

Healthy Beverage Toolkit



Contents

Introduction	3
Background on Obesity, Chronic Disease, and Sugar-Sweetened Beverages ...	5
The Obesity Epidemic in the United States.....	6
Causes of the Obesity Epidemic in the US.....	10
Defining Sugar-Sweetened Beverages	12
Sugar-Sweetened Beverages Are Unique Contributors to Obesity and Diabetes.....	14
Reducing Obesity Rates Requires a Comprehensive Approach.....	16
Reducing Sugar-Sweetened Beverage Consumption in Your Organization	18
Healthy Beverage Policy Approaches	19
Steps to Implementation.....	23
Communicating Your Efforts	27
Precedent for Action	34
Policy Change Stories from the Field	35
Organizations and Cities That Have Taken Similar Steps	39
Frequently Asked Questions	40
Appendix	45
Appendix A: Sample Guidelines for Healthy Beverages	46
Appendix B: Sample Policy for Beverage Machine Vendors	48
Appendix C: Point-of-Purchase Traffic Light Poster and Brochure	51
Appendix D: Beverage Industry Social Responsibility and Promotion.....	54
Appendix E: Beverage Industry Marketing	55
Appendix F: Health Care Healthy Beverage Sample Policy	56
Appendix G: Tool for the Assessment of Beverage Access in City Agencies.....	57

For additional information, resources, and updates to this toolkit, please visit:

<http://www.bphc.org/healthybeverages>



Introduction

The Boston Public Health Commission's **Healthy Beverage Toolkit** is intended to help municipal agencies, healthcare institutions, colleges and universities, community-based organizations, retail establishments and other organizations implement policies and practices that encourage healthy lifestyles for their employees, clients, students and visitors. Mayor Menino affirmed his commitment to creating a healthier city when he signed an executive order on April 7, 2011, prohibiting the sale of sugar-sweetened beverages on city property. The goal of such policies and practices is to create an environment that supports healthy choices and reduces the risk of obesity and related chronic diseases by:

- communicating a clear and consistent message to employees, customers, and visitors that the institution supports healthy lifestyle choices;
- expanding healthy beverage options, creating an environment where healthy choices are easy to make and thereby providing an opportunity for employees, customers, and visitors to make healthy beverage choices;
- joining with the City of Boston and other institutions throughout Boston to raise the profile of healthy beverage choices as a means of supporting a healthy environment and addressing the obesity epidemic.

This toolkit includes best practices for promoting healthy beverage choices based on current science, public health research, and national recommendations and standards. It can be used in a variety of settings, and most materials included in the toolkit can be adapted to suit any institution. With this toolkit, we hope to build a movement among Boston's institutions to improve the beverage options for all residents of and visitors to the city of Boston.



Background on Obesity, Chronic Disease, and Sugar-Sweetened Beverages



The Obesity Epidemic in the United States

Poor diet and physical inactivity, with their health consequences of overweight and obesity,* heart disease, cancer, diabetes, and other chronic conditions,¹ are second only to tobacco as the leading actual causes of death in the US.² As the underlying cause of almost 17% of deaths in 2000, this constellation of health behaviors and disease may soon overtake tobacco as the leading actual cause of death. Moreover, by some estimates, the current generation of youth may have shorter life spans than their parents due to the devastating effects of this epidemic.³

National Obesity Trends

Obesity and its related disease and death are considered by many experts and public health officials to be the number one health problem facing our state and our communities. Between 1980 and 2008, obesity prevalence among US adults doubled^{4,5} and now nearly one out of every three adults is obese.⁶ More than one in six US children is obese, three times the rate of obesity in the 1970's.⁷



* For adults, "overweight" is defined as a body mass index (BMI) between 25-29.9. "Obese" is defined as BMI ≥ 30 . For children, BMI is calculated on percentile-for-age using standardized tables of height and weight. BMI ≥ 85 th percentile is considered overweight and BMI ≥ 95 th percentile is considered obese.

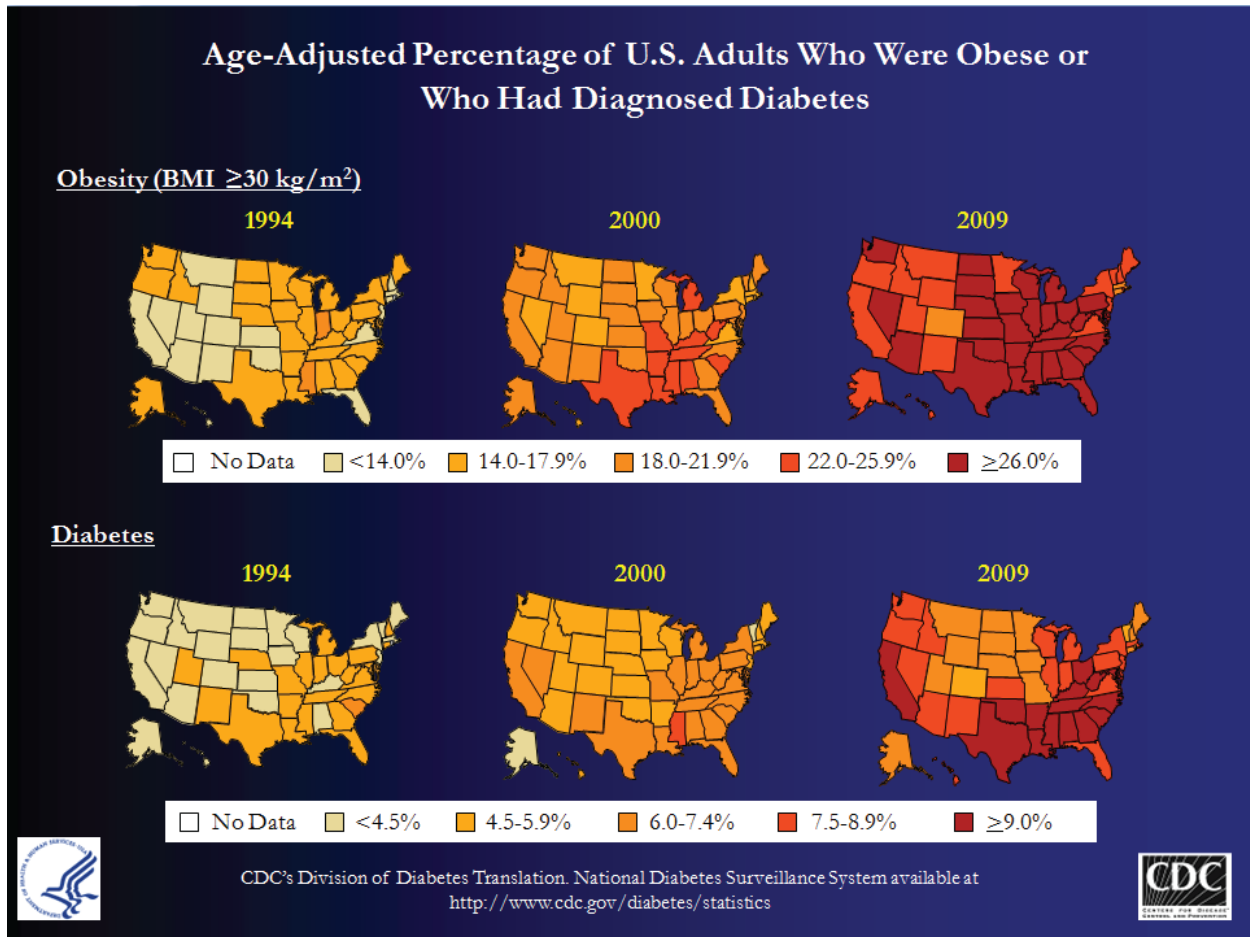


Figure 1. Age-adjusted rates of adult obesity and diabetes demonstrate how prevalence has increased rapidly in the past two decades.

Boston Obesity Trends

Boston has experienced obesity rates that mirror the nationwide trends. According to the most recent data, 54% of adult Boston residents are overweight or obese (31% and 23%, respectively), with Black residents experiencing nearly double the obesity rates of White residents.⁸ This disparity also mirrors national trends, in which rates of obesity are higher for Black and Latino residents than for White residents. On average, 40% of Boston Public School students in grades 1-10 are overweight or obese.⁹

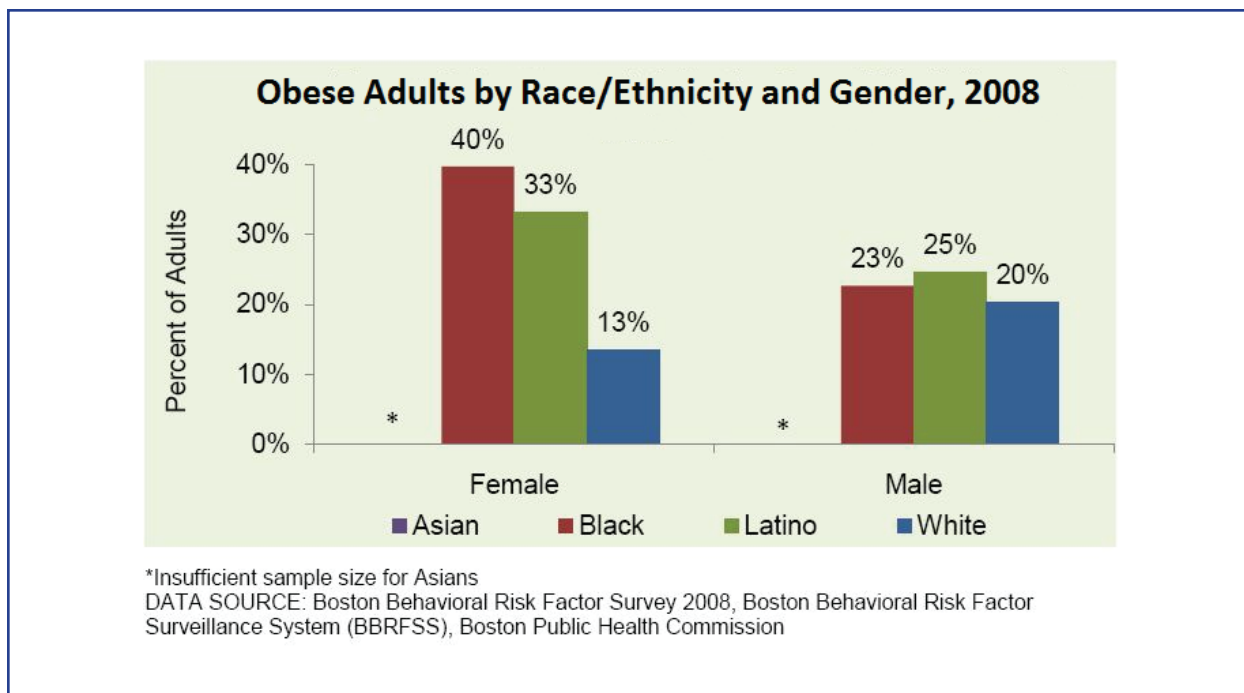


Figure 2. Boston obesity rates, while slightly lower than national averages, are high. This figure shows how obesity rates are especially unequal among women of different races.

The Health, Social, and Economic Consequences of Obesity

Obesity has serious health, social and economic consequences. Public health experts view it as the most serious public health problem of our time. Being overweight or obese puts adults at risk for early death and more than thirty diseases, including heart disease, stroke, certain cancers, arthritis, and type 2 diabetes.¹⁰ The health consequences of these increases in obesity are numerous and well-documented, and obese individuals have a 50% to 100% higher risk of premature death from all causes, when compared with individuals of healthy weight.¹¹ Rising rates of type 2 diabetes, the social stigma suffered by overweight and obese adults and children, and increased healthcare costs are of particular concern.

Type 2 Diabetes

Rising rates of type 2 diabetes,[†] a disease where the body cannot properly regulate blood sugar, is especially connected to the obesity epidemic. Type 2 diabetes can be extremely dangerous if undetected or poorly controlled, and it can lead to blindness, sleep apnea, kidney failure, lower limb amputation, heart attack, stroke, and impotence. In 2008, 13% of obese Boston adults reported having diabetes compared with just 2% of healthy or underweight adults. Like many diseases, diabetes especially affects people of color. Most disturbingly, the 2008 diabetes-related death rate for Black residents was nearly three times the rate for White residents, while the rate for Latino residents was more than twice the rate for White residents.¹²

[†]Type 1 diabetes is characterized as an immune-related disease and accounts for only 5-10% of diabetes cases in the United States. Type 1 diabetes is sometimes called juvenile diabetes. Type 2 diabetes is far more common, accounting for 90-95% of diabetes cases. Type 2 diabetes, sometimes called adult onset diabetes, can often be managed by increasing physical activity and through dietary modification.

Obese pregnant women are more likely to have unhealthy infants and overweight children, and it is more likely that the children of obese women will be obese as adults. Pregnant women who are obese are also more likely to develop diabetes during pregnancy (called “gestational diabetes”). Uncontrolled diabetes in pregnant women can also result in a higher risk of babies being born with abnormalities.¹³

Economic Impact of Obesity

In addition to health consequences affecting individuals and families, obesity is also costly to society, adding up to billions of dollars each year in additional health care and disability insurance costs, as well as indirect costs associated with chronic absenteeism from work.¹⁴ Along with health insurance costs, obesity burdens employers with an additional \$13 billion each year in paid sick leave, disability and life insurance costs, and extra health insurance claims.¹⁵ The annual medical cost of obesity has doubled in less than a decade, and now represents nearly 10% of all annual medical spending.¹⁶ The annual cost to society for diabetes care alone is \$218 billion, in 2007 dollars.¹⁷ As obesity rates continue to rise, so will the costs associated with caring for a population that is increasingly burdened with obesity-related chronic diseases. Economists estimate that annual health care costs for an obese person are 42% higher than for a person of healthy weight.¹⁸ Employers will share the burden of these costs, and should consider the financial impact of creating a healthier work environment. The Centers for Disease Control and Prevention has an Obesity Cost Calculator (<http://www.cdc.gov/leanworks/costcalculator/disclaimer.html>) that can be used to approximate the added costs resulting from obesity and overweight among employees. These extra health care dollars add up: the Surgeon General estimates that health problems related to obesity cause about 300,000 deaths and \$147 billion in medical expenditures and lost productivity annually and account for 9% of all health care costs.¹⁹

Social Stigma

The increasing rates of obesity in children and adults put more individuals at risk of weight bias and resultant physical and mental problems that affect academic and social success. In children, obesity contributes to increased risk of bullying and loneliness.²⁰ The psychological consequences of weight bias can be severe, and negative outcomes include depression, anxiety, low self-esteem, poor body image, and suicidal acts and thoughts.²¹ Weight bias can contribute to discrimination in employment, education, and health care.²² This affects millions of individuals, with 12% of adults in the US reporting weight discrimination between 2004 and 2006.²³



Causes of the Obesity Epidemic in the US

Changes in society over the past three decades have made it harder for individuals to maintain a healthy weight, contributing to the rapid rise of obesity and overweight. Some reasons for this growing problem include the following:

- Unhealthy processed/packaged foods are generally cheaper to buy than fresh fruits, vegetables and whole grains. This is partially due to federal agriculture policies that make it cheaper for farmers to grow crops which make their way into unhealthy processed and junk foods.

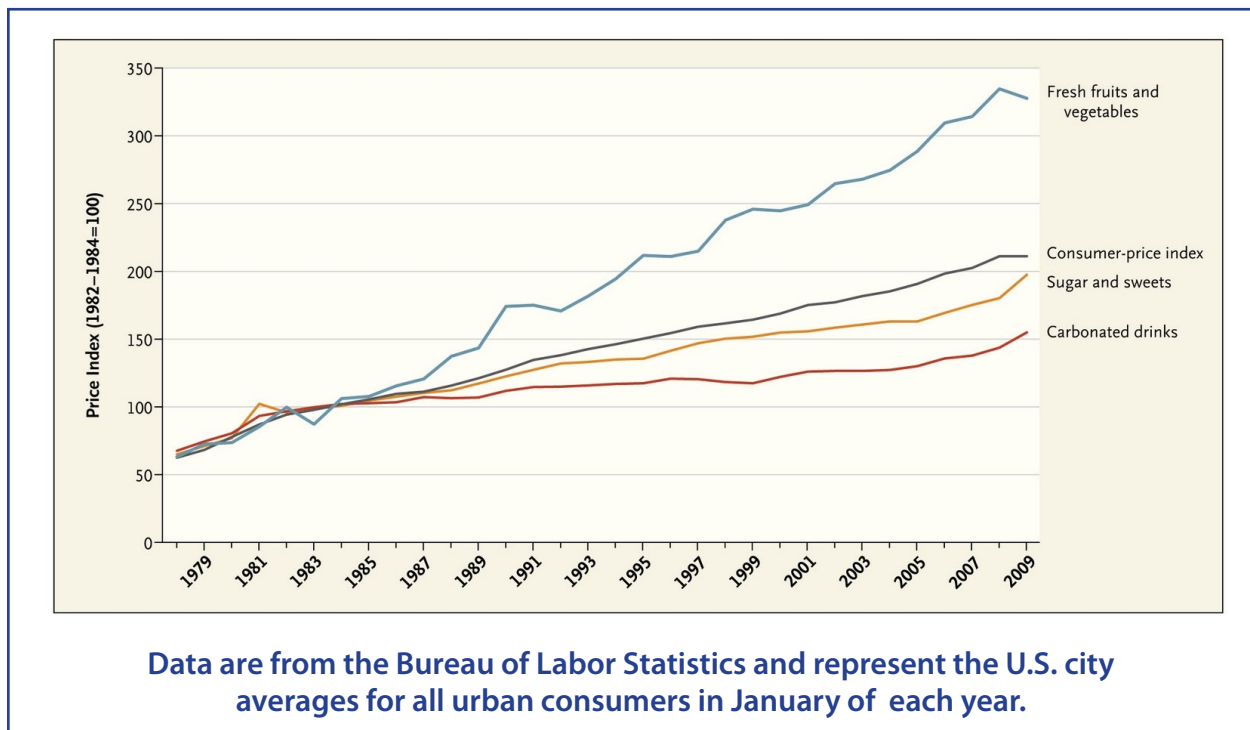


Figure 3. The cost of fruits and vegetables has increased at nearly twice the rate as the rate of inflation over the past 3 decades. Sugary foods and beverages have become relatively less expensive.
Source: Brownell KD, Frieden TR. *Ounces of prevention--the public policy case for taxes on sugared beverages.*³¹

- Increased consumption of sugar-sweetened beverages, as well as increase in beverage portion sizes, lead to a greater percentage of calories consumed each day in beverages.
- Pressures on working families result in less time or money available for preparing healthy foods or engaging in physical activity. Research shows that parents who are not active are more likely to have children who are overweight or obese.
- Larger portion sizes of food and beverages are eaten at home and sold in stores and restaurants, and nearly 50% of food is consumed away from home at a restaurant or store.

- Children and adults spend more time passively sitting with television sets, computers, and video games. 65% of children aged 4 to 11 spend more than 2 hours a day in front of a television or computer screen, while 26% of 8 to 16 year olds spent more than 4 hours a day in front of screens.²⁴
- High corporate advertising expenditures promote high fat and high sugar foods and beverages, including to children.
- Increased reliance on cars and longstanding transportation policies focus on moving traffic faster as opposed to encouraging safe walking and biking.
- Financial and educational pressures on schools results in:
 - eliminating physical education classes and opportunities for physical activity
 - scrambling to raise money by selling unhealthy foods in vending machines and through bake sales
 - charging high fees for sports teams, which have become unaffordable to many students
 - failure to provide healthy cafeteria meals because of inadequate federal funding to purchase and prepare healthier breakfast and lunch options.



Defining Sugar-Sweetened Beverages

Definition

Sugar-sweetened beverages contain caloric sweeteners and include soft drinks (“soda” or “pop”), juice drinks, sports drinks, tea and coffee drinks, energy drinks, sweetened milk or milk alternatives, and any other beverages to which sugar has been added.²⁵ Sugar-sweetened beverages may also be referred to as sugary drinks or sugar-loaded drinks.

Examples of Sugar-Sweetened Beverages

Soft Drinks: Coke, Pepsi, Mountain Dew, Dr. Pepper

Fruit Drinks[†]: Sunny D, Hawaiian Punch, Capri Sun

Sports Drinks: Gatorade, Powerade

Tea and Coffee Drinks: Arizona Iced Tea, Snapple Iced Tea, Starbucks Bottled Frappuccino

Energy Drinks: Red Bull, Monster, Rock Star

Sweetened Milk: Nesquik Chocolate Milk, Silk Vanilla Soy Milk

***Note:** This is not an exhaustive list. Furthermore, many of these drinks are now available in diet and low-calorie varieties, which are sweetened with non-caloric sweeteners.

[†]Drinks labeled as 100% fruit juice are not considered sugar-sweetened beverages.

Figure 4. Examples of sugar-sweetened beverages. The examples listed are some of the most common drinks with added caloric sweeteners.

Deciding Which Sugar-Sweetened Beverages Should Be Addressed

Institutions will have to decide which beverages should be addressed through new policy. Some beverages, such as milk, fruit juice, and diet drinks, fall into a “gray” area because their contribution to health and weight gain is more complex. Below are some guidelines that can help your institution draw the line between which beverages should be addressed.

1% or Skim Milk: Although milk contains a substantial amount of sugar, it is not considered a sugar-sweetened beverage because this sugar is naturally occurring, rather than being added during production to increase sweetness. Many dietitians recommend consuming low-fat or non-fat milk in small portions (8oz).

Flavored Milk: Low-fat chocolate milk and other flavored milk contain added sugars to flavor the milk in addition to the naturally occurring sugars. Some argue that this additional sugar makes flavored milk unhealthy. Others argue that the intake of nutrients, such as potassium, vitamin D, and calcium from low-fat milk outweighs these concerns.

100% Fruit Juice: As with milk, 100% fruit juice contains large amounts of naturally occurring sugar, which translates into a large amount of calories. However, 100% fruit juice does provide important nutrients, so many dietitians recommend consuming 100% fruit juice in small portions (4oz for children, 6oz for adults).

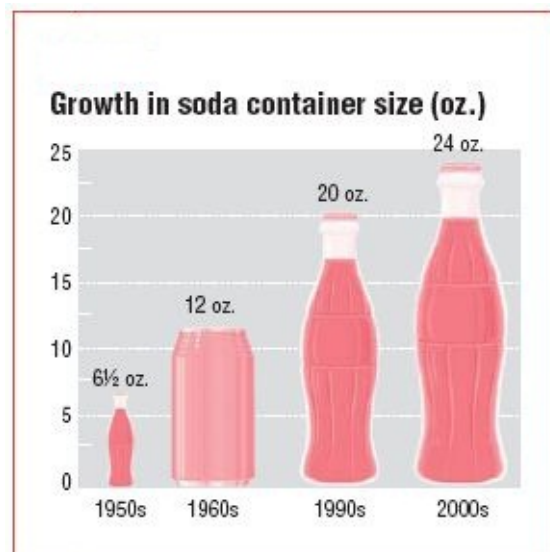
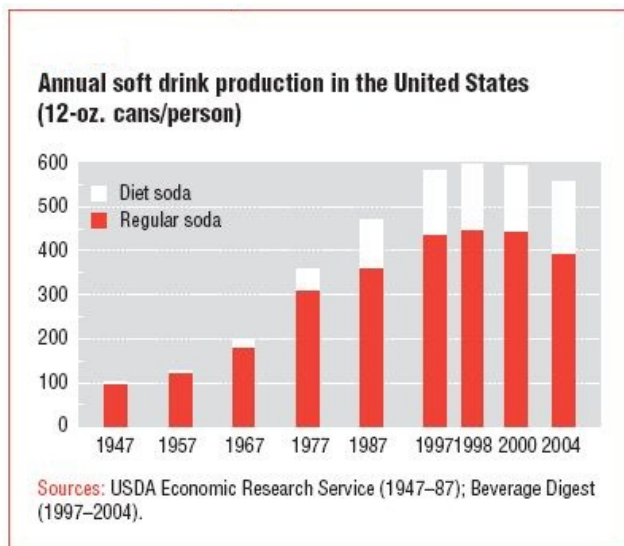
Diet Soda: While diet soda contains no calories, studies have shown that its high level of sweetness from artificial sweetness can increase consumer preference for sugary foods and drinks.²⁶ Diet soda can be a useful transition step away from sugar-sweetened beverages, but consumption is not encouraged over the long term.



Sugar-Sweetened Beverages Are Unique Contributors to Obesity and Diabetes

Although many factors influence the rapidly increasing rates of obesity, research indicates that sugar-sweetened beverages play a significant role in driving current obesity trends. Some argue that individual food items should not be targeted in order to address obesity because any treat can be consumed in moderation. However, sugar-sweetened beverages are no longer being consumed as a treat, but rather as a regular and large contributor of daily calories. Sugar-sweetened beverages now account for approximately 10% of total calories consumed in the US diet.²⁷ Today, 63% of adults²⁸ and 80% of youth consume a sugar-sweetened beverage on an average day.²⁹ The per-capita average consumption each year of carbonated soft drinks alone is estimated at 736 eight-ounce servings among Americans,³⁰ or about 46 gallons a year per person. This figure does not include other sugar-sweetened beverages.

Americans consume about 250–300 more daily calories today than several decades ago, and nearly half of this increase can be explained by greater consumption of sugar-sweetened beverages.³¹ Most sugar-sweetened beverages, including soda, offer “empty” calories, meaning they have no nutritional value, and do nothing to support health. Furthermore, in order to burn off the 150 calories found in a 12-oz soda, an adult must walk briskly for 30 minutes. Because so few people engage in this amount of exercise, consuming sugar-sweetened beverages makes it even harder to balance a healthy amount of calories.



Figures 5 & 6. Soft drink production and container size has increased drastically over the past 60 years.
Source: Center for Science in the Public Interest. *Liquid Candy: How Soft Drinks Are Harming Americans' Health.*^{32,33}

Numerous studies indicate that higher consumption of sugar-sweetened beverages leads not only to an increase in an individual's risk of gaining weight³⁴ but also of developing type 2 diabetes,³⁵ heart disease,³⁶ and metabolic syndrome.³⁷ One meta-analysis of eight studies examining the role of sugar-sweetened beverage consumption on health found that consumption was significantly associated with type 2 diabetes based on over 15,000 reported cases of this condition.³⁸

Another meta-analysis of 30 studies on sugar-sweetened beverage consumption ranging from 1966 to 2005 found that sugar-sweetened beverage consumption was associated with weight gain and obesity.³⁹ A similar review of 88 studies found that sugar-sweetened beverage consumption was positively associated with weight.⁴⁰ One meta-analysis even concluded that sugar-sweetened beverages were responsible for at least one fifth of the weight gained by Americans between the years of 1977 and 2007.⁴¹ The evidence supporting a link between sugar-sweetened beverage consumption and weight gain is very strong and continues to grow.



Reducing Obesity Rates Requires a Comprehensive Approach

“It is unreasonable to expect that people will change their behavior so easily when so many forces in the social, cultural, and physical environment conspire against change.”

— Institute of Medicine

Solving America’s obesity epidemic will take a multi-faceted effort. Approaches that have the biggest impact are those that create a healthy environment by changing the context in which we live (refer to **Figure 7**). While education is an important part of any effort to improve health, education alone is rarely sufficient for creating behavior change. Policy, systems, and environmental (PSE) change refers to changes that broadly affect the way we live and shape the pattern of our lives and our health. Effecting PSE change can create a context where making healthy choices is the easy, default decision.

Addressing sugar-sweetened beverage consumption is an extraordinary opportunity for organizations to change the context in which we live. Sugar-sweetened beverages are a significant driver of the obesity epidemic and contribute more calories to our diet than any other single food item.⁴² Therefore, sugar-sweetened beverages are important to target in creating a healthy environment. Taking simple steps to reduce consumption of sugar-sweetened beverages is an effective way for individuals to lose extra weight,⁴³ and for those who are successful in decreasing even 5% to 15% of their current weight, there is less risk of experiencing obesity-related diseases.⁴⁴ While some individuals reduce sugar-sweetened beverage consumption independently, basic changes in the environment have been shown to be effective in triggering healthier choices.⁴⁵

In this toolkit, we encourage institutions to examine their beverage environment and make changes to increase the availability of healthy beverages and reduce the availability of unhealthy beverages. Most employees spend at least eight hours each day in the workplace and consume at least one meal, including a beverage, each day while at work. The work environment consciously and subconsciously affects beverage choices, especially if employees have limited access to outside beverages. Thus, increasing the availability of healthier beverage options has the potential to reduce consumption of unhealthy drinks.

Organizations can think of this toolkit as a guide to creating a healthier environment and as a call to action. Each organization creates a significant impact on its own employees and clients, but everyone must be involved to create a healthier city. The collective impact of reducing sugar-sweetened beverage consumption is greater than the sum of its parts, making it an important contextual factor in changing our food environment to support health.

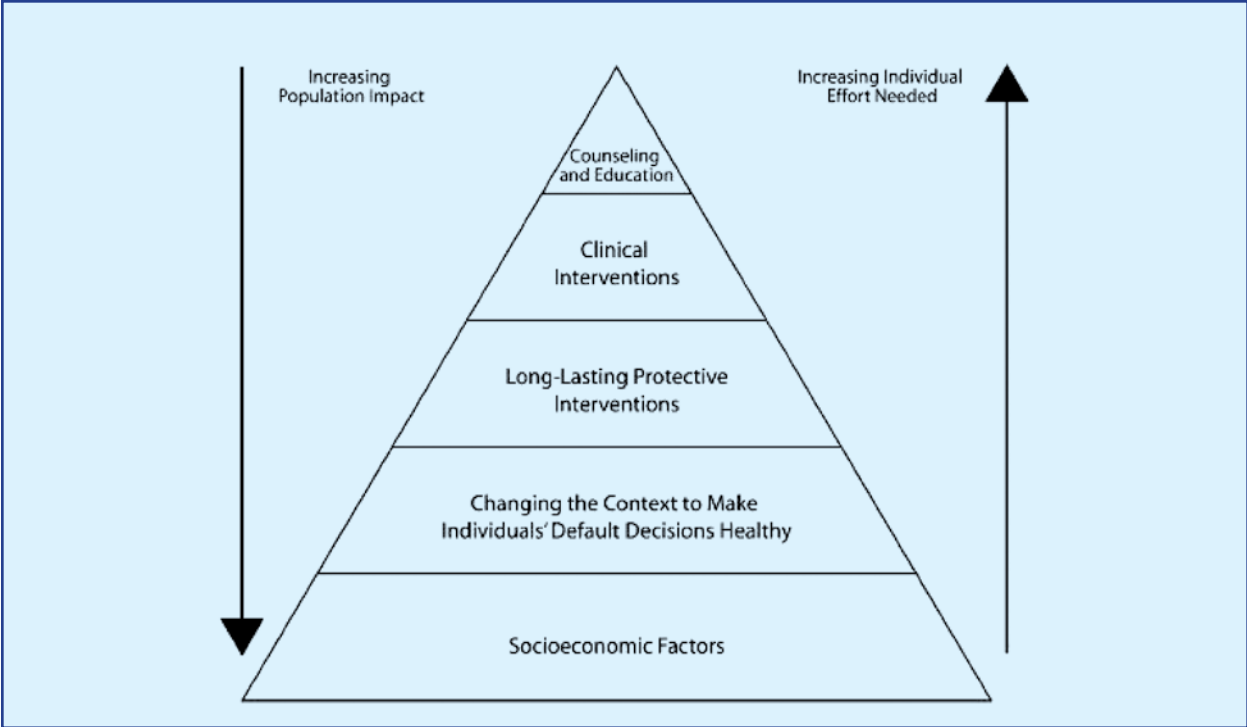


Figure 7. The Health Impact Pyramid illustrates that interventions that affect socioeconomic factors have the greatest population impact. Socioeconomic factors include poverty, education, housing, inequities and racism.



Reducing Sugar-Sweetened Beverage Consumption in Your Organization



Healthy Beverage Policy Approaches

There are various approaches that your organization can take to create a healthy beverage environment. These range from educating employees and clients, to increasing the proportion of healthy beverages in your facility, to completely eliminating the sale and provision of unhealthy beverages. Each organization's approach may be different. One way to categorize policy approaches towards creating a healthy environment is through MAPPS strategies: **Media**, **Access**, **Point of Purchase**, **Pricing**, and **Social Supports**.⁴⁷

- Use **Media** to promote healthy drinks and tap water; restrict sugar-sweetened beverage advertising and employ counter-advertising on the health effects of sugar-sweetened beverage consumption.
- Increase **Access** to healthy drinks and tap water; reduce the availability of unhealthy drinks. This can be accomplished in retail venues, vending machines, cafeterias, meetings, and more.
- Use of **Point of decision** labeling or signage to discourage consumption of sugar-sweetened beverages and promote healthier choices and to give consumers nutrition information about their choices.
- Use **Price** to discourage consumption of unhealthy drinks and to make it easier to buy healthy drinks like seltzer and bottled water by making these healthy choices relatively cheaper.
- Use **Social support/services** to promote increased activity at the workplace as part of a comprehensive plan to a healthier workplace.

The MAPPS strategies can be applied in a variety of circumstances, including vending machines, cafeterias, concessions, meeting places, patient trays in hospitals, and any other place where beverages are sold or provided. The following sections detail some special considerations that your organization will address in each of these areas of policy implementation.

Vending Machines

Changing your institution's vending policy to increase healthy beverage options is an effective and realistic step towards changing the beverage landscape in your organization. When transitioning to a healthy beverage policy, existing vending contracts may make it difficult to transition immediately. If your machines are subject to existing contracts, you can negotiate with your current vendors to phase-in healthier options before the contract is up. If the contracts are short-term, you may decide to wait until the contracts are renegotiated or put out to bid.

The contract terms will dictate your timeframe for implementing a new vending policy, and waiting until the vending contracts expire may minimize conflict with vendors. This waiting period provides an opportunity to implement an education campaign before vending changes are visible.

If contracts are of varying duration, you may want to consider building in a grace period for the vending contracts that come up sooner, so that all of your vending machines make the transition at the same time.

The following organizations have successfully implemented healthy vending policies, and the resources they have available online provide additional guidance:

- **Bay Area Nutrition and Physical Activity Collaborative:** Healthy Vending Machine Toolkit⁴⁸ — Resources to help with bidding and contracting for a new vendor.
- **LA County Physical Activity and Nutrition Task Force (PANTF):** Food Policy: Vending Machines, Fundraising, and County-Sponsored Meetings.⁴⁹
- **Center for Disease Control and Prevention:** LEAN Works – Workplace Obesity Prevention⁵⁰ — Resources to help organize a Wellness Committee, plan, build and assess your program.

Procurement for Events and Meetings

Some public and private institutions have developed nutrition standards for beverages that are purchased with institutional funds to be served at the institution’s meetings and events. This is another way to demonstrate to employees and visitors that the institution chooses to support healthy beverage choices.

Determine Scope of Guidelines

It is important to clearly define the beverages that are covered under the policy or procurement guidelines. Categories of beverage procurement that you may consider covering in your guidelines include the following:

- Beverages purchased with institutional funds and served at institution-sponsored meetings and events
- Beverages purchased with outside grant funds but served at institution-sponsored meetings and events
- Beverages purchased for meetings and events sponsored or hosted by your organization that are held offsite in the community
- Beverages purchased for special occasion events on institutional property
- Beverages sold on institution property for charitable fundraising efforts
- Marketing or promotion of beverages on vending machines themselves or through promotions or special events on institutional property



Depending on the categories included in your procurement policy, the policy should clarify whether the guidelines apply to potluck lunches, birthday parties, or other events on company property. Excluding certain categories from the policy should not preclude an attempt to bring healthier items to these kinds of workplace activities or individual wellness goals.

When transitioning to a healthy beverage policy, existing procurement and catering contracts create a challenge to making the changes immediate. However, many agencies do not have standing procurement contracts, so there are often allowances for changing specific product selections.

- **Commonwealth of Massachusetts:** Healthy Meeting and Event Guide (www.mass.gov/Eeohhs2/docs/dph/com_health/nutrition_phys_activity/healthy_meeting_event_guide.pdf).
- **Somerville, MA:** Shape Up Somerville's healthy meeting guide (http://www.somervillema.gov/CoS_Content/documents/SUSMeetingGuide060411.pdf).

Concessions

When transitioning to healthier beverages, leases and agreements for concessions need to be reviewed before making the change. Concessioners can range from small cafes to chain restaurants that are licensed to serve on the premises. Concessioners on the premises likely have a lease for the space or other contract laying out terms for their arrangement. For existing contracts, leases, and agreements, your organization may choose to make the change when the contract expires or to make a good faith effort to obtain voluntary or partial compliance during the interim period.

The contract terms will dictate your timeframe for implementing a new concessions policy, and waiting until the current contracts expire may minimize conflict. This waiting period provides an opportunity to implement an education campaign before concession changes are visible. If contracts are of varying duration, you may want to consider building in a grace period for the concessions contracts that come up sooner, so that all of your concessions make the transition at the same time.

Cafeterias

The approach for transitioning to healthier beverages in cafeterias depends on whether your food services are contracted to a separate vendor or whether your own staff runs this program. Most likely, your organization will have to adapt a contract if your organization works with an outside food vendor. However, cafeterias also provide an excellent opportunity for point-of-decision signage regardless of who controls beverage purchasing.

Cafeterias can also be ideal venues for implementation of a pricing strategy. One study found that in a hospital cafeteria, increasing the price of soft drinks drove down consumption by 26%, and a combination of price increase and education decreased consumption by 36%.⁵¹ Revenue from price increases on sugar-sweetened beverages can also help offset lower prices for healthy options like bottled water and seltzer.

Patient Trays in Hospitals

Patient food delivery is an important component of the food environment in hospitals. Reducing access to sugar-sweetened beverages in patient service demonstrates a commitment to the overall health of patients. This approach may be accomplished through voluntary compliance by a food service contractor without the need for a contract change because this directly affects patient health.

Hospitals may also consider making sugar-sweetened beverages available to patients upon specific request or with a diagnosis from a physician or dietitian. Patient comfort is a high priority to hospitals, and there may be times when it is medically appropriate for patients to consume sugar-sweetened beverages.

See **Appendix F** for a sample patient tray policy for hospitals.

Promote Water

In addition to policies that decrease the consumption of sugar-sweetened beverages, it is vital to push a positive agenda, that promotes healthier options. Promoting the consumption of tap water as a safe, healthy alternative to sugar-sweetened beverages is consistent with the message of creating a healthy workplace environment. Furthermore, your organization can advocate for tap water based on its low cost and benefits to the environment by reducing waste.

A first step in championing tap water is to ensure ready access to clean, attractive water fountains, coolers, or filtered water units. Advertising government or independent testing of water can help build confidence in its safety. Tap water promotion can also be achieved by distributing reusable water bottles through on-site stores or giveaways.



Steps to Implementation

Quick Start Guide to Reducing Sugar-Sweetened Beverage Consumption in Your Organization

1. Create a Healthy Beverage Working Group
2. Assess the Availability of Sugar-Sweetened Beverages
3. Formulate a Healthy Beverage Policy
4. Propose the Healthy Beverage Policy to Senior Management
5. Educate Staff, Visitors, and Stakeholders
6. Implement the Policy
7. Maintain Healthy Profits

The first step in your organization's process should be identifying what you hope to accomplish. Larger facilities with complex delivery systems for sugar-sweetened beverages may need to engage in a more elaborate approach, while smaller organizations may be able to streamline this process and accomplish their goals more quickly.

1. Create a Healthy Beverage Working Group

The first step in creating a healthy beverage environment is to create a Healthy Beverage Working Group to plan for and implement a sugar-sweetened beverage strategy. This Working Group should include staff from upper management, human resources, food services or procurement, building management or operations, and general counsel as well as other departments that may be affected by proposed policy changes. The Working Group will help lead efforts to design and implement a sugar-sweetened beverage reduction strategy by coordinating employee education to build support for the policy and by carrying out many of the details necessary to implement a successful policy.

2. Assess the Availability of Sugar-Sweetened Beverages

A useful step in evaluating the availability of sugar-sweetened beverages in your organization is to conduct an assessment of the access points, such as vending machines, retail settings, and meeting and procurement practices. The assessment can be carried out by members of your Working Group and can be formal or informal. The assessment should include a tally of the number of vending machines in your facilities, a description of which products are sold in the vending machines and an analysis of the contract or agreement your company has with the vending company. Be sure to assess the availability of both unhealthy and healthy options, their price and their placement within vending machines and at other points of sale.

Finally, interviews with key staff in the operations department may provide valuable information about the availability of beverages in your facilities. If your organization has multiple locations, you may need to contact someone at each facility to get accurate information.

Use the assessment to inform and guide the nature and direction of the policy. Generally, the more your organization is able to document the baseline status of sugar-sweetened beverage availability, the stronger your case will be when communicating with staff about your plan to reduce this availability.

See **Appendix G** for a tool that can be used to assess beverage availability in any organization.

3. Formulate, Revise, and Finalize a Healthy Beverage Policy

Once the working group has completed an assessment of beverage availability, the next step is to formulate a healthy beverage policy that is appropriate for the organization to implement. Possible approaches include the following:

- Educate employees, clients, and visitors about healthy beverage options using point-of-purchase signage, brochures, and workshops
- Provide only drinks that meet healthy beverage guidelines (see **Appendix A**)
 - In vending machines
 - At meetings and events
 - In retail venues and cafeterias on your property
 - For client programs or in patient trays (for hospitals or other residential or outpatient service providers)
- Encourage the purchase of healthy drinks, like water, seltzer, and low-fat milk, by placing these options at eye level in cafeterias and vending machines
- Encourage the purchase of healthy drinks by making these options relatively less expensive in cafeterias and vending machines
- Promote the consumption of water by making refreshing tap water available to all employees, clients, and visitors
- Eliminate advertising of unhealthy beverages on your organization's property

4. Propose the Healthy Beverage Policy to Senior Management

The proposed Healthy Beverage Policy should be presented to senior management for discussion and approval. Senior management is a key stakeholder group within any organization and is critical to the success of the policy because they bear responsibility for implementing and enforcing the policy's provisions. Their feedback can provide valuable insight into how the policy will be received by staff and identify potential stumbling blocks during the implementation process.

5. Educate your Staff, Visitors, and Other Stakeholders

Providing information on the health problems associated with sugar-sweetened beverage consumption and the degree to which these beverages play a unique role in contributing to obesity and associated health costs is an important step for increasing support for the new healthy beverage policies. Informational sessions provide opportunities for those affected to understand the purpose and importance of the policy, to participate in the process, and to share concerns. While these information sessions help raise awareness of health issues, they also identify challenges and strategies for implementation and may potentially build a support base. Education is also an opportunity to frame your policy favorably, such as emphasizing healthier options rather than restricting choices; creating a healthier work environment rather than a workplace ban. Education should be an early and robust part of any effort to reduce consumption of sugar-sweetened beverages in your organization.

Efforts to educate can take many forms including presentations to staff and clients, posting informational flyers around your property, and sending an email newsletter. Your organization may choose to create a website providing information on the policy, explaining new procurement procedures to follow for setting up contracts or hiring caterers. Communications like these allow individuals in the organization to understand that there is clear reasoning behind the policy and that it is transparent and straightforward to follow.

An effective means of educating both staff and clients is posting point-of-purchase signage providing helpful information on which beverages are unhealthy and why. This includes signs, brochures, or stickers at the points where water and sugar-sweetened beverages are sold. If your organization plans to remove unhealthy drinks from its premises, point-of-purchase signage can be used during the transition period before unhealthy beverages are removed. The Boston Public Health Commission has developed a traffic light system that includes posters and brochures about healthy beverage choices. This signage can be found in **Appendix C**.

6. Implement the Policy

In order to be effective, a Healthy Beverage Policy should address the primary ways sugar-sweetened beverages are accessed in an organization: vending machines; at meetings or organization-sponsored events; for client programs/services; and at on-site retail establishments. Successful implementation of the policy depends on various factors, and special considerations may be necessary for various sugar-sweetened beverages access points within an organization.

7. Maintain Healthy Profits

Taking steps to reduce the availability of sugar-sweetened beverages can raise financial concerns. Beverage vending machines generate income, and many people assume that by reducing unhealthy options and offering healthier beverages, people will consume fewer beverages altogether. However, the experience of schools that have implemented similar measures suggests that after an initial adjustment period, beverage revenue remains fairly consistent and customers embrace the sale of healthier options – particularly water and 100% juices. A well-run education campaign also helps generate interest in purchasing healthy beverages and may even increase sales. Additionally, many organizations receive only a small percentage of the profits from vending and concessions, with most of the money going to the vendor. This suggests that the financial impact of removing certain beverages will be smaller than some organizations anticipate.

The beverage industry itself notes that an increasing proportion of beverage profits are coming from the sale of water, 100% juice, diet drinks and other healthy beverages. In fact, according to recent industry surveys, employees rate water as the most important (34%) beverage choice in the workplace, behind coffee (25%) and well behind soda (7%), juice (5%) or sweetened coffee drinks (3%).

It is also important to keep in mind that measures to reduce availability of sugar-sweetened beverages improve the health of employees, decreasing costs to the organization in the form of health care expenditures and lost productivity.



Communicating Your Efforts



Getting Buy-In in Your Organization

Efforts to reduce sugar-sweetened beverage consumption in your organization can be an opportunity to publicly pledge your commitment to the health of your employees and clients. Effectively communicating this commitment is important to increasing buy-in to your efforts, which will drive down consumption of sugar-sweetened beverage and avoid active resistance.

The tone of your messaging is crucial in garnering support from your staff, clients, and visitors. Your messaging should emphasize the benefits of your strategy, rather than negative perspectives like banning items or reducing options. Emphasize that your efforts increase healthy options and create an environment where being healthy is easy. While some may feel that it is unfair to reduce the number of unhealthy options, others see the status quo of limited access to healthy choices as equally unfair. Communicate that a strategy to reduce sugar-sweetened beverage consumption is one part of your organization's commitment to creating a healthy workplace.

Some ideas for communicating your efforts include the following:

- **Eliciting feedback:** Create opportunities for employees to be involved in the policy development or to give early feedback to help you design a more effective initiative and to increase buy-in.
- **Hosting information sessions:** Inform your employees of your intentions well before you roll them out. Create a PowerPoint presentation explaining the rationale for your actions and exactly what will take place to increase buy-in among your staff.
- **Phasing in the policy:** Conduct your initiative as a multi-step process to help employees and clients adjust to new changes and prevent resistance to your efforts.
- **Posting signage:** Put up educational signs near points of access to sugar-sweetened beverages and phase-in healthy drinks to help educate consumers.
- **Creating events:** Couple the beginning of your initiative with a health-related event, such as blood pressure screenings or a flu clinic to demonstrate a commitment to a healthy environment.



Getting Positive Media Coverage

The news media can be a powerful tool for efforts to create a healthy environment. Press coverage of your initiative increases buy-in among staff and employees, creates support within the community you serve, and gives you public recognition for your commitment to building a healthier organization. Reducing sugar-sweetened beverage consumption is an innovative approach to creating this healthier environment, and media outlets are likely to respond to information you provide describing your efforts. There are many ways to go about earning press coverage of your efforts. If your organization has a communications department, it will be well versed in these techniques. Smaller organization can use the suggestions and examples below to work with various forms of the news media.

News Advisory: This is a short document alerting media outlets of an upcoming event of interest. The purpose is to acquire more coverage of an event, including print and television media. This is especially appropriate if your organization plans to launch your healthy beverage initiative in conjunction with a health promotion event like a blood pressure screening.

Timeline: Send advisory to media outlets 1 week prior to the event

Example: See template below

Local Media Calls: These calls should take place as a follow-up to your news advisory and ensure successful media coverage of the event. Your calls are a personal invitation to media outlets and will remind reporters of the event.

Timeline: Complete calls 3 days prior to the event

Press release: A press release is more comprehensive than a news advisory and can be considered a pseudo-news story. A press release describes an event or a newsworthy action that an organization has taken, such as removing sugar-sweetened beverages. Press releases should include details such as who was involved in an event or organizational change, who it will affect, and why it happened. It should also include some details about the organization responsible for the action or event.

Timeline: Submit press release on event day or at the time the organization takes action

Example: See announcement of Fairview Hospital's ban of sugar-sweetened beverages below

Press Packet: This packet gives the media all the information they need to write a story about an event. In addition to your news advisory and press release, it includes an overview of the event with an agenda or program and additional information about any speakers or organizations included in the event.

Timeline: Make press packet available on the day of the event

Sample Media Alert

News Advisory

FOR IMMEDIATE RELEASE
Monday, January 3rd, 2011

CONTACT:

First and Last Name
Telephone: XXX-XXX-XXXX
Cell: XXX-XXX-XXXX
E-Mail: name@companyx.com

Company X Launches Healthy Workplace Initiative by Removing Sugary Drinks

Mayor to speak in support of initiative ...

WHAT: Company X Healthy Workplace Kickoff

WHEN: January 10, 2011

WHO: Company X and Mayor Y

WHERE: "Location of event"

HOW: Kickoff will celebrate the implementation of a healthy beverage policy that includes removing all sugary drinks sold on the property. CEO "name" and the Mayor will speak in support of the initiative.

WHY: The kickoff will celebrate Company X's commitment to creating a healthy work environment, as the 4th largest employer in the city. Sugary drinks can contribute to a host of health problems including weight gain and removing them will allow Company X to make healthy choices the easiest choices.

For more information about Company X and their healthy workplace initiative, visit:
www.companyx.com.

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Sample Press Release

April 12, 2010

Health Care Without Harm Press Release

Contact: Eileen Secrest, 540-479-0168

Hospital Bans Sugar-Sweetened Soda and Sports Drinks to Improve Public Health

An Industry First, Cites Growing Obesity and Diabetes Health Risks

Washington, DC — In a national first, Fairview Hospital in Great Barrington, MA, has announced the elimination of the availability of soda and sports drinks sweetened with sugar in its hospital facility. The hospital stated that a recent vote by the Massachusetts House of Representative to ban the sale of soft drinks in schools on obesity grounds caused the hospital to take the action in the interest of public health.

“The healthcare community has an obligation not only to treat, but to help prevent these conditions, some of which are at epidemic levels.”

— Walter Willett, MD, MPH
Chair, Nutrition Department
Harvard School of Public Health

Fairview was the first hospital in Massachusetts to sign Health Care Without Harm’s “Healthy Food in Healthcare Pledge.” By signing the pledge, hospitals commit to a number of activities to help them provide fresh, healthy foods to their patients and staff, to ensure the healthiest treatment possible but also as a model for healthier choices outside of the hospital setting. “As the leader of healthcare in the southern Berkshires, we are committed to creating a healthier community and will set the pace by influencing healthier lifestyle choices,” said Fairview President Eugene Dellea.

“Sodas, and other sugary drinks are associated with a host of health effects and increase the risk of obesity, diabetes, heart attacks, metabolic syndrome, and dental caries,” stated Walter Willett, MD, MPH, Chair of the Nutrition Department at the Harvard School of Public Health.

“The healthcare community has an obligation not only to treat, but to help prevent these conditions, some of which are at epidemic levels,” Willett continued. “It is a logical and significant step, that the healthcare community creates a social and cultural environment that promotes health, by eliminating the sale of sugared sodas and sports drinks.”

Dr. Willett sits on the Leadership Team for Boston’s Communities Putting Prevention to Work Initiative, for which the City received \$12.5 from the American Recovery and Reinvestment Act of 2009 to fund chronic disease prevention. As a part of this initiative, HCWH has been funded

by the Boston Public Health Commission to work with Boston hospitals on the elimination of sugar-sweetened beverages in their facilities.

Many hospitals enter into exclusive agreements, or “pouring rights” contracts with the sweetened beverage industry. In return for direct payments or subsidies, hospitals limit their sales to one company’s products and negotiate product placement. Both Coke and Pepsi are on a three-year business partnership contract with the American Dietetic Association (ADA). Last year, the American Academy of Family Practice announced a controversial partnership with Coca-cola, which was widely denounced by its membership.

"We have a paradox, where the sweetened beverage industry, whose products are associated with a host of negative health effects, has effectively created an environment that is contrary to the goal of primary prevention," stated Jamie Harvie, chair of the Health Care Without Harm Healthy Food Systems Initiative.

A recent study by the California Center for Public Health Advocacy and the UCLA Center for Health Policy Research found that that 24 percent of adults drink one or more non-diet sodas a day, and these adults are 27 percent more likely to be overweight. The results for children were children ages 2 to 11 imbibe at least one sugar-sweetened drink a day.

The American Heart Association recommends that most women should be getting no more than 6 teaspoons a day, or 100 calories, of added sugar while for men the recommended limit is 9 teaspoons, or 150 calories. One 12-ounce can of soft drink contains about 8 teaspoons of added sugar, which equals approximately 130 calories.

“By eliminating sugared drinks from his hospital, Fairview President Eugene Dellea has demonstrated vital leadership in primary prevention and clearly recognizes the important role of hospitals in creating health promoting environments,” stated Harvie.

Fairview Hospital is a national leader in food-based disease prevention and health promotion. Their initiatives include the following:

- Elimination of trans-fats
- Elimination of deep fryers
- Nutrition labeling
- Serving more whole grains
- Purchase of seasonal, locally-grown produce and products produced without hormones or nontherapeutic antibiotics.
- Hospital employees sponsored an on-site vegetable garden
- Support for the Preservation of Antibiotics for Medical Treatment Act

For more information about Health Care Without Harm’s Healthy Food in Health Care Pledge, which has now been signed by nearly 300 hospitals, visit http://www.noharm.org/lib/downloads/food/Healthy_Food_in_Health_Care.pdf.

HCWH has an ambitious healthy food agenda, which includes buying fresh food locally and/or buying certified organic food; avoiding food raised with growth hormones and antibiotics; encouraging group purchasing organizations (GPOs) to support healthy food in healthcare; supporting local farmers and farming organizations; introducing farmers markets and on-site food box programs; reducing food waste; and establishing an overarching food policy at each health facility. Visit www.noharm.org for more information.

Health Care without Harm, an international coalition of more than 473 organizations in 52 countries, is working to transform the health care sector, without compromising patient safety or care, so that it is ecologically sustainable and no longer a source of harm to public health and the environment. To learn more about HCWH's work, visit our website at www.noharm.org, our YouTube channel at [HCwithoutharm](https://www.youtube.com/channel/UCw0VqYk1k1k1k1k1k1k1k1k), and our twitter feed at [hcwithoutharm](https://twitter.com/hcwithoutharm).



Precedent for Action



Policy Change Stories from the Field

Making this type of policy change in your institution may seem overwhelming at the beginning, but the good news is that many others have been successful in doing this work and can provide encouragement and guidance as you begin the process. Here are some of their stories:

Municipal Government: City of Boston, MA

Citing a link between the consumption of sugary beverages and rising obesity rates and health-care costs, Mayor Thomas M. Menino issued an executive order requiring City departments to take steps within six months to phase out the sale, advertising, and promotion of sugary beverages on City-owned property.

“Now is the time to expand our efforts that began in our public schools and set an example for the city as a whole,” Mayor Menino said, referring to the 2004 ban on soda and junk food in vending machines in Boston Public Schools. “I want to create a civic environment that makes the healthier choice the easier choice in people’s lives, whether it’s schools, worksites, or other places in the community.”

Mayor Menino announced the executive order at a City Hall press conference where he was joined by Boston Public Health Commission officials and leading health and nutrition experts, including Dr. Walter Willett, chairman of the Department of Nutrition at Harvard School of Public Health and Bill Walczak, president of Carney Hospital in Dorchester.

Mayor Menino’s executive order set science-based standards for what’s considered a healthy beverage and what can be sold or served on City property. The policy applies to cafeterias, vending machines, concession stands, and beverages served at meetings, City-run programs, and events where food is purchased with City dollars.

The executive order allows for a six-month grace period before they’ll be required to phase out the sale of so-called “red” beverages, or those loaded with sugar, such as non-diet sodas, pre-sweetened ice teas, refrigerated coffee drinks, energy drinks, juice drinks with added sugar and sports drinks. The order allows for the sale of “yellow” beverages such as diet sodas, diet iced teas, 100 percent juices, low-calorie sports drinks, low-sugar sweetened beverages, sweetened soymilk and flavored, sweetened milk. “Green” beverages, such as bottled water, flavored and unflavored seltzer water, low-fat milk, and unsweetened soymilk will continue to be sold. The promotion of “red” beverages on City property through sponsorship agreements with City departments, including banners and advertising panels on vending machines, will be prohibited.

Public health employees will conduct educational workshops for City employees and also will be responsible for working with City departments to ensure that the executive order is fully implemented.

Dr. Barbara Ferrer, executive director of the Boston Public Health Commission, said, in the long term, the policy will decrease healthcare costs for the City and cut into lost productivity. “Economists estimate that medical costs for an obese patient are about 42 percent higher a year than for a patient with a healthy weight,” Dr. Ferrer said.

Healthcare Institution: Fairview Hospital, Great Barrington, MA

Fairview Hospital, an affiliate of Berkshire Health System in Great Barrington, Massachusetts, is a national leader in health promotion, as evidenced by their decision to eliminate sugar-sweetened beverages from their facility in the spring of 2010. This step was consistent with many other measures it has taken to model food service policies that promote public and ecological health.

Fairview’s first step, in 2009, focused on tweaking the pricing structure of sugar-sweetened beverages. The price of sodas in Fairview’s vending and retail establishments increased from \$1.25 to \$1.50. “We were originally just trying to align the prices with the standard market price,” Roger Knysh, Director of Nutrition and Food Services stated. This pricing shift slowed sales of soda. Although a sugar-sweetened beverage policy to eliminate soda was never part of the initial plan, these changes came about in the context of a national conversation on obesity and the role of sugar-sweetened beverages. The result, through the leadership of Fairview’s CEO, Eugene Dellea, was a complete shift in the availability of these sugar-sweetened beverages throughout the facility.

Knysh was clear that, “this is not a ban on the personal consumption of sugar-sweetened beverages, but a sales phase-out at our facility consistent with our role as a health promoting hospital.” Once the sodas were removed from all areas—cafeteria, catering, vending and patient menus, there seemed to be no noticeable change in sales revenue. While Fairview eliminated all sugar-sweetened beverages in 2010, they still offer diet sodas, diet iced tea, unsweetened iced tea, and bottled water (the only bottled water in the facility) via vending.

In 2006, Fairview moved from traditional patient tray-line to room service where the patients are able to choose what and when they want to order. “Sodas have never been offered on patient menus,” Knysh stated. “But they are available for patients upon a clinician’s request.” Patient menu beverage offerings include tap water, locally sourced milk, 100% juice, flavored water beverages, and milkshakes.

As a component of Fairview’s shift towards a healthier catering menu they removed sugary beverages from the offerings. “In the past, we would provide whatever was requested, which often included chocolate chip cookies and 2 liter bottles of soda. We figured if the hospital was paying, we would choose healthier items, take out sodas and offer more water and iced tea,” Knysh said. “There has not been any opposition.”

These transformations were met with a mixed response from the nurses and physicians. “There was a big panic at first, but after sending a memo to clarify the situation, everyone seemed more at ease,” Knysh said. Many felt that it was ideal for a hospital to provide such an environment

and were very understanding. The facility isn't opting to regulate what their employees drink, but rather to set a tone that focused on prevention, stating that the hospital would not contribute to the obesity epidemic by selling products that are so clearly risk factors.

Knysh said he learned a lot about the need for good education to the staff throughout the process. Creating memos explaining the rationale, to all staff, is a good way to avoid the "active grapevine in the facility." Moreover, "it was essential that our CEO was on board and encouraging this effort." Another word of advice to those who are looking forward to doing this is to budget accordingly. Hospitals must also actively manage the general contract with beverage vendors so that there is flexibility in the purchasing agreements. Fairview's contractual agreement states that they will purchase beverages but does not specify which kind, which allows them to purchase unsweetened beverages. Although these shifts have had no effect on their revenue, the motivating concern was not revenue, but rather on making people healthy.

Moving forward, Fairview is interested in reducing the portion sizes of 100% juices they offer, which is an ongoing process. They reduced the size of a standard 16 oz. juice to 10 oz, but would like to further reduce to 4 oz. This would potentially "educate customers on appropriate portion size of fruit juice." Knysh brings up the idea of what parents used to give children when sugar-sweetened beverages were not readily available or excessively consumed and remarks: "We need to get back to basics."

School District: Boston Public Schools, Boston, MA

Schools should be seen as critical partners in the effort to address the childhood obesity epidemic. Many students in public schools eat two meals – breakfast and lunch – during the school day, making schools the ideal opportunity to improve nutritional intake. In response to skyrocketing rates of childhood obesity in the city of Boston, Mayor Menino led the nation in 2004 by promulgating a competitive food and beverage policy for vending machines, snack lines, and a la carte foods sold in the Boston Public Schools. By 2006, sugar-sweetened beverages were removed from all schools, and a new district-wide wellness policy was promulgated to reflect the importance of schools in promoting student health. The policy has been implemented in all of Boston's 135 schools, affecting the daily choices of about 56,000 students and 9,000 employees.

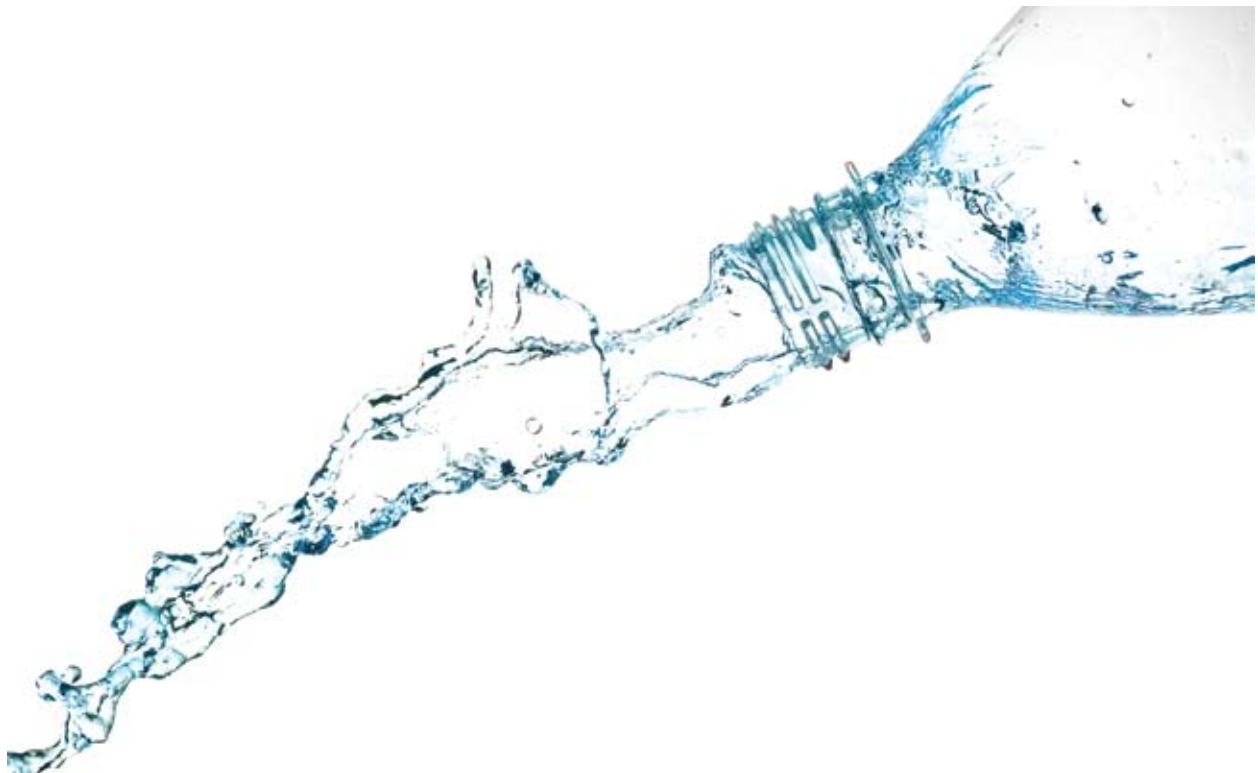


Healthcare Institution: Codman Square Community Health Center, Boston, MA

Healthcare institutions have an opportunity to be leaders in both increasing access to healthy beverages within their institutions as well as educating their employees, patients, and visitors about the impact of sugary beverage consumption. In 2010, Codman Square Community Health Center took the leap to become the first community health center in the nation to create a soda-free policy. Under the leadership of CEO Bill Walczak, the community health center undertook a number of initiatives to reduce the rates of obesity-related illnesses including diabetes and heart disease. When asked about the increased consumption of sugary beverages in Boston, CEO Walczak said, "Somebody has to take a stand. And if it isn't the government and health care institutions leading the way to a healthier lifestyle, who's going to do it?"

Municipal Government: Los Angeles County, Los Angeles, CA

In August of 2006, the Los Angeles County Board of Supervisors voted unanimously to approve a countywide healthy food policy to ensure that employees working for the county enjoy a work environment that is supportive of healthy eating. The healthy food policy created nutritional standards for foods and beverages sold in vending machines on municipal property as well as for those purchased for county meetings, fundraisers, and events. Now in its fourth year of implementation, the LA County Food Policy is firmly in place. The County Food Policy improves the work environment for 90,000 county employees as well as the members of the public who visit the county's facilities each day, including its medical facilities, parks, beaches, and social service buildings.



Organizations and Cities That Have Taken Similar Steps

- The **City of Boston** eliminated the sale of sugar-sweetened beverages on city property with an executive order in April 2011.
- **Fairview Hospital** in Great Barrington, MA prohibited the sale of soda and sports beverages in the hospital in spring 2010.
- **Codman Square Community Health Center** prohibited sale of soda in its facilities.
- **Carney Hospital** in Boston eliminated the sale of sugar-sweetened beverages in April 2011.
- **New York City** restricted the content of vending machines on city property with respect to placement and percentage of sugary drinks.
- **San Antonio** removed soda from all vending machines in the city.
- **Los Angeles County** adopted a county-wide food policy to remove most sugary drinks (over 25 calories per 8 oz) from vending machines.
- **San Francisco** issued an executive directive removing sugar-sweetened beverages from vending machines in city.
- The **Toronto government management committee** voted in the spring to ban the sale of soda and energy drinks in 34 sports arenas and 134 community centers throughout the city.
- The **Cleveland City Council** voted in March 2011 to remove all sugar-based drinks from dispensing machines in City facilities, to be replaced with water and 100% juice products.
- The **Cleveland Clinic and system affiliates** prohibited the sale of sugar-sweetened foods and beverages on all property in summer 2010.

Frequently Asked Questions



Being prepared for tough questions from employees, visitors and the press is an important part of selling your organization's efforts. Below are some frequently asked questions and common concerns that your organization may encounter when promoting your efforts.

General

Why focus on sugar-sweetened beverages? French fries, ice cream, and candy are all unhealthy as well.

Researchers have found significant evidence linking sugar-sweetened beverage consumption to obesity and other health-related issues. One study found that consumption of sugar-sweetened beverages had a stronger association with being overweight or obese than any other food. Nearly 10% of Americans' calories come from sugar-sweetened beverages, and these drinks don't fill us up like the calories in solid food do.

Shouldn't we educate people about healthy eating, not force them to behave in a certain way?

Education is an important part of any effort to get people to change their behavior, but it is usually ineffective if used alone. Education is most effective when coupled with other efforts to help people be healthier, such as making healthy options more available, making unhealthy options less available, or increasing the price of unhealthy items. Educating people about healthy choices is only effective if we work in an environment where the healthy choices are the easy choices. A study conducted in two Boston teaching hospitals indicated that an educational campaign in hospital cafeterias decreased purchases of soda only when it was coupled with an increase in the price of the soda.

Being healthy is all about balancing calories in and calories out. Isn't soda fine as long as individuals properly manage calories?

Managing calories consumed in food and beverages and those burned off in physical activity is the key to maintaining a healthy weight. Soda consumption makes it hard to find this balance, because it contains a lot of calories without any nutrients for the body and represents extra calories consumed in addition to a meal or snack. Practically speaking, in order to burn off the calories in one 20oz soda, an adult would have to walk for over 40 minutes at a moderate pace!

Sports drinks provide sugars and electrolytes that are important to staying hydrated?

Intense marketing has led many to believe that sports drinks are necessary to remain healthy during exercise. The truth is that we don't need to replace lost electrolytes unless we've been exercising at an intense level for over an hour. Even then, simply snacking on healthy foods is a great way to replenish electrolytes without the extra unnecessary sugar found in most sports drinks. Water is the best way to stay hydrated during exercise.

Government

Government entities are often criticized for becoming overly involved in people's decisions. Won't consumers just accuse the government of being the "food police" if they discourage consumption of unhealthy foods?

While government entities may be criticized for attempts to promote healthy eating, proper messaging around these efforts helps deflect some of this criticism. Positive messaging includes emphasizing that the government is demonstrating its commitment to creating healthy environments by setting an example. It is important to drive home the reality that reducing the availability of sugar-sweetened beverages is not about taking away people's choices, but about creating environments where making healthy choices is easy. A beverage policy does not mean that any beverages are "banned," but that this unit of government chooses not to be in the business of selling them. Part of the government's responsibility is to protect the health of its citizens, and creating a healthy living environment is important to achieving this.

Health Care

Won't hospitals and other health care institutions be criticized for denying patients the food that would provide them comfort in a time of stress? What about the fact that providers rely on the caffeine in soda to stay alert during long shifts?

Health care institutions and providers are on the front lines of the chronic disease burden of the obesity epidemic. Creating a treatment environment that is free of unhealthy beverage exposure should be a priority. Many providers will be willing to sacrifice easier access to sugar-sweetened beverages in an effort to promote patient health. Furthermore, health care institutions can reserve the right to provide sugar-sweetened beverages to patients in unique situations of need. Finally, it is important to emphasize that individuals can still bring soda onto hospital property if caffeine is needed.

Colleges and Universities

Students may criticize their schools for not allowing them to make their own choices when it comes to the meal plans that students pay for. How can colleges and universities respond if students insist that they rely on the caffeine and sugar in these beverages to study or work at late hours?

Colleges and universities are committed to providing a safe and healthy environment for their students, and healthy foods should be an important part of this commitment. Furthermore, students tend to be inexperienced when it comes to making their own food choices, and they may not be aware that sugary drinks can lead to weight gain. Educating students about sugar-sweetened beverages and providing healthier beverages can set a precedent for healthy behavior in the future. Also, it will always be up to students whether they buy sugar-sweetened beverages off campus, but the school has no responsibility to provide them.

Community-Based Organizations

How should community-based organizations respond to complaints that limiting sales of sugar-sweetened beverages will damage an important source of revenue for organizations? Guests of these organizations may feel that decreasing sales of these beverages is an unwise move for organizations that already struggle for funding.

The “Maintaining Healthy Profits” section of this guide will be an important tool for organizations dealing with this type of criticism. It is also important for community-based organizations to affirm their commitment to the health of their community. Increasing revenue should not come at the cost of the health of an organization's clients or staff, and this is a message that can truly resonate with community members.

Retail Outlets

Isn't it the role of retail outlets to provide what consumers desire and are willing to purchase, not decide what is healthy for them?

Retail outlets have the right to decide whether they will serve their clients in a way that promotes their health. Many customers are attracted to retail outlets that strive to promote healthy eating, and a statement of this commitment can help draw in customers. Furthermore, directing customers to healthy beverages can help off-set any lost sales of sugar-sweetened beverages.



Appendix



Appendix A: Sample Guidelines for Healthy Beverages

We encourage your institution to develop its own guidelines for beverages provided through vending, retail, meetings, and procurement. Each organization can decide which standards are appropriate for its goals. Below are several examples of guidelines that can be adapted for your organization's needs.

An example of guidelines for vending, retail, or procurement, developed by the Boston Public Health Commission:

The following shall constitute the Healthy Options Beverage Standards:

- No calorically-sweetened cold beverages including, but not limited to, non-diet sodas, calorically sweetened energy drinks and sports drinks, pre-sweetened tea and coffee drinks, juice with added sugars, and sweetened water products shall be sold or distributed, unless said beverages contain less than or equal to one gram of sugar per fluid ounce.
- Fruit and/or vegetable-based beverages sold or distributed shall be composed of no less than 100 percent juice. Where possible, fruit and/or vegetable-based beverage offerings shall not exceed 8 ounces or 150 calories and shall be no salt or low-sodium varieties.
- Milk, soy milk, and other milk substitute offerings shall be limited to 1% or skim milk, shall not exceed 10 ounces in volume, and shall contain no more than 22 grams of total sugars per 8 ounce serving.
- Diet or other non-calorically sweetened beverages shall comprise no more than one-third of the total beverage offerings

[Organization name] and its agents will comply with these standards. This policy is applicable to all vending machine services. All staff, contractors, and vendors shall review the policy and Standards and may request additional information and training as required. This policy will be reviewed periodically, but at least once every three years from the date of implementation.

Another example of guidelines that can be applied to a variety of settings:

[Organization management] declares that food and beverages sold in [organization]-contracted food and beverage vending machines on [organization] sites shall comply with the following guidelines:

Beverage vending machines in [organization] facilities shall offer only:

- Fruit-based and vegetable based drinks that are 100 percent fruit juice without added sweetener
- Drinking water without added sweeteners
- Milk products including, 1%, nonfat, soy, rice, and other similar non-dairy milk
- A low-calorie electrolyte replacement beverage that contains no more than 12.5 grams of added sweetener per 20-ounce serving

The Commonwealth of Massachusetts and the City of New York have the same standards for food purchased and meals prepared by public agencies that serve beverages to clients:

Standards for beverages that are purchased are:

- <25 calories per 8 oz for beverages other than juice or milk, and
- If purchasing juice, require 100% fruit juice.
- Require milk to be 1% or non-fat and < 100 calories per 8 oz.
- Require any fluid milk substitute (e.g. soymilk) be < 100 calories per 8 oz.

The standards for beverages served to adults:

- Meals
 - Recommend portion size limited to < 8 oz per serving for juice.
 - Require water be available at all meals (in addition to other optional beverages).
- Snacks
 - Require <25 calories per 8 oz for beverages other than 100% juice or milk.

The standards for beverages served to children are:

- When milk is provided, children ages two and older shall only be served milk with 1% or less milk-fat unless milk with a higher fat content is medically required for an individual child, as documented by the child's medical provider. When milk is provided, children ages 12 months to under age 2 should be served whole milk.
- Flavored milk is permitted and required to be <130 calories per serving. Recommend that agencies continue to phase out flavored milk over time.
- Recommend juice not exceed 4 ounces per serving for children in elementary school.

Appendix B: Sample Policy for Beverage Machine Vendors

It is recommended that a written policy be part of your contracts with vendors. For example, all future Request for Proposals (RFPs) can stipulate that vendors will comply with the criteria set forth in the Organization's Beverage Policy. The following language can be adapted and incorporated into future vending machine contracts:⁶⁰

HEALTHY BEVERAGE POLICY SPECIFICATIONS

Client has adopted a Healthy Beverage Policy Specifications Sheet ("the Specifications Sheet"), which governs the types of beverages that can be sold on Client property. A copy of the Specifications Sheet is attached as Exhibit A to this agreement. In providing beverage products and services under this agreement, Vendor shall comply with the terms of the Specifications Sheet and shall offer for sale only such products as conform to the requirements set forth in that document.

1.0 Scope of Contract

- 1.1. **Permitted Beverage Products:** "Permitted Beverage Products" are those brand name products of Vendor's that Client and Vendor have mutually identified in writing as conforming to the Specifications Sheet and have selected for sales under the terms and conditions set forth in this agreement. This agreement's Permitted Beverage Products List is attached as Exhibit B.
- 1.2. **Revisions to Policy:** Client retains the sole right to revise or delete the Specifications Sheet from time to time during the term of this agreement. If such a revision results in a need to revise the Permitted Beverage Products List, Client and Vendor shall mutually revise the Permitted Beverage Products List and amend this agreement in writing by selecting other brand name products of Vendor's for sale under the terms and conditions set forth in this agreement.
- 1.3. **Adverse Financial Change:** If Vendor can demonstrate that a revision to the Permitted Beverage Products list would materially and adversely affect the financial terms of this agreement, Client and Vendor will endeavor to reach concurrence regarding the potential loss of profitability and will then modify this agreement accordingly. Any impasse or dispute will be resolved in accordance with Section 27.15 of this agreement.

1.0 Scope of Contract (continued)

- 1.4. Product Substitutions/Manufacturers Brand Change:** This agreement does NOT allow for product substitutions unless Vendor obtains prior written authorization from the Client representative identified in Section 27.2 of this agreement. If a manufacturer's product or brand change occurs during the course of this agreement, Vendor's representative shall not automatically substitute product. Vendor shall submit product specifications and a sample (on request) for Client's approval prior to any shipment. If the Client accepts the new brand, all other terms, conditions, and prices shall remain in effect.
- 1.5. Compliance:** Vendor's Failure to comply with Section 1 of this agreement shall be deemed a material breach of the agreement, which may subject the agreement to immediate termination at Client's sole discretion or to such other remedies as may be specified in this agreement.

2.0 Equipment

- 2.1. Energy Efficiency:** All machines provided by Vendor under this agreement shall conserve energy and reduce energy related costs through energy efficiency. To satisfy this requirement, Vendor either can install machines with an Energy Star® label (or equivalent) or can utilize energy-saving devices such as the Vending Miser® or equivalent. Vendor shall incur all costs associated with energy saving machines or devices.
- 2.2. Vending Machine Equipment:** Vendor shall provide, install and maintain sufficient vending equipment and supplies necessary to facilitate the continued sale of Permitted Beverage Products. Vending machines shall be new or completely reconditioned at the time of installation. No machine shall be installed that does not meet the energy efficiency requirements set forth in Sub Section 12.1. Automatically operated dispensing machines shall be adequately metered with non-reset meters and shall operate on AC-110 volts. The machines shall be double insulated or grounded. All machines shall be equipped with dollar validators and coin-operated mechanisms with change return, slug rejection, and coin-return features.

3.0 Location, Removal, and Addition of Vending Machines

- 3.1.** As set forth in this agreement, city and Vendor have mutually determined the initial number of vending machines to be installed by Vendor under this agreement, as well as the location of those machines.

4.0 Promotion and Advertising Rights

4.1. No promotion, advertising or merchandising rights of any kind whatsoever are granted to Vendor under this agreement. Vendor shall not display or cause to be displayed any identifying marks connected to its products or services, whether trade/service marked or not, anywhere on District property except as those identifying marks are or may be applied directly on a product.

5.0 Financial Reports

5.1. Financial Reports: Vendor shall provide the city and the designated contact person of each school where vending machines are located with an accurate and truthful report detailing the total sales per month generated from all vending machines at each school location. This report shall be sent with the monthly commission check and shall specify the calculations Vendor used to determine the commission value, as established.

5.2. Additional Monthly Report: Vendor also shall provide the City Business Office with an accurate and truthful monthly report for all machines. This report shall detail sales activity per machine and as an aggregate total. Sales activity shall be distinguished between vending machines and direct delivery sales and further broken down by each product item. This report is due by the second week of the following month to:
_____ [name of city business official].

Appendix C: Point-of-Purchase Traffic Light Poster and Brochure

STOP. RETHINK YOUR DRINK. GO ON GREEN.



Red - Drink Rarely, If At All

- Regular sodas
- Energy or sports drinks
- Fruit drinks



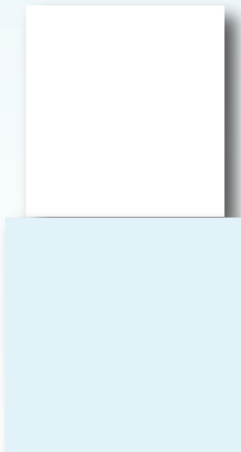
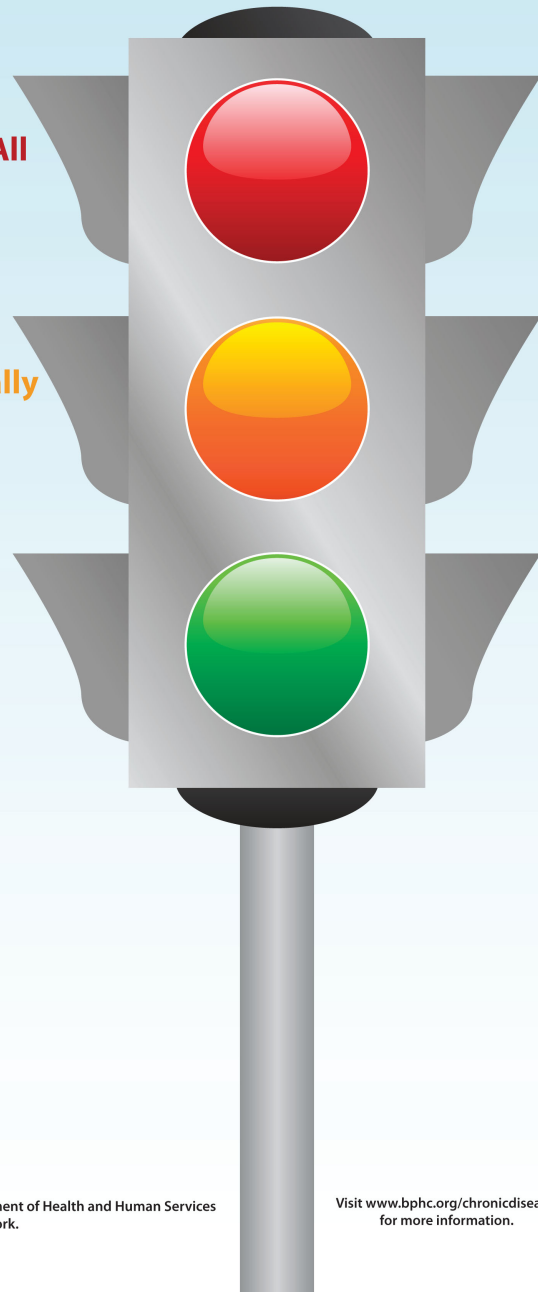
Yellow - Drink Occasionally

- Diet soda
- Low-calorie, low-sugar drinks
- 100% juice



Green - Drink Plenty

- Water
- Seltzer water
- Skim or 1% milk



Building a Healthy Boston
Mayor Thomas M. Menino

Made possible by funding from the US Department of Health and Human Services
through Communities Putting Prevention to Work.

Visit www.bphc.org/chronicdisease
for more information.



**Red: Stop and think!
Drink rarely, if at all.**

Over 12g of sugar per 12 oz

“RED” beverages are high in sugar. Many also have high sodium and/or fat content. Red drinks contain “empty” calories, with little or no nutrients, and can contribute to weight gain and other chronic diseases like Type 2 diabetes and heart disease.

Examples:

- Regular soda
- Energy drinks
- Sports drinks
- Pre-sweetened coffee and tea drinks
- Juice drinks with added sugar
- Whole or 2% milk

**Yellow: A better choice.
Drink occasionally.**

6 to 12g of sugar per 12 oz or contains artificial sweeteners

“YELLOW” beverages have moderate amounts of sugar and sodium, or contain artificial sweeteners. 100% fruit juice and flavored low-fat milk may have more than 12 grams (g) of sugar because they contain natural sugars, but may still be consumed in small portions of 8 oz or less because they contain important nutrients.

Diet and “light” drinks that are artificially sweetened may increase taste preferences for sweet foods and drinks, which contribute to weight gain. Diet drinks can be used as a way to switch from RED choices to GREEN choices.

Examples:

- Diet soda
- Diet iced tea
- 100% fruit juice (*in small portions*)
- Low-calorie sports drinks
- Sweetened soy milk (*in small portions*)
- Flavored 1% milk (*in small portions*)
- Other low-sugar drinks



**Green: The healthiest choice!
Drink plenty.**

0 to 5g of sugar per 12 oz

“GREEN” beverages have no added sugars and artificial sweeteners. These are the healthiest choices, especially tap water. Water hydrates the body, quenches thirst, and supports other bodily functions necessary for overall health. Low-fat milk contains natural sugars and healthy nutrients. It should be consumed in portions that are 8 oz or less.

Examples:

- Water
- Seltzer water
- 1% or skim milk (*in small portions*)
- Unsweetened soy milk (*in small portions*)

What is GO ON GREEN?

Choosing the right beverage is important to maintaining a healthy diet and staying hydrated and energized. This traffic light system is a guide to help you choose healthy beverages. If you're thirsty, go for the green!

What You Drink Makes More Difference Than You Think!

Many people don't realize how much sugar and calories are in common beverages. Sugar-sweetened beverages, like soda and flavored drinks, are now the largest source of added sugar in Americans' diets and can account for a large percentage of a person's daily calorie intake.

Cutting back on RED drinks and substituting them with GREEN drinks can help prevent unhealthy weight gain.

- A 20-ounce (oz) bottle of soda contains about 17 teaspoons of sugar. Drinking one of these every day can lead to about 25 extra pounds of weight gain a year.
- To burn off the additional 250 calories in a 20 oz bottle of soda, you'd have to walk briskly for approximately 60 minutes.

Choosing healthier drinks is an essential step in maintaining a healthy weight and helping to reverse the obesity epidemic.

- Sugary drinks are a major contributor to obesity in youth and adults, which can result in the development of chronic diseases like Type 2 diabetes, heart disease, and cancer.
- In Boston, about 55% of adults are overweight or obese.
- The obesity epidemic is affecting our wallets, too; health costs related to obesity in the United States are estimated at \$147 billion annually.

Read the Label. See What You're Drinking.

Nutrition Facts

Nutrition Facts		Standard Serving	This Package
Serving Size		8 fl oz (240 mL)	20 fl oz (591 mL)
Servings Per Container		2.5	1
Amount per serving		%DV*	%DV*
Calories	100	250	
Total Fat	0g	0%	0%
Sodium	30mg	1%	75mg 3%
Total Carbohydrate	28g	9%	69g 23%
Sugars	28g	69g	
Protein	0g	0g	

Not a significant source of calories from fat, saturated fat, trans fat, cholesterol, dietary fiber, vitamin A, vitamin C, calcium and iron.

*Percent Daily Values (DV) are based on a 2,000-calorie diet.

CARBONATED WATER, HIGH-FRUCTOSE CORN SYRUP, CARAMEL COLOR, PHOSPHORIC ACID, NATURAL FLAVORS, CAFFEINE. CAFFEINE CONTENT: 23mg/8 oz, 57 mg/20 fl oz.

What's in a typical 20 oz bottle of soda?

- 1. Serving Size:** A standard serving size is 8 oz. This 20 oz. soda bottle has 2.5 servings. It's important to look at the Nutrition Facts for the package, not just a single serving, if drinking the whole bottle.
- 2. Calories:** There are 100 calories in one serving and 250 in the bottle. These calories have no nutritional value.
- 3. Sugars:** It's easier to figure out how much sugar is in a drink by changing the grams to teaspoons. Divide the total sugar grams by four (4) to get an approximate number of teaspoons. This bottle contains about 17 teaspoons of sugar (69÷4).
- 4. Ingredients:** In this beverage, the main ingredient after water is high fructose corn syrup. Other common names for sugars are cane syrup, sucrose, and dextrose.

For more information, go to www.bphc.org/chronicdisease

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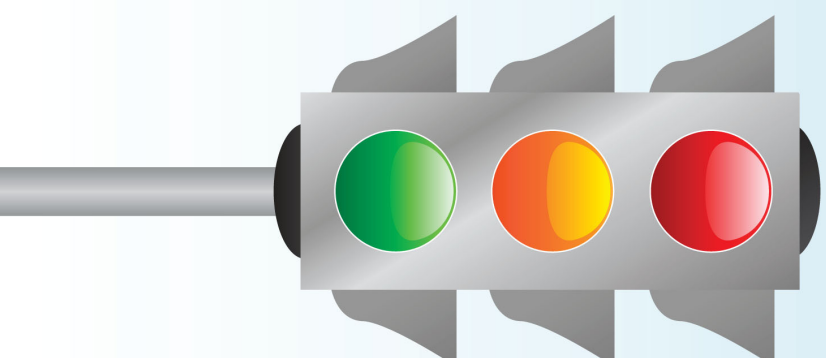




Made possible by funding from the US Department of Health and Human Services through Communities Putting Prevention to Work.

**STOP.
RETHINK
YOUR
DRINK.
GO ON GREEN.**

Steer your health in the right direction by making the smart choice.



Appendix D: Beverage Industry Social Responsibility and Promotion

Soft Drink Industry Overview

Prepared by Cara Wilking

Public Health Advocacy Institute, Northeastern University

www.phaioline.org

Introduction

The United States has the highest per capita rate of carbonated soft drink consumption in the world at 736 eight-ounce servings or 46 gallons per person in 2009.¹ The soft drink industry is dominated by three major companies: The Coca-Cola Company (“Coke”), PepsiCo. (“Pepsi”), and Dr. Pepper Snapple (“DPS”). Soft drink companies produce concentrate and fountain syrup, and are responsible for marketing existing products and developing new products. Bottlers mix concentrate from soft drink companies and mix it with sweeteners and water to produce bottled and canned beverages. The American Beverage Association (“ABA”) is the industry association representing the non-alcoholic beverage industry. While the United States still has the highest per capita consumption of carbonated soft drinks in the world, overall sales of full-sugar carbonated soft drinks have been declining in recent years. In response to this decline in sales, the soft drink industry has reinvigorated its efforts to engage the public via corporate social responsibility tactics designed to rehabilitate the image of its products.

Soft Drink Industry Corporate Social Responsibility

As large corporations, Coke, Pepsi and DPS all undertake corporate social responsibility (CSR) campaigns. Corporate social responsibility generally encompasses a company’s activities and value statements with respect to philanthropy, community, workplace diversity, safety, human rights, and environment. There are various reasons why companies pursue CSR including: organizational values, reaction to threats to transaction costs, brand and competitive positioning, marketing, publicity, and innovation.² Concerns motivating the soft drink industry’s CSR efforts are evident in The Coca-Cola Company’s 2009 Annual Report:

Consumers, public health officials and government officials are becoming increasingly concerned about the public health consequences associated with obesity, particularly among young people. In addition, some researchers, health advocates and dietary guidelines are encouraging consumers to reduce consumption of sugar-sweetened beverages, including those sweetened with

¹ Beverage Digest, *Special Issues: Top-10 CSD Results for 2009* (March 24, 2010), http://www.beverage-digest.com/pdf/top-10_2010.pdf.

² Michael J. Maloni & Michael E. Brown, *Corporate Social Responsibility in the Supply Chain: An Application in the Food Industry*, 68 J. BUS. ETHICS 35, 36 (2006).

HFCS or other nutritive sweeteners. Increasing public concern about these issues; possible new taxes and governmental regulations concerning the marketing, labeling or availability of our beverages; and negative publicity resulting from actual or threatened legal actions against us or other companies in our industry relating to the marketing, labeling or sale of sugar-sweetened beverages may reduce demand for our beverages, which could affect our profitability.

When faced with such public concern, CSR efforts aim at “legitimizing a corporation’s activities and increasing corporate acceptance.”³ Philanthropy and cause-marketing campaigns are key parts of the soft drink industry’s CSR efforts.

Soft Drink Industry Philanthropy

Coke and Pepsi both have corporate foundations that make grants to non-profit organizations and institutions. In 2008, the Coca-Cola Foundation Inc. made over \$36 million in grants to organizations worldwide.⁴ In 2009, the PepsiCo. Foundation, Inc. made \$27.9 million in domestic grants.⁵ In order to receive a grant, applicants must engage in work that meets the stated goals of the foundation, make an application and, once funded, follow the grant guidelines. The Coca-Cola Foundation and the PepsiCo. Foundation are required to disclose grant recipients and total assets and expenditures in order to maintain tax-exempt status.

Soft Drink Industry Cause-Marketing Campaigns

The use of cause-marketing campaigns is a growing trend facilitated by the rise of social networking online. Also referred to as “cause-related marketing,” cause-marketing traditionally has been defined as “a mutually beneficial collaboration between a corporation and a nonprofit in which their respective assets are combined to: create shareholder and social value; connect with a range of constituents (be they consumers, employees, or suppliers); and communicate the shared values of both organizations.”⁶ Cause-marketing is distinct from corporate philanthropy because the corporate funds distributed “are not outright gifts to a nonprofit organization, so they are not treated as tax-deductible charitable contributions.”⁷

The Pepsi Refresh Project is an example of a cause-marketing campaign. Pepsi-Refresh is a program whereby members of the public submit ideas with a funding request and vote on whether or not to fund the concept. For 2010, PepsiCo pledged \$20 million in funds for the Refresh campaign. This amount is distinct from its corporate foundation giving made through the PepsiCo Foundation and, as a marketing expenditure, is not subject to the same public

³ Guido Palazzo & Ulf Richter, *CSR Business as Usual? The Case of the Tobacco Industry*, 61 J. BUS. ETHICS 387, 390 (2005).

⁴ The Coca-Cola Foundation, Inc., 2008 Form 990-PF.

⁵ PepsiCo. Foundation, Inc. 2009 Form 990-PF.

⁶ The Foundation Center, *Frequently Asked Questions*, http://foundationcenter.org/getstarted/faqs/html/cause_marketing.html.

⁷ *Id.*

disclosures required of private foundations. The underlying goal of the Pepsi Refresh cause marketing campaign is to sell more Pepsi products. When asked if Pepsi Refresh has been successful, Melisa Tezanos, Communications Director of PepsiCo Americas Beverages, replied:

Pepsi Refresh has been an overwhelming success. With over 2.8 billion (with a "B"!) earned media impressions, the project exceeded our internal benchmarks early in the year and we've seen an improvement in key brand health metrics. In fact, when Millennials, an important cohort group for Pepsi, know about the Refresh Project their purchase intent goes up.⁸

Ms. Tezanos clearly defines “success” not in terms of work done in the community funded by the program, but rather in terms of increasing the profile of Pepsi products and increasing sales amongst a key demographic. Social media is an important tool in cause-marketing campaigns as it facilitates the sharing of campaign materials that are embedded with product advertising and enable individuals to recruit other individuals to the campaign with relatively little effort.

Ensuring the Integrity of Your Organization’s Health Promotion Efforts

The practical reality is that soft drinks are now for sale in almost every venue, e.g. hospitals, universities, youth centers, and public buildings via vending machines and on-site retail establishments. In addition, corporate philanthropy by the soft drink industry and other private companies provides funding to a number of institutions and organizations that also have an interest in health promotion. While your organization may want to re-examine its traditional arms-length business relationships and donor/recipient relationships, emerging soft drink industry corporate social responsibility efforts that use cause-marketing and public relations tactics require special attention. These campaigns are embedded with product advertising, and often require participants to enlist other participants via social networking online. In addition, cause marketing seeks to build an association between a company’s products and a trusted non-profit organization in order to build its market share. Your organization should consider establishing a policy to help staff identify and distinguish between traditional business relationships, corporate philanthropy and cause-marketing to help guide decision-making around your organization’s participation in cause-marketing campaigns.

⁸ Christie Garton, *Pepsi exec dishes on Pepsi Refresh, future plans for cause marketing*, USA Today (Nov. 5, 2010).

Appendix E: Beverage Industry Marketing

Sugar-sweetened beverage marketing is an enormous and very effective industry. The logos and catch-phrases of the major beverage producers are among the most ubiquitously recognized brands in the United States and worldwide. The top three soda companies spend over \$600 million on advertising in the United States in 2007,⁶¹ and these companies spend hundreds of millions of dollars in other forms of marketing and promotion. Furthermore, communities of color are exposed to more advertising of obesity-promoting activities and food, including sugar-sweetened beverages.⁶²

In conjunction with these marketing strategies, the beverage industry spends millions of dollars to support lobbying efforts to defend its products against policies that might decrease sales or threaten brand loyalty. In 2009, the beverage industry spent over \$40 million on lobbying alone.⁶³ The beverage industry has also organized the formation of such groups such as Americans Against Food Taxes, and www.stopgrocerytaxes.com, which pose as consumer groups to prevent policies that would decrease the sale of beverages such as sugar-sweetened beverages.

Increased consumption of sugar-sweetened beverages in the US is fueled by advertising and the fact that sugar-sweetened beverages are comparatively inexpensive in relation to healthier food and beverage options. Soda companies spend close to \$500 million dollars a year to reach children and adolescents with messages about sugar-sweetened drinks, more than any other industry.⁶⁴

Appendix F: Health Care Healthy Beverage Sample Policy

Health Care Healthy Beverage Sample Policy *Health Care Patient Services Department*

POLICY STATEMENT

In an effort to promote a healthy environment for patients, staff, and visitors, and to serve as a model of health promotion, [Facility Name] will implement a plan to reduce the provision of sugar-sweetened beverages (SSBs) from their Patient Services Department and ultimately eliminate SSBs from patient delivery.

Purpose

To model healthy beverage choices and improve the health of patients under the care of [Facility Name].

Rationale

Between 1980 and 2008, obesity prevalence among US adults doubled^{65,66} and now one out of every three adults is obese.⁶⁷ Americans consume about 250–300 more daily calories today than they did several decades ago. Nearly half of this increase is attributed to increased consumption of sugar-sweetened beverages.⁶⁸ Sugar-sweetened beverages contain large amounts of sugar and offer no nutritional value. Health care facilities have a responsibility to create a healthy environment for patients, staff and the communities they serve by providing food and beverages that support a healthy lifestyle.

Scope of Policy

This policy pertains to all beverages offered to patients, including, but not limited to, meal trays and patient nourishments/snacks. This policy excludes any sugar-sweetened beverages prescribed by the patient's doctor or recommended by a registered dietitian. Employees and visitors will continue to have personal choice of any beverages they purchase outside of the hospital and bring to work (consistent with any existing environmental health and safety regulations).

Defining Sugar Sweetened Beverages

Sugar-sweetened beverages are those that contain caloric sweeteners and include soft drinks ("soda" or "pop"), fruit drinks, sports drinks, tea and coffee drinks, energy drinks, sweetened milk or milk alternatives, and any other beverages to which sugar, typically high fructose corn syrup or sucrose (table sugar), has been added.⁶⁹ Sugar-sweetened beverages may also be referred to as sugary drinks or sugar-loaded drinks.

Appendix G: Tool for Assessment of Beverage Access in City Agencies

For the complete assessment tool, please visit:
<http://www.bphc.org/healthybeverages>

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