

POSITION STATEMENT: SUGAR SWEETENED BEVERAGES

KEY MESSAGES

- Frequent consumption of sugar-sweetened beverages is associated with several non-communicable diseases including obesity, type 2 diabetes and poor dental health.
- Teenagers are typically the largest consumers in the UK and across the globe.
- A levy on sugar-sweetened beverages has been linked to decreased consumption in countries such as Mexico and the U.S, California.

Definitions:

Sugar-Sweetened Beverages (SSBs): Non-alcoholic, water-based beverages with added sugar, including carbonated, dilutes, fruit juices, sports and energy drinks [1].

Free Sugars: Sugars added to foods (i.e. table sugar), glucose or those naturally present in honey, syrups and unsweetened fruit juices but excluding whole fruits and lactose (milk sugars) found in milk products [2].

Sugar-Sweetened Beverage Consumption in the UK

The UK SSB industry is worth £15.7bn and the UK population consumes almost 15bn litres every year [1]. The sugar content of soft drinks varies significantly between brands, yet research shows the majority contain excessively high quantities of free sugars [3].

Recommended intake of free sugars in the UK is 30g for those aged 11 years and older, 24g for 7-10 year olds and for 4-6 year olds 19g per day [4]. However, 11-18 year olds are consuming over three times the recommended amount. It is no coincidence that this age group are also the largest consumers of SSBs in the UK, drinking on average 216ml per day [5].

The World Obesity Federation has suggested excessive consumption of SSBs may be a contributing factor to the childhood obesity crisis seen across the globe [6].

Sugar-Sweetened Beverages and Health: What does the evidence say?

- SSBs are often consumed quickly and do not provide the same feeling of fullness compared to solid food. As a result, consumers do not reduce food consumption elsewhere to compensate for the calories provided by SSBs [6].
- Further evidence suggests links to overweight and obesity and BMI status in children and adults. One can of SSBs per day could lead to over 6kg of weight gain every year [7, 8].
- Limiting consumption of SSBs has been found to significantly reduce weight gain in children and adults [6].
- Significant evidence linking consumption of SSBs to the development and incidence of type 2 diabetes [9, 10].
- Links to cardiovascular disease and dyslipidaemia (unhealthy levels of fat in the blood) among teenagers, regardless of body size [11]
- Dental caries are more frequent in children and teenagers with high SSB consumption, when compared to children with low consumption [12, 13].
- The World Health Organisation recommends limiting SSB consumption to prevent the occurrence of dental erosion [14].
- Associated with behavioural issues with young children, such as aggression and attention, compared to those who do not consume SSBs [15].

The Soft Drinks Industry Levy (SDIL) was introduced in the UK on 6th April 2018, in a bid to reduce sugar consumption as a core component of the Childhood Obesity Plan [15]. The levy will operate at 18p/litre for SSBs with +5g/100ml; and a higher tier of 24p/litre for SSBs with +8g/100ml [16].

The Government insists the levy is a tax on industry rather than consumers, aiming to encourage companies to reformulate SSBs below the tiers. We have already seen many SSB companies reformulate products, including Tesco own-brand and Lucozade. However, Coca-Cola and Pepsi refused to change their recipes and have increased the prices of their products instead.

Sugar Taxes: what does the evidence say?

- **Berkeley, California 1% Excise Tax:** After one year, an average 21% reduction in overall SSB consumption. Greatest reduction seen in energy/sports drinks category (36%). Consumption of tap and bottled increased by over two thirds [17].
- **Mexico's 1peso/litre Tax:** After one year, a drop of 5.5% in sales and second year 9.7% decline, averaging a 7.6% decline in SSB sales. Largest decline in lower socioeconomic households. Increased sales of bottled water by 5.2% [18].
- A modelling study undertaken on behalf of Food Active found that a SDIL could lead to a reduction in non-communicable diseases, including 2,400 cases of type 2 diabetes and a reduction in calorie intake across England. Also used by the Children's Food Campaign to give Local Authority level data across London [19].

Advocacy: Along with other advocacy groups in the UK, Food Active played an important role in raising awareness and gaining support for the SDIL. We created the campaign Give Up Loving Pop (GULP) to raise awareness of the health harms of drinking sugary drinks in children. Some of the campaign resources we developed include Key Stage 2 and 3 PSHE lessons on SSBs, including the marketing of SSBs and a SDIL tax. The campaign has now been delivered by over 10 local authorities across England and our evaluation shows that GULP promotes attitudinal and behaviour change. Going forward, we will continue to develop GULP further into more targeted settings. We are developing a GULP early years campaign and starting pilot work on a black, minority and ethnic group targeted GULP campaign, given the higher incidence of type 2 diabetes in this population group.

Policy Change: We will continue to tackle the promotion of SSBs to children. In January 2017, we published an editorial in the British Medical Journal in January 2017 detailing the acts undertaken by Food Active to stop the Coca-Cola 'Happy Holidays' Christmas Truck Tour visiting on public health grounds and response from local media [22]. We have co-ordinated both regional and national open letters to Coca-Cola over the past two years, with signatures from parents, health professionals and academics opposing a visit from the truck. We will work with local authorities in the run up to the festive period to develop a strategic approach in preventing the truck from handing out high sugar drinks to local populations.

RECOMMENDATIONS

- Ensure an evaluation of the SDIL is carried out to measure impact in terms of health outcomes and changes in consumer choices.
- Maintain pressure policymakers to ensure industry are complying to the policy post implementation.
- Look to expand the levy to high sugar drinks currently exempt, i.e. coffee products and other high sugar products, such as confectionary and cakes.

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