

From: [Lynn Silver](#)
To: [commissionstreamlining](#)
Subject: Don't "Streamline" away" the Sugary Drinks Distributor Tax Advisory Committee (SDDTAC)
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Dear Commissioners,

On behalf of the Prevention Policy Group, a program of the Public Health Institute, a 501c3 that has served California for over 60 years, I write to express my deep concern and opposition to any proposal to eliminate or fuse the Sugary Drinks Distributor Tax Advisory Committee (SDDTAC).

As a pediatrician and public health professional, I worked on the design of several of the Bay Area taxes, and advocated for their passage. This was based on observing years of failure in containing the growing epidemic of child obesity and its serious health consequences. After passage, with the support of the NIH and other funders, I had the honor of leading two of the first peer-reviewed scientific evaluations of the Berkeley and San Francisco soda taxes (see references below). Today, as a member of their Board, I also work with the Center for Science in the Public Interest, and also with the Global Health Advocacy Incubator, which work in the US and globally to disseminate the adoption of sugar sweetened beverage taxes.

Our Bay Area SSB taxes have been a model in the US and globally. How the revenue is used is an integral part of their effectiveness. One of the most important aspects of that model has been the commitment to assuring that the resources are used entirely to address nutrition or other community health issues and to advance health equity. This has faced counter-pressures to divert funding in several cities since 2016. In 2016, because we did not know if the beverage industry's massive attacks would keep use from achieving a 2/3rds vote, we did not seek a special tax. We achieved that goal instead through the creation of advisory bodies which have assured that the taxes remain dedicated to these purposes and that their use is evaluated. Elimination of the body that has successfully assured community engagement and oversight of use of the resources since 2016 would defeat this purpose and allow funds to be diverted from their intended use. The problems of food insecurity, unhealthy diet, and obesity have not gone away, they are still driven by other problematic characteristics of our food marketplace, although a growing body of data suggests that SSB taxes are making a positive contribution to both reducing SSB consumption and child obesity (See too the Seattle study below that showed reductions in child obesity after the tax compared to control locations, in a city which also captured the revenue for specified community interventions) . The revenue from this tax is still urgently needed to address these issues.

Furthermore, it would make it more difficult to spread San Francisco's successful model to other cities and states by betraying the commitment to assuring that revenue is used towards a more healthful and equitable food supply and diet.

Today, public health and community-based prevention are under attack from the Trump administration. Funding for food security is being reduced. The nation's largest nutrition education program - the nutrition education and obesity prevention program (formally known as SNAP Ed) was just abolished. Funding for other community-based prevention is being curtailed. SSB taxes where they exist remain one of the few sustained funding sources for this work.

The SDDTAC was established by the will of the voters and its formation reflects a strong public mandate to ensure that soda tax revenues are used transparently and equitably to improve public health. The SDDTAC's participatory process ensures that those most impacted by sugary drink consumption and diet related disease are heard and benefit from the tax. SDDTAC provides the concrete mechanism to maintain that commitment, dedicating hundreds of hours to reviewing the data, listening to community members, sifting through proposals, and providing informed decision-making.

Streamlining should not be used to break what's working well. Please continue to support SDDTAC's work which provides a model of successful innovation to the nation.

Sincerely,

Lynn Silver, MD, MPH, FAAP

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