San Francisco Sugary Drinks Distributor Tax (SDDT)

Since 2018, the soda tax has generated nearly \$70 million for priority populations and places that are most targeted by the sugary drinks industry.

What is a sugary drink?

Any non-alcoholic drink with added sugar or sweeteners and more than 25 calories per 12 ounces.

What is the SDDT, aka the Soda Tax?

In November 2016, voters approved a law that charges 1 cent per ounce on distributors of sugary drinks, syrup, or powder in San Francisco to provide funding for priority populations and places targeted by the sugary drinks industry. The voters also approved of the creation of an advisory committee to make recommendations on how the tax revenue should be spent and to monitor the impact of the tax on public health, sugary drink consumption, and sales.

Where does the tax go?

The tax revenue goes into the General Fund. However, San Francisco voters intended for the money to be used to support communities most affected by the beverage industry and entrusted that role to the Sugary Drinks Distributor Tax Advisory Committee (SDDTAC).

Who sits on the SDDT Advisory Committee (SDDTAC)?

The SDDTAC has 16 voting members from the community, city agencies, and medical/research institutions. They are experts with a shared interest in reducing sugary drink consumption and addressing chronic diseases in San Francisco.

What does the SDDTAC do?

The SDDTAC makes funding recommendations on the effectiveness of the tax. Using a data-driven and community-informed public process, the committee submits an annual report to the Mayor and Board of Supervisors that evaluates the impact of the tax on public health, consumption behavior, and sales/beverage prices.

SDDTAC Values

The Committee is focused on addressing health inequities and disparities because low-income communities, communities of color, and others have historically suffered disproportionately. Their recommendations are guided by these key values:

- Supporting community-led and culturally relevant work.
- Building strong collaborations and partnerships to increase capacity and effectiveness.
- Equity (including health and racial equity).
- Prioritizing results and long-term impacts.

SDDT Priority Populations

- Low-income San Franciscans
- Children, youth, and young adults 0-24 years old
- Asian, Black/African American, Latinx, Native American/Indigenous and Pacific Islander communities





Ultimate Impact



Florence Fang Community Farm



Kain Na

Soda Tax Impact by the Numbers. In Fiscal Year 23-24...

Approximately 90,000 participants engaged in SDDT-funded programs, of which, over 81,000 were among San Francisco residents.



9 out of 10 SDDT-funded program participants **believed that sugary drinks can harm their health. 85% of participants drink water more often** since participating in an SDDT-funded program.



85% of food insecure participants agreed they worried less about having enough food after participation in an SDDT program.

92% of food insecure participants have increased their fruit and vegetable consumption since participating in an SDDT program.



6 SDDT-funded programs incorporated fitness and movement classes, sports, or active transportation **2,172 SFUSD students** received physical activity programming through 2 newly-funded organizations (Project Commotion and Ultimate Impact).



1, 621 student received oral health screenings1,152 students received one or more dental sealants151 students were referred to urgent oral health care



327 people were paid with SDDT funds as staff or stipended-positions

- 90% of those paid are BIPOC
 - 89 are bilingual and/or bicultural
 - 87 community members were trained as community health workers

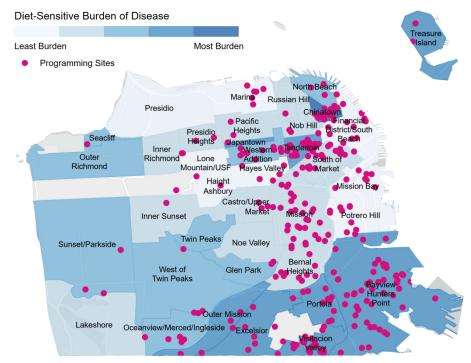


90% of Peace Parks participants **reported feeling a greater sense of safety in their community** since participating in the program

75% of participants **reported that the program fostered a greater sense of trust of police officers** in their community

Soda Tax in Action

SDDT revenue invests in priority populations and places most targeted by the beverage industry.





- Location of SDDT-funded entities and where programming occurred,
- Sites where SDDT-funded benefits were distributed and used to purchase produce, or
- Location of SDDT-funded facilities improvements (e.g. hydration stations, kitchen upgrades).



18 Reasons



Chinatown Task Force on Children's Oral Health



SF Recreation and Parks Requity Program



SFUSD students show off water bottles and hydration station at MLK Middle School



All My Usos and Fa'atasi Youth Services Community Health Worker Cohort