

Warning Labels on Sugary Drinks

AHA Policy Position and Issue Messaging

Background

First introduced in California in 2014, sugary drink or sugar-sweetened beverage (SSB) warning label legislation is gaining momentum in several states across the United States. Additionally, early survey research published by Roberto and colleagues has shown that parents are significantly less likely to choose an SSB for their child when that beverage was accompanied with a label that warns them of health outcomes associated with sugary drink consumption.¹

The American Heart Association's Position

The American Heart Association supports clinical guidance, programming, education, media campaigns, and policies that help lower the intake of sugar-sweetened beverages (SSBs) by the American public. We welcome new and innovative public policy approaches that may help to curb sugar-sweetened beverage consumption. Warning labels on sugary drinks are one such intervention and this includes warning labels on advertisements and on restaurant menus. We view a sugary drink warning label approach as one strategy in the broad policy portfolio to combat diabetes, heart disease and other chronic illness, which includes taxes on sugar-sweetened beverages.

We believe the sugary drink warning label should be designed drawing from the existing evidence with regards to the graphic images and messages that has the potential for the greatest health benefit. As with all new and innovative policies, we advocate that the impact be robustly evaluated including consumer response and purchasing behavior, health impact on heart disease and diabetes, and monitoring the beverage industry response. It is also important to monitor for, and respond to, any unintended consequences such as driving consumers toward beverages that are not necessarily healthier, industry's use of the warning label as a shield against future legal or policy actions, and legal challenges that could significantly delay and increase the cost associated with implementing warning labels.

We believe the benefit of such innovative sugar-sweetened beverage policy proposals and the resulting public policy discussion is that the dialogue itself has the potential to raise public awareness about the negative health impact of sugary drink consumption. The AHA supports warning labels as part of a broad range of public policy approaches addressing the consumption of sugar-sweetened beverages and will continue to adjust the Association policy positions as additional evidence becomes available.

Legislative Landscape

The Sugar-Sweetened Beverage Safety Warning Act (SB 1000) was introduced in California in February 2014 with the intent of protecting consumers by promoting informed purchasing decisions about the harmful health effects of consuming of sugar-sweetened beverages. The Act prohibited the distribution, sale, or offering for sale of certain sugar-sweetened beverages in California that do not carry a safety

warning about the health effects of consuming sugar-sweetened beverages. The Bill was amended to SB 203 in February 2015. The Bill is no longer active.

The Sugar-Sweetened Beverages – Warning Labels Bill (CB 16-0617) was introduced in Baltimore in January 2016. Modelled after the legislation introduced in California, the Bill differs by requiring that warnings indicating health risks associated with sugary drink consumption be viewable on menus, at points of sale, or on the SSB containers themselves. The Bill received no objections from the Baltimore City Environmental Control board, as of January 2016.

Similar to the above legislation is The Sugar-Sweetened Beverages Safety Warning Act (SB 06435), which was introduced in New York State in January 2016. This Bill has received support from The American Academy of Pediatrics District II, New York State, American Diabetes Association, the American Heart Association, Bronx Health REACH, Center for Science in the Public Interest, Make the Road NY, and Rockaway Waterfront Alliance. As of February 2016, The New York Assembly's Consumer Affairs and Protection Committee has approved this Bill.

In Washington, House Bill 2798 aims to put the California warning label on sugary drinks. In Hawaii, Senate Bill 1270 and House Bill 1438 also aim to put the California warning label on SSBs.

The above legislation:

- Requires sweetened, non-alcoholic beverages, carbonated or noncarbonated, with 75 calories or more per 12 fluid ounces to carry the safety warning. One hundred percent juice, milk-based beverages, 'dietary aids,' oral electrolyte solutions to prevent dehydration in children, infant formula, and nutrition used as a result of medical conditions would be excluded.
- Requires the safety warning on the exterior of any vending machine that includes a sugar-sweetened beverage, on the exterior of any self-serving sugar-sweetened beverage dispensing machine, and at the point of purchase where an employee fills an unsealed beverage container for a sugar-sweetened beverage.
- Requires the safety warning to be legible on the front of the beverage container in bold type, separate and apart from all other information, on contrasting background, and sets minimum font size and maximum number of characters per inch. Additionally, the Act grants the health department the authority to change the language of the safety warning based on available scientific information, and subjects a person violating the Act to a civil penalty of not less than \$50 and no greater than \$500. A copy of the legislation is attached.

The American Heart Association has developed a definition for sugar-sweetened beverages that it developed for SSB tax legislation that could also be used for warning label initiatives (see Appendix A)

AHA Messaging

Our Message:

Acknowledge and applaud states and localities for moving to reduce consumption of sugar-sweetened beverages: The American Heart Association supports clinical guidance, programming, education, media campaigns, and policies that help lower intake of sugary drinks and the portion sizes of foods and beverages in general. The effort to reduce consumption of sugary drinks is a partial, extremely important component of a comprehensive approach to address diabetes, heart disease, obesity and tooth decay. Because this policy approach is one of a number of new and innovative policy approaches, and has not yet been evaluated, we expect that the first states and municipalities that pass these laws will implement robust and objective evaluation of the impact of warning labels should they pass. Assessing the impact on consumer behavior, industry practice, and health outcomes like weight loss, dental caries, and the prevalence of diabetes will help inform the nation of effective policy strategies to improve health outcomes.

There is no doubt that consumption of sugary drinks contributes to chronic disease and tooth decay and it is important for policymakers and the public health community to work together to identify, test and implement effective evidence-based strategies to help decrease consumption. As part of the American Heart Association's goal of improving the cardiovascular health of all Americans, we recommend limiting SSB consumption to less than 450 kcal (36 oz.) per week by 2020. The SSB metric is one way in which we will gauge the improvement in diet quality. Lowering consumption of sugary drinks will help manage weight, lower the incidence of diabetes, and prevent displacement of more nutrient-dense foods in the diet. Studies suggest that a 10% price increase in sugary drinks would decrease their consumption by 8-10%.²

If the SSB warning label legislation passes in any state or locality, we support a robust third-party evaluation so the rest of the nation can learn about what is effective. It is critical to determine how effectively the warning labels change consumer behavior, industry practice, and health outcomes such as weight loss, dental caries, and the prevalence of diabetes. Only a thorough evaluation will help inform the nation of effective policy strategies to improve health outcomes.

The intended effect of this legislation is to decrease the amount of calories consumed from sugary drinks. If effective, this would be a model for other state policy initiatives. There is no doubt that consumption of sugary drinks has a significant negative impact on cardiovascular health and it is important for policymakers and the public health community to work together. We need to identify, test and implement effective evidence-based strategies to help reduce sugary drink consumption and improve population health.

Appendix A-

Sugar-Sweetened Beverage Definition for Taxation

Previous Definition	New Definition
<p>“Sugar-sweetened beverage” is defined as any nonalcoholic beverage, whether carbonated or noncarbonated, sold for human consumption, that contains 5 grams or more of added sugar or other caloric sweeteners per 12 ounces</p>	<p>Sugar-sweetened beverage is defined as any nonalcoholic beverage, whether carbonated or noncarbonated, sold for human consumption that contains any added caloric sweetener.</p>
<p>SSBs do NOT include:</p>	<p>SSBs do NOT include:</p>
<p>Flavored milks <130 kcal/8oz.</p>	<p>Beverages in which milk is the primary ingredient or the first listed ingredient on the label of the beverage, or soy, rice or similar milk substitute. For purposes of this Act, “milk” means natural liquid milk regardless of animal or plant source or butterfat content; natural milk concentrate, whether or not reconstituted; or dehydrated natural milk, whether or not reconstituted.</p>
<p>100% juice or 100% juice + water including those made from frozen, freeze-dried, or concentrate</p>	<p>100% juice or 100% juice + water including those made from frozen, freeze-dried, or concentrate with no added caloric sweeteners</p>
<p>Coffee and tea</p>	<p>Coffee and tea without added caloric sweetener*</p>
<p>Water without any caloric sweeteners</p>	<p>Water without any caloric sweeteners</p>
<p><5 grams of added sugar or other caloric sweeteners per 12 ounces</p>	<p>Beverages with <5 grams of added sugar or other caloric sweeteners per 12 ounces</p>
	<p>Infant formula</p>
	<p>Medically necessary foods and beverages</p>

*Since this definition is addressing excise taxes, we’re addressing those coffees and teas that are packaged for sale. Those individually sold in coffee shops, convenience stores, etc. would be captured under a sales tax in most states and would not be included.

References:

1. Roberto CA, Wong D, Musicus A and Hammond D. The Influence of Sugar-Sweetened Beverage Health Warning Labels on Parents' Choices. *Pediatrics*. 2016.
2. Powell LM, Chriqui JF, Khan T, Wada R and Chaloupka FJ. Assessing the potential effectiveness of food and beverage taxes and subsidies for improving public health: a systematic review of prices, demand and body weight outcomes. *Obesity reviews : an official journal of the International Association for the Study of Obesity*. 2013;14:110-28.