and Physical Activity 2020;17(1):1-12
- 59. Wood B, Ruskin G, Sacks G. How Coca-Cola Shaped the International Congress on Physical Activity and Public Health: An Analysis of Email Exchanges between 2012 and 2014. International Journal of Environmental Research and Public Health 2020;17(23):8996
- 60. Mialon M, Crosbie E, Sacks G. Mapping of food industry strategies to influence public health policy, research and practice in South Africa. International Journal of Public Health 2020;**65**(7):1027-36 doi: 10.1007/s00038-020-01407-1[published Online First: Epub Date]|.
- 61. Mialon M, Mialon J. Analysis of corporate political activity strategies of the food industry: evidence from France. Public Health Nutrition 2018;**21**(18):3407-21 doi: 10.1017/S1368980018001763[published Online First: Epub Date]|.
- 62. Mialon M, da Silva Gomes F. Public health and the ultra-processed food and drink products industry: corporate political activity of major transnationals in latin America and the Caribbean. Public health nutrition 2019;22(10):1898-908
- 63. Mialon M, Khandpur N, Laís MA, Martins APB. Arguments used by trade associations during the early development of a new front-of-pack nutrition labelling system in Brazil. 2020
- 64. Mialon M, Corvalan C, Cediel G, Scagliusi FB, Reyes M. Food industry political practices in Chile: "the economy has always been the main concern". Globalization and health 2020; 16(1):1-12
- 65. Zenone M, Silva D, Smith J, Lee K. How does the British Soft Drink Association respond to media research reporting on the health consequences of sugary drinks? Globalization and Health 2021;**17**(1):1-8
- 66. Mialon M, Charry DAG, Cediel G, Crosbie E, Scagliusi FB, Tamayo EMP. "The architecture of the state was transformed in favour of the interests of companies": corporate political activity of the food industry in Colombia. Globalization and health 2020; 16(1):1-16
- 67. Schwingshackl L, Dias S, Hoffmann G. Impact of long-term lifestyle programmes on weight loss and cardiovascular risk factors in overweight/obese participants: a systematic review and network meta-analysis. Systematic reviews 2014;3(1):130
- 68. Rabkin S, Campbell H. Comparison of reducing epicardial fat by exercise, diet or bariatric surgery weight loss strategies: a systematic review and meta-analysis. Obesity reviews 2015;16(5):406-15
- 69. Hall KD, Ayuketah A, Brychta R, et al. Ultra-processed diets cause excess calorie intake and weight gain: an inpatient randomized controlled trial of ad libitum food intake. Cell metabolism 2019;**30**(1):67-77. e3
- 70. Pell D, Penney T, Hammond D, Vanderlee L, White M, Adams J. Support for, and perceived effectiveness of, the UK soft drinks industry levy among UK adults: cross-sectional analysis of the International Food Policy Study. BMJ open 2019;9(3):e026698
- 71. Bélanger-Gravel A, Desroches S, Janezic I, Paquette M-C, De Wals P. Pattern and correlates of public support for public health interventions to reduce the consumption of sugar-sweetened beverages. Public health nutrition 2019;**22**(17):3270-80





- 72. Sainsbury E, Hendy C, Magnusson R, Colagiuri S. Public support for government regulatory interventions for overweight and obesity in Australia. BMC Public Health 2018;18(1):1-11
- 73. Jalloun RA. Knowledge, Attitudes, and Behaviors on Soft Drinks and Energy Drinks Taxation Among Adults in Al-Madinah Al-Munawara. Current Research in Nutrition and Food Science Journal 2021;9(2)
- 74. Kwon J, Cameron AJ, Hammond D, et al. A multi-country survey of public support for food policies to promote healthy diets: Findings from the International Food Policy Study. BMC public health 2019; 19(1):1-10
- 75. Miller CL, Dono J, Wakefield MA, et al. Are Australians ready for warning labels, marketing bans and sugary drink taxes? Two cross-sectional surveys measuring support for policy responses to sugar-sweetened beverages. BMJ open 2019;9(6):e027962
- 76. Di Cesare M, Khang Y-H, Asaria P, et al. Inequalities in non-communicable diseases and effective responses. The Lancet 2013;**381**(9866):585-97
- 77. Krueger PM, Reither EN. Mind the gap: race/ethnic and socioeconomic disparities in obesity. Current diabetes reports 2015;**15**(11):1-9
- 78. Brownell KD, Farley T, Willett WC, et al. The public health and economic benefits of taxing sugar-sweetened beverages. The New England journal of medicine 2009;**361**(16):1599
- 79. Han E, Powell LM. Consumption patterns of sugar-sweetened beverages in the United States. Journal of the Academy of Nutrition and Dietetics 2013;113(1):43-53
- 80. Grimes CA, Riddell LJ, Campbell KJ, Nowson CA. Dietary salt intake, sugar-sweetened beverage consumption, and obesity risk. Pediatrics 2013;**131**(1):14-21
- 81. Mullie P, Aerenhouts D, Clarys P. Demographic, socioeconomic and nutritional determinants of daily versus nondaily sugar-sweetened and artificially sweetened beverage consumption. European journal of clinical nutrition 2012;**66**(2):150-55
- 82. Pan-American Health Organization. Sugar-sweetened beverage taxation in the Region of the Americas. 2020
- 83. Seuring T, Archangelidi O, Suhrcke M. The economic costs of type 2 diabetes: a global systematic review. Pharmacoeconomics 2015;33(8):811-31
- 84. Murphy A, Palafox B, O'Donnell O, et al. Inequalities in the use of secondary prevention of cardiovascular disease by socioeconomic status: evidence from the PURE observational study. The Lancet Global Health 2018;6(3):e292-e301
- 85. Colchero MA, Rivera-Dommarco J, Popkin BM, Ng SW. In Mexico, evidence of sustained consumer response two years after implementing a sugar-sweetened beverage tax. Health Affairs 2017;**36**(3):564-71
- 86. Powell LM, Wada R, Kumanyika SK. Racial/ethnic and income disparities in child and adolescent exposure to food and beverage television ads across the US media markets. Health & place 2014;29:124-31
- 87. Sigala DM, Stanhope KL. An Exploration of the Role of Sugar-Sweetened Beverage in Promoting Obesity and Health Disparities. Current obesity reports 2021:1-14
- 88. Cervi MM, Agurs-Collins T, Dwyer LA, Thai CL, Moser RP, Nebeling LC. Susceptibility to food advertisements and sugar-sweetened beverage intake in non-Hispanic black and non-Hispanic white adolescents. Journal of community health 2017;42(4):748-56
- 89. Backholer K, Sarink D, Beauchamp A, et al. The impact of a tax on sugar-sweetened beverages according to socioeconomic position: a systematic review of the evidence. Public health nutrition 2016;19(17):3070-84
- 90. Claro RM, Levy RB, Popkin BM, Monteiro CA. Sugar-sweetened beverage taxes in Brazil. American journal of public health 2012;102(1):178-83
- 91. López-Olmedo N, Popkin BM, Taillie LS. The socioeconomic disparities in intakes and purchases of less-healthy foods and beverages have changed over time in urban Mexico. The Journal of nutrition 2018;**148**(1):109-16
- 92. Teng A, Buffière B, Genç M, et al. Equity of expenditure changes associated with a sweetened-beverage tax in Tonga: repeated cross-sectional household surveys. BMC public health 2021;**21**(1):1-13
- 93. Lal A, Mantilla-Herrera AM, Veerman L, et al. Modelled health benefits of a sugar-sweetened beverage tax across different socioeconomic groups in Australia: A cost-effectiveness and equity analysis. PLoS medicine 2017;14(6):e1002326
- 94. Powell LM, Wada R, Persky JJ, Chaloupka FJ. Employment impact of sugar-sweetened beverage taxes. American journal of public health 2014;**104**(4):672-77
- 95. Hattersley L, Fuchs A, Gonima A, Silver L, Mandeville K. Business, Employment, and Productivity Impacts of Sugar-Sweetened Beverages Taxes. 2020
- 96. Marinello S, Leider J, Powell LM. Employment impacts of the San Francisco sugar-sweetened beverage tax 2 years after implementation. Plos one 2021;**16**(6):e0252094
- 97. Marinello S, Leider J, Pugach O, Powell LM. The impact of the Philadelphia beverage tax on employment: A synthetic control analysis. Economics & Human Biology 2020;**40**:100939





- 98. Lawman HG, Bleich SN, Yan J, LeVasseur MT, Mitra N, Roberto CA. Unemployment claims in Philadelphia one year after implementation of the sweetened beverage tax. PloS one 2019;14(3):e0213218
- 99. Guerrero-López CM, Molina M, Colchero MA. Employment changes associated with the introduction of taxes on sugar-sweetened beverages and nonessential energy-dense food in Mexico. Preventive medicine 2017;105:S43-S49
- 100. Pan American Health Organization AHP. Tributação das Bebidas Adoçadas no Brasil, 2021: https://www.paho.org/pt/documentos/relatorio-tributacao-das-bebidas-adocadas-no-brasil.
- 101. Scarborough P, Adhikari V, Harrington RA, et al. Impact of the announcement and implementation of the UK Soft Drinks Industry Levy on sugar content, price, product size and number of available soft drinks in the UK, 2015-19: A controlled interrupted time series analysis. PLoS medicine 2020;17(2):e1003025
- 102. Law C, Cornelsen L, Adams J, et al. An analysis of the stock market reaction to the announcements of the UK Soft Drinks Industry Levy. Economics & Human Biology 2020;**38**:100834
- 103. Mounsey S, Veerman L, Jan S, Thow AM. The macroeconomic impacts of diet-related fiscal policy for NCD prevention: A systematic review. Economics & Human Biology 2020; **37**:100854
- 104. Paraje G, Colchero A, Wlasiuk JM, Sota AM, Popkin BM. The effects of the Chilean food policy package on aggregate employment and real wages. Food Policy 2021;**100**:102016 doi: https://doi.org/10.1016/j.foodpol.2020.102016[published Online First: Epub Date]].
- 105. Guerrero-López CM, Colchero MA. Productivity loss associated with the consumption of sugar-sweetened beverages in Mexico. Preventive medicine 2018;115:140-44
- 106. Allcott H, Lockwood BB, Taubinsky D. Should we tax sugar-sweetened beverages? An overview of theory and evidence. Journal of Economic Perspectives 2019;**33**(3):202-27
- 107. Nomaguchi T, Cunich M, Zapata-Diomedi B, Veerman JL. The impact on productivity of a hypothetical tax on sugar-sweetened beverages. Health Policy 2017; **121**(6):715-25
- 108. Manyema M, Veerman LJ, Tugendhaft A, Labadarios D, Hofman KJ. Modelling the potential impact of a sugarsweetened beverage tax on stroke mortality, costs and health-adjusted life years in South Africa. BMC Public Health 2016;16(1):405
- 109. Gouck J WL, Walter C, Pugliese J, Kurtz C, Seavey-Hultquist J, Barrett J, McCulloch S, Reiner J, Garrone M, Cradock A, Gortmaker, S. . California: A Sugary Drink Excise Tax California Department of Public Health, Sacramento, CA, the County of Santa Clara Public Health Department, San Jose, CA, and the CHOICES Learning Collaborative Partnership at the Harvard T.H. Chan School of Public Health, Boston, MA, 2021.
- 110. Cawley J, Biener A, Meyerhoefer C, et al. Job Absenteeism Costs of Obesity in the United States: National and State-Level Estimates. J Occup Environ Med 2021 doi: 10.1097/jom.0000000000002198[published Online First: Epub Date] |
- 111. Colditz GA. Economic costs of obesity and inactivity. Medicine & Science in Sports & Exercise 1999;**31**(11 Suppl):S663-7
- 112. Finkelstein EA, DiBonaventura Md, Burgess SM, Hale BC. The Costs of Obesity in the Workplace. J Occup Environ Med 2010;52(10):971-76 10.1097/JOM.0b013e3181f274d2
- 113. Popkin BM. Is the obesity epidemic a national security issue around the globe? Current Opinion in Endocrinology, Diabetes, and Obesity 2011;**18**(5):328-31 doi: 10.1097/MED.0b013e3283471c74[published Online First: Epub Date]|.
- 114. Andreyeva T, Sturm R, Ringel JS. Moderate and Severe Obesity Have Large Differences in Health Care Costs. Obes Res 2004;12(12):1936-43
- 115. Bandy L, Scarborough P, Harrington R, Rayner M, Jebb S. Reductions in sugar sales from soft drinks in the UK from 2015 to 2018. BMC medicine 2020;**18**(1):20
- 116. Berardi N, Sevestre P, Tepaut M, Vigneron A. The impact of a 'soda tax'on prices: evidence from French micro data. Applied Economics 2016;**48**(41):3976-94
- 117. Paraje G, Colchero A, Wlasiuk JM, Sota AM, Popkin BM. The effects of the Chilean food policy package on aggregate employment and real wages. Food Policy 2021:102016
- 118. Ponce J, Yuan H, Schillinger D, et al. Retailer perspectives on sugar-sweetened beverage taxes in the California Bay Area. Preventive medicine reports 2020; 19:101129
- 119. Ozer C, Bloom D, Martinez Valle A, et al. Health Earmarks and Health Taxes. 2020
- 120. White M CS, Rayner M, Smith R, Rutter H, Adams J, Scarborough P, Mytton O, Briggs A. Evaluation of the health impacts of the UK Treasury Soft Drinks Industry Levy (SDIL). London: National Institute of Health Research, 2018.
- 121. Roache SA, Gostin LO. The untapped power of soda taxes: incentivizing consumers, generating revenue, and altering corporate behavior. International journal of health policy and management 2017;6(9):489





- 122. Krieger J, Bleich SN, Scarmo S, Ng SW. Sugar-Sweetened Beverage Reduction Policies: Progress and Promise.

 Annual Review of Public Health 2020;42
- 123. Krieger J, Magee K, Hennings T, Schoof J, Madsen KA. How sugar-sweetened beverage tax revenues are being used in the United States. Preventive Medicine Reports 2021:101388
- 124. Grumbach K, Vargas RA, Fleisher P, et al. Achieving health equity through community engagement in translating evidence to policy: the San Francisco Health Improvement Partnership, 2010-2016. 2017
- 125. Saelens BE RM, Qu P, Walkinshaw L, Oddo V, Knox M, Chan NL, Jones-Smith JC. Twelve Month Report: Store Audits and Child Cohort - The Evaluation of Seattle's Sweetened Beverage Tax. Report for City of Seattle and Seattle City Council. 2020
- 126. Hodson J. Lower-income Seattle residents consuming fewer sugary drinks. Secondary Lower-income Seattle residents consuming fewer sugary drinks 2020. https://sph.washington.edu/news-events/news/lower-income-seattle-residents-consuming-fewer-sugary-drinks.
- 127. Beekman D. Seattle will provide \$800 each in supermarket vouchers to thousands of families during coronavirus crisis. Secondary Seattle will provide \$800 each in supermarket vouchers to thousands of families during coronavirus crisis 2020. https://www.seattletimes.com/seattle-news/politics/seattle-will-provide-800-in-supermarket-vouchers-to-thousands-of-families-during-coronavirus-crisis/.
- 128. San Francisco Office of the Mayor. Mayor London Breed Announces Soda Tax Funding Will Provide Emergency Food for People Affected by COVID-19. Secondary Mayor London Breed Announces Soda Tax Funding Will Provide Emergency Food for People Affected by COVID-19 2020. https://sfmayor.org/article/mayor-london-breed-announces-soda-tax-funding-will-provide-emergency-food-people-affected.
- 129. Royo-Bordonada MÁ, Fernández-Escobar C, Simón L, Sanz-Barbero B, Padilla J. Impact of an excise tax on the consumption of sugar-sweetened beverages in young people living in poorer neighbourhoods of Catalonia, Spain: a difference in differences study. BMC public health 2019;19(1):1-11
- 130. Puig-Codina L, Pinilla J, Puig-Junoy J. The impact of taxing sugar-sweetened beverages on cola purchasing in Catalonia: an approach to causal inference with time series cross-sectional data. The European Journal of Health Economics 2020:1-14
- 131. Castelló JV, Casasnovas GL. Impact of SSB taxes on sales. Economics & Human Biology 2020; 36:100821
- 132. Caro JC, Corvalán C, Reyes M, Silva A, Popkin B, Taillie LS. Chile's 2014 sugar-sweetened beverage tax and changes in prices and purchases of sugar-sweetened beverages: An observational study in an urban environment. PLoS medicine 2018;15(7):e1002597
- 133. Chriqui JF, Sansone CN, Powell LM. The sweetened beverage tax in Cook County, Illinois: lessons from a failed effort. American Journal of Public Health 2020;**110**(7):1009-16
- 134. Powell LM, Leider J. Evaluation of Changes in Beverage Prices and Volume Sold Following the Implementation and Repeal of a Sweetened Beverage Tax in Cook County, Illinois. JAMA Network Open 2020;3(12):e2031083-e83
- 135. Pedraza LS, Popkin BM, Batis C, et al. The caloric and sugar content of beverages purchased at different storetypes changed after the sugary drinks taxation in Mexico. International Journal of Behavioral Nutrition and Physical Activity 2019;**16**(1):1-11
- 136. Roberto CA, Lawman HG, LeVasseur MT, et al. Association of a Beverage Tax on Sugar-Sweetened and Artificially Sweetened Beverages With Changes in Beverage Prices and Sales at Chain Retailers in a Large Urban Setting. Jama 2019;**321**(18):1799-810 doi: 10.1001/jama.2019.4249[published Online First: Epub Date]|.
- 137. Bleich SN, Dunn CG, Soto MJ, et al. Association of a Sweetened Beverage Tax With Purchases of Beverages and High-Sugar Foods at Independent Stores in Philadelphia. JAMA Network Open 2021;**4**(6):e2113527-e27 doi: 10.1001/jamanetworkopen.2021.13527[published Online First: Epub Date]|.
- 138. Léger PT, Powell LM. The impact of the Oakland SSB tax on prices and volume sold: A study of intended and unintended consequences. Health Economics 2021
- 139. Alsukait R, Wilde P, Bleich SN, Singh G, Folta SC. Evaluating Saudi Arabia's 50% carbonated drink excise tax:
 Changes in prices and volume sales. Econ Hum Biol 2020; **38**:100868 doi:
 10.1016/j.ehb.2020.100868[published Online First: Epub Date] |.
- 140. City of Seattle. Sweetened Beverage Tax: Supporting healthy food and child health and development. Secondary Sweetened Beverage Tax: Supporting healthy food and child health and development 2019.

 https://www.seattle.gov/Documents/Departments/SweetenedBeverageTaxCommAdvisoryBoard/FactSheets/SweetenedBeverageTax FactSheet 2019.pdf.
- 141. Powell LM, Leider J. The impact of Seattle's Sweetened Beverage Tax on beverage prices and volume sold. Economics & Human Biology 2020;**37**:100856