Response to “Taxpayers shouldn’t feel bubbly about taxing sugary beverages” by Thomas Aiello

It should come as no surprise that this guest commentary was penned by a Washington D.C. lobbyist, not someone with expertise in public health who is watching the state legislature preemptively push back on local control in a reactive versus proactive manner.

I would like to address Mr. Aiello’s comments with regard to [HB2484](https://legiscan.com/AZ/text/HB2484/id/1700445), introduced by Rep. T.J. Shope.

The American Beverage Association (ABA) and their associates have spent millions upon millions of dollars lobbying against sugary beverage taxes across the nation. The power of money in our government, over the greater good of public health and retention of local control, can be clearly seen with bills such as HB2484. When citizen-led initiatives pass, big corporate interests file lawsuits to prevent the taxes from going into effect. The move to ban local control of policies, especially nutrition-related policy, is similar to the playbook utilized by the tobacco industry in years past.

The [poll](https://www.azcentral.com/story/news/politics/politicalinsider/2017/11/25/poll-arizonans-would-support-soda-tax-education/893549001/) Mr. Aiello mentions, was conducted in response to Arizona leaders [debating if and when to ask voters to expand Proposition 301,](https://www.azcentral.com/story/news/politics/arizona-education/2017/09/29/voter-proposal-would-eliminate-all-tax-breaks-give-teachers-30-percent-raise/717096001/)the state's existing tax that helps fund education.

“That 0.6-cent voter-approved sales tax expires in 2021 and without it schools will lose $600 million a year.”

While Mr. Aiello mentions a recent study by health economists stating “beverage taxes do little to lower overall obesity rates…” We can point to peer-reviewed studies that state: “Following Berkeley’s 2015 implementation of an additional city-level one cent per ounce soda tax (approximately 12 cents per can), consumption of sugar sweetened beverage (SSBs) decreased 21% in Berkeley and water consumption increased more in Berkeley (+63%) than in comparison cities (+19%). The conclusion of this study shows Berkeley’s excise tax reduced SSB consumption, and especially in low-income neighborhoods. ([Falbe 2016](http://ajph.aphapublications.org/doi/abs/10.2105/AJPH.2016.303362)). A similar excise tax, implemented in Mexico in 2014, also decreased SSB purchases and increased purchases of non-taxed, healthier alternatives; these effects were largest among low income households ([Cochero 2017](https://www.ncbi.nlm.nih.gov/pubmed/28228484)).” These are just two of numerous examples.

Soda taxes are popular among the general public (when not being spun by big corporate interests and lobbyists) as they have the ability to fund things such as education, nutrition initiatives and other programs to address prevention of chronic health issues – especially in children. In fact, a national cost-effectiveness study has suggested that a one cent per ounce sugar sweetened beverage tax could “save $23.6 billion in health care costs over a 10-year period, increase healthy life expectancy, and generate $12.5 billion in annual revenue ([Long 2015a](http://choicesproject.org/wp-content/uploads/2015/06/AMEPRE_49_1-Long.pdf)); city-level models suggest that a one cent per ounce municipal SSB tax is also cost-effective ([CHOICES](http://choicesproject.org/publications/brief-cost-effectiveness-of-a-sugar-sweetened-beverage-tax-seattle-wa/)).”

So contrary to Mr. Aiello’s opinion, the majority of peer-reviewed research suggest that sugar sweetened beverage taxes actually ***help*** “lower income families” in several ways. It’s also important to note the sweetened beverage industry utilizes predatory marketing practices, especially geared toward those “lower income families,” which creates a large [health equity problem](http://www.bmsg.org/resources/publications/health-equity-junk-food-marketing-talking-about-targeting-kids-color). The “thousands of hard-working Americans” ultimately pay for this, as health issues, including childhood diabetes and other chronic health conditions continue to climb.

We therefore urge everyone, including our State Legislators, to get the facts straight, speak to those in the science and public health sectors, and urge your elected officials to vote NO on HB2484. It’s very important to honor both the choice and voice of our communities (as can be indicated by the poll referenced by Mr. Aiello, as well as the number of those who have signed in to oppose HB 2484 in the RTS system) – especially our rural communities who are extremely underfunded. The health of Arizona and our future depend upon it. Don’t let the millions of dollars from big industry interests crush both local control and the hope for better health for all Arizonans.

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