

1179

**Testimony in Opposition of SB1179
Re: Sugar Sweetened Beverages Tax**

**LATE
TESTIMONY**

Submitted to the Committee on Health
Wednesday, February 16, 2011
Conference Room 229 at 2:45pm

Dear Chair Green, Vice-Chair Nishihara and
Members of the Committee on Health,

The Maui Chamber of Commerce opposes SB1179 as this bill adds another tax and further reporting and regulation on businesses.

It appears to simply be a way to raise additional funds, justified in the name of supporting social programs. It raises costs for businesses and consumers at a time when neither can afford it and imposes more government rein over people's individual will and choices, in this instance their personal beverage choices.

Our members listed "Reduce the tax burden, no increase in taxes" as their top priority for State law makers and we therefore oppose this bill on that basis. However, we also have a concern with the rationale for its purpose.

This bill would create yet another special fund (which we have other concerns about) and justifies the additional tax for a "Children's Health Promotion Special Fund", to be administered by the State Department of Health, to create programs to address childhood obesity and nutrition. The move would increase the department's scope of work and the cost to taxpayers at a time when we should be reducing the size of government and partnering with nonprofits on such efforts.

Therefore, we oppose this measure and ask that it not move forward.

Thank you for the opportunity to offer testimony.

Sincerely

Pamela Tumpap
President

February 15, 2011

Senator Josh Green, M.D., Chair
Senate Committee on Health

Wednesday, February 16, 2011
Conference Room 229; 2:45 p.m.

Re: SB 1179 - Relating to Taxation

Chair Green, Vice Chair Nishihara, and members of the Committee:

My name is Gary Yoshioka, Vice President/General Manager of The Pepsi Bottling Group of Hawaii ("Pepsi"), testifying in strong opposition to SB 1179, which assesses an unspecified surcharge tax on all soft drinks sold in the state.

While Pepsi does not oppose the notion of general taxation, what we do oppose are discriminatory taxes that single out and penalize a specific product, industry, and its customers. This bill seeks to tax juice drinks, soda and other refreshment beverages. Taxing these consumer products will do little to address the state's budget deficit, let alone serve a greater good when it comes to public health - we are not going to solve the very serious and complex issue of obesity with a discriminatory tax on one consumer good.

The majority of people oppose a tax on their juice drinks, soda and other non-alcoholic beverages. Many of them do not think a tax will solve obesity or address diabetes. And, even more people are averse to paying a penny more for anything during these very difficult economic times.

Furthermore, science shows that a multitude of factors contribute to diseases related to obesity, from genetics to the over consumption of any and all caloric foods, to the lack of exercise in today's modern, sedentary lifestyle.

As our industry continues to produce more zero-calorie, low-calorie and reduced-portion products, consumers are taking advantage of and enjoying these new better-for-you options.

In closing, any proposal to impose a tax on beverages in Hawaii would be an unfair initiative aimed directly at beverage consumers and local jobs. We know that levying a new tax will adversely affect jobs and our industry in Hawaii - we experienced this impact when the Deposit Beverage Container Program was implemented. Beverage companies across the state directly employ, and indirectly impact, thousands of jobs. It is important to note that the soft drink industry continues to be one of the few remaining manufacturers of consumer products in the State. We employ local people.

On behalf of The Pepsi Bottling Group of Hawaii, thank you for the opportunity to testify.

Aloha United Way

200 N. Vineyard Blvd., Suite 700
Honolulu, Hawaii 96817-3938
Telephone (808) 536-1951
Fax (808) 543-2222
auw.org



Aloha United Way

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Cover Sheet

Testifying Agency: Aloha United Way
Susan Doyle, President & CPO
Norm Baker, Vice President Community Building

Senate Committee on Health
Sen. Josh Green, M.D., Chair
Sen. Clarence K. Nishihara, Vice Chair

Wednesday, February 16, 2011 at 2:45 P.M.
Conference Room 229

SB 1179, Tax and Children's Fund

Aloha United Way

200 N. Vineyard Blvd., Suite 700
Honolulu, Hawaii 96817-3938
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auw.org



Aloha United Way

LATE TESTIMONY

February 16, 2011

Senate Committee on Health
Senator Josh Green, M.D., Chair
Sen. Clarence K. Nishihara, Vice Chair
Wednesday, February 16, 2011 at 2:45 P.M.
Conference Room 229

SB 1179: Testimony in Support

Dear Chair Green, Vice Chair Nishihara and Committee Members:

Aloha United Way, as a member of One Voice for Hawaii's Children, supports the intent of SB 1179 which establishes a sustainable source of funding for programs that support our children's health and well-being. This is needed to ensure continuity in these vital efforts in lean economic times.

If possible, Aloha United Way recommends broadening of the uses for the funds. While obesity is certainly an issue that needs to be addressed, there are many other children's health issues that also warrant attention. Since the Early Learning Council was created by the Legislature to oversee the State's early learning system which includes the healthy development of our children, Aloha United Way recommends that the funds be expended as directed by the Early Learning Council.

SB 1179 provides an excellent financial foundation on which to start rebuilding the comprehensive set of programs needed to ensure each child is healthy and ready to learn when they begin their formal education.

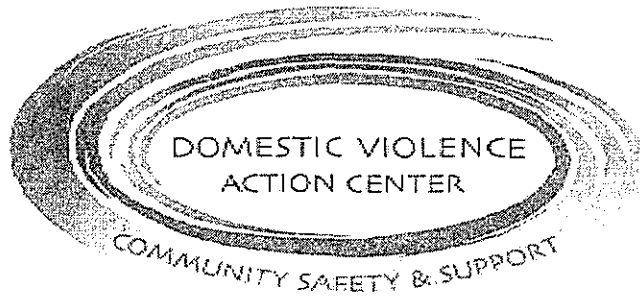
Sincerely,



Susan Doyle
President & Chief Professional Officer

GIVE. ADVOCATE. VOLUNTEER. LIVE UNITED.

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TESTIMONY



February 16, 2011

FROM: Nanci Kreidman, M.A.
Domestic Violence Action Center

TO: Senator Josh Green, M.D., Chair
Senator Clarence K. Nishihara, Vice Chair
Members of the Committee

RE: **S.B. 1179 Support**
Hearing Date: Wednesday, February 16, 2011, 2:45pm, Conf. Rm #229

Aloha and good afternoon. Please accept this testimony in support of the tax on sweetened beverages.

Good health is a goal for all of us. Poor health costs all of us. The use of deterrents has been proven to be motivation in many arenas. Perhaps it will inspire good decisions related to consumption of foods and drink.

The dedication of funds raised through the tax will certainly help offset some of the enormous health care costs and budget shortfalls we face today.

Thank you for your favorable action on this bill.

P. O. Box 3198 Honolulu, HI 96801-3198
Oahu Helpline:: 808 531-3771 Toll-free: 800 690-6200 Administration: 808 534-0040 Fax 808 531-7228
dvac@stoptheviolence.org www.stoptheviolence.org





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TESTIMONY**

TESTIMONY

SB 1179

RELATING TO SOFT DRINK TAX

Testimony Presented Before

The Committee on Health

February 16, 2011 @ 2:45pm in Conference Room 229

by

Kanoe Nāone, Ph.D. Chief Executive Officer

Aloha, as CEO for INPEACE and a member of the Early Learning Council I **SUPPORT** the overall intent of this bill. I specifically support the use of the tax to fund the statewide early childhood system in addition to Department of Health obesity programs.

INPEACE annually serves more than 2,500 children, parents and community members through its early childhood and workforce development programs statewide. With more than 16 years of experience providing high-quality, culturally-relevant and developmentally appropriate services to young children, INPEACE understands the critical role the early years (ages 0-8 years) play in the overall development of children. Research continually advocates for adequate, *quality* child-rearing supports in place for infants, toddlers, and preschoolers to ensure successful future outcomes for them. These supports are currently disparate, underfunded, and in need of a strong and comprehensive governance structure in the state of Hawai'i.

The funds from the soft drink tax will help provide a steady and reliable funding stream for statewide health and early childhood programs. The Early Learning Council serves as a governance structure crucial to the systematic management and allocation of funds. The Early Learning Council (formed out of the Early Learning Educational Task Force from Act 259 established in 2006), has worked tirelessly and diligently over the past four years to develop a comprehensive, effective, and sustainable statewide early childhood system that aims at the development of the whole child and involves cross-collaboration between DOE, DOH and DHS. Protocol and procedures have been established that not only ensure leveraged resources and eliminates duplication of services, but builds on currently existing systems and policies. In order for the cross-collaborative efforts to be effective, however, the Early Learning Council requires funds to move the work forward. Funds will be used to finance critical quality early childhood education programs and service necessary to the healthy development and whole education of Hawai'i's keiki. Furthermore, the soda tax bill will have the additional effect of raising awareness, promoting healthy lifestyles and tackle high rates of obesity that exist in the communities we serve.

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TO: <http://www.capitol.hawaii.gov/emailtestimony>

To: Sens. Josh Green, M.D., Chair & Clarence Nishihara, Vice Chair
Senate Committee on Health

Hearing Info: **Senate Committee on Health**
Wednesday February 16, 2:45pm
Conference Room 229

From: Annette Taeko Mente, private citizen

RE: Testimony In Support of **SB1179** Relating to Taxation

Aloha Chair Green and Members of the Committee,

I wish to commend the Chair and members for hearing this important bill and offer testify in strong support of SB1179. I work as a planner for the Department of Health, Family Health Services Division, but testify today as a private citizen concerned about the growing epidemic of obesity and related modern chronic diseases plaguing our society. We are all too familiar with that fact that chronic diseases related to poor diet cost the country billions of health care dollars each year. Monday's hearing regarding Medicaid benefit cuts, make that all too clear.

More than any category of foods, rigorous scientific studies (that have not been funded by the beverage industry) have shown that consumption of sugar sweetened beverage (SSBs) is associated with poor diet, increasing rates of obesity, and risk for diabetes. These links are particularly strong for children. For children, an extra can or glass of SSB consumed per day increased their chance of becoming obese by 60%.

SSBs have little or no nutritional value, are often inexpensive and in increasingly abundant supply. A substantial increase has occurred in the consumption of SSBs since the 1970s, now averaging 46 gallons per person per year. U.S. per capita consumption of calories from SSBs doubled between 1997-2002 across all age groups. The percentage of beverage calories from SSBs consumed by children age 2-18 years increased, while the percentage of milk decreased. In the mid-1990s the intake of SSBs surpassed that of milk.

Research also suggests that people compensate less well for calories that come in beverages compared to calories in solid food. If you eat candy or a Big Mac and fries, you might compensate with healthier choices later; but would probably would ignore the empty calories and sugar consumed in a 16oz fruit punch or 2 cans of soda. Thus, the large increase in calories from drinks is a huge concern.

Due to this alarming trend toward over consumption of SSBs, the U.S. Department of Agriculture and the American Heart Association recommend limiting SSBs to no more than 4-6 ounces per day of for children 1-6 years and no more than 8-12 ounces per day for children 7-18 years.

The Centers' for Disease Control recommends decreasing the consumption of SSBs as one of six evidence-based strategies for preventing and reducing overweight and obesity. Experience from taxing tobacco and alcohol have proven to be highly effective in reducing consumption of these products. Thus, the passage of SB 1179 would be an effective step toward reducing SSB consumption; excess, empty calories; and help to reduce rates of obesity.

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A tax on SSBs is not a panacea to address obesity rates, but it is an effective strategy identified in the State's Physical Activity and Nutrition Plan. Companies that produce SSBs have done little to promote responsible consumption of their products. A tax on SSBs could help to create programs and campaigns to educate the public about the impacts of SSBs and to help the public make healthier choices especially for children.

Moreover, the tax sends a message to the food industry that consumers need healthier options. The overwhelming number on unhealthy, highly processed, convenience food products flooding the market is unconscionable. While the trend is changing, the fact that grocery stores now dedicate an entire aisle to SSBs alone is evidence that poor health choices far outweigh healthy ones. It's time to level the playing field and give consumers an equal chance to select from an array of healthy, affordable, and appealing products. The tax can help encourage that industry trend.

Thank you for all your good work on behalf of the people of Hawai'i and apologize for not providing testimony to support of SB1289. I was disappointed to see the provisions for SSBs were deleted from the bill. I look forward to hearing of your support for SB1179 to support this critical, evidence based tool to help address the growing trend of obesity.

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green1 - Karen

From: Kimberly.Y.Chang@hawaii.gov
Sent: Tuesday, February 15, 2011 4:36 PM
To: HTHTestimony
Cc: Michael.Ng@hawaii.gov; DBFLeg.DIR@hawaii.gov
Subject: Testimony for SB 1179; 2/16/11; 2:45 p.m.
Attachments: SB1179_BUF_02-16-11_HTH.pdf

Please confirm receipt by replying to this e-mail.

Thank you.



L & L FRANCHISE, INC.
931 University Avenue, Suite 202
Honolulu, Hawaii 96826
Tel. (808) 951-9888; Facsimile (808) 951-0888

**LATE
TESTIMONY**

February 15, 2011

Testimony in **Opposition to SB1179** – HTH – 2/16/11 – 2:45 p.m. – Rm. 229

Chair Green, Vice Chair Nishihara, and Members of the Committee on Health

My name is Bryan Andaya, COO of L & L Drive-Inn/Hawaiian Barbecue. We respectfully **oppose SB1179** that proposes to assess a new sugary beverage fee. This new fee will further discourage price-sensitive consumers from eating at our restaurants or trim their purchases in such a way that our sales would be negatively affected.

In this difficult economy, consumers have already started to eat out less. This additional burden at this inopportune time would further exacerbate the economic challenges the restaurant industry currently faces. With over 50 locations employing about 700 dedicated people, many of whom immigrants, we want to continue to provide opportunities for franchisees and employees to earn a living.

Many well established local restaurants with solid reputations for serving quality food have shuttered. With each restaurant that closes, employees are laid off and forced to seek unemployment benefits from the state, the owners of these restaurants either default on their business loans or file bankruptcy, the space occupied is left vacant with no rents being generated, and suppliers including small local farmers lose yet another customer.

We understand the State's fiscal challenges, but placing this burden on consumers will have the opposite effect as already nervous customers trim back. Other alternatives to generating revenue must be found. New taxes usually trickle down to higher prices, but this tax directly and palpably affects price, by telling the consumer that they now have to pay extra to enjoy their favorite beverage. Singling out soft drinks and other beverages for a new tax is discriminatory and regressive, hitting the hardest those who can least afford it. Middle- and lower- income families are struggling as it is now to make ends meet. The people who stretch dollars are hard-working people who value their hard-earned dollars.

For there to be true economic recovery, small business must feel confident to reinvest and create jobs. This tax would be a severe blow to restaurants, which are overwhelmingly small business.

For these reasons, the we **oppose SB1179**.

Very truly yours,

Bryan P. Andaya
Vice President & Chief Operating Officer
bryan@hawaiianbarbecue.com

LATE TESTIMONY



YALE RUDD CENTER
FOR FOOD POLICY & OBESITY

309 Edwards St.
New Haven, CT 06520

February 15, 2011

Hawai'i Legislature
Committee on Health
Senator Josh Green, Chair
Senator Clarence Nishihara, Vice-Chair

Dear Chairman Green, Vice-Chairman Nishihara, and members of the committee,

Thank you for the opportunity to present testimony regarding **Senate Bill 1179**, relating to taxation of sugar-sweetened beverages (SSBs). Hawai'i is among seven other states which have filed similar legislation to date. They include Arizona, Connecticut, Mississippi, New Mexico, Oregon, Tennessee and Vermont.

The Rudd Center for Food Policy and Obesity seeks to improve the world's diet, prevent obesity, and reduce weight stigma. The Center conducts targeted research to inform policy makers and the public on ways to maximize the impact of policy on public health. We have written extensively about the public health benefits of an SSB tax as a strategy to prevent obesity, and would like to present some evidence-based information which will address issues and questions that may arise when considering a tax on sugary beverages.

Sugar-sweetened beverages have become a staple of today's American diet. These drinks are inexpensive, in abundant supply, and appeal to our taste for sugar. They are heavily marketed, especially to children, often using celebrities and sports stars. *More than for any category of foods*, rigorous scientific studies have shown that consumption of soft drinks is associated with poor diet, increasing rates of obesity, and risk for diabetes.ⁱ It is for this reason that sugar-sweetened beverages have been targeted for taxes.

There has been a substantial increase in consumption of soft drinks:

- From 1988 to 2004, the percentage of U.S. adults who consumed SSBs increased from 58% to 63%, and SSBs were the largest source of beverage calories.ⁱⁱ
- In that same time period, SSB consumption increased in youth ages 2-19, with soda contributing approximately 67% of all SSB calories among adolescents.ⁱⁱⁱ
- Soft drink consumption is associated with obesity among school children^{iv} and increased body weight and energy intake in the population.^v

There is evidence that prices affect purchases and consumption:

- Soft drink consumption can be curtailed by increasing the price of soft drinks.^{vi}
- Based on November 2008 price increase and volume sales information on Coca Cola and Pepsi sales in the U.S.,^{vii} demand for soda is "elastic" (-1.15) meaning that

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- a 10% tax would reduce consumption by approximately 11.5%.
- An excise tax of one cent per ounce would lead to a minimum reduction of 10% in calorie consumption, which is sufficient for weight loss.^{viii}

Taxing alcohol and cigarettes has proved to be highly successful in reducing consumption.

- Every 10 percent increase in the real price of cigarettes results in a 3-5 percent reduction in overall consumption, a 3-5 percent reduction among young adult smokers, and a 6-7 percent reduction among children.^{ix}
- A 2009 systematic review of 112 studies of alcohol taxes on price effects establishes that increasing prices of alcohol is an effective means to reduce drinking.^x

Opponents will assert that such taxes can't be compared to those on cigarettes and alcohol because the latter two clearly have adverse consequences for non-users (for example, second-hand smoke and drunk driving accidents, called "externalities"). The obesity epidemic also has externalities. It has resulted in overall significant health care costs, including higher medical, disability, and insurance premium costs, which affect all Americans. For example, in Hawaii alone, in 2000, obesity-related medical expenditures were estimated to be \$290 million, \$120 million of which was spent in the taxpayer-funded Medicaid and Medicare programs.^{xi}

Obesity in the US has reached epidemic proportions and can no longer be considered an issue of personal responsibility. It is the duty of government to protect the public health by instituting policies which will help people be responsible. A tax on SSBs would encourage people to think twice about spending their food dollars on empty calories, yet ultimately allow them to make their own decisions about their food purchases.

There is public support for taxes that are earmarked for obesity prevention:

- A March 2010 poll found that 56% of California voters supported a proposed tax on soft drinks to raise funds for childhood obesity prevention; 60% of low-income voters supported such a tax; and 66% of Latino voters supported it.^{xii}
- In a 2010 poll, 52% of Mississippi voters supported a one cent per ounce tax on SSBs to fund childhood obesity prevention programs.^{xiii}

Opponents will also assert that a tax will threaten jobs. The same argument was used to try to derail tobacco taxes, and proved to be untrue. The beverage industry can focus production on its diverse array of low- and no-calorie beverages, thereby maintaining its workforce for production and distribution of those beverages.

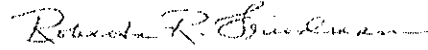
Obesity and related chronic diseases, which cost the country millions of health care dollars each year, are complex problems which must be addressed with multi-faceted strategies. Taxing soft drinks to raise revenue for a children's health promotion fund may be an important complement to Hawai'i's ongoing work on this issue.

Thank you for allowing us to submit this testimony.

Sincerely,



Kelly D. Brownell, PhD.
Director



Roberta R. Friedman, ScM
Director of Public Policy

- i For a synopsis of scientific studies on the relationship between consumption, adult obesity, child obesity, and other health risks, see http://www.yaleruddcenter.org/what_we_do.aspx?id=275.
- ii Bleich, SN, Wang, YC, Wang, Y, and Gortmaker SL. Increasing consumption of sugar-sweetened beverages among US adults: 1988-1994 to 1999-2004. *Am J Clin Nutr*. 2009; 89: 372-81.
- iii Wang YC, Bleich SN, and Gortmaker SL. Increasing caloric contribution from sugar-sweetened beverages and 100% fruit juices among US children and adolescents, 1988-2004. *Pediatrics*. 2008; 121(6), e1604-14.
- iv Ludwig, DS, Peterson KE, and Gortmaker, SL. 2001. Relation between consumption of sugar-sweetened drinks and childhood obesity: a prospective, observational analysis. *The Lancet* 357, no. 9255 (February 17): 505-508.
- v Vartanian, LR, Schwartz M, and Brownell K. 2007. Effects of Soft Drink Consumption on Nutrition and Health: A Systematic Review and Meta-Analysis. *Am J Public Health* 97, no. 4 (April 1): 667-675.
- vi Yen, ST., Biing-Hwan Lin., Smallwood, DM, and Andrews, M. 2004. Demand for nonalcoholic beverages: The case of low-income households. *Agribusiness* 20, no. 3: 309-321. doi:10.1002/agr.20015.
- vii Beverage Digest, November 21, 2008, pp 3-4.
- viii Brownell, KD, Farley, T, Willett, WC, Popkin, BM, Chaloupka, FJ, , Thompson, JW, Ludwig, DS. (2009). The public health and economic benefits of taxing sugar-sweetened beverages. *New Eng J Med*, 361, 1599 - 1606.
- ix Chaloupka, FJ. 1999. Macro-social influences: The effects of prices and tobacco-control policies on the demand for tobacco products. *Nicotine & Tobacco Research* 1, no. 1 supp 1: 105; Tauras, JA. 2004. Public policy and smoking cessation among young adults in the United States. *Health Policy* 68, no. 3 (June): 321-332.
- x Wagenaar, AC., Salois, MJ, and Komro, KA.. 2009. Effects of beverage alcohol price and tax levels on drinking: a meta-analysis of 1003 estimates from 112 studies. *Addiction* 104, no. 2: 179-190.
- xi Finkelstein, EA., Fiebelkorn, IC., and Wang, Guijing. 2004. State-level estimates of annual medical expenditures attributable to obesity. *Obesity Research*. 12 (1); 18-24.
- xii Soda Tax Poll, Field Research Corporation. Conducted March 9-15, 2010 by telephone, for the California Center for Public Health Advocacy. <http://www.yaleruddcenter.org/resources/upload/docs/what/policy/SSBTaxes/CCPHAPollSodaTax3.10.pdf>
- xiii Global Strategy Group poll, conducted January 28-February 1, 2010 for Mississippi. http://www.yaleruddcenter.org/resources/upload/docs/what/policy/SSBTaxes/Mississippi_SodaTaxPoll_1.10.pdf

green1 - Karen

From: mailinglist@capitol.hawaii.gov
Sent: Tuesday, February 15, 2011 6:36 PM
To: HTHTestimony
Cc: jfarnsworth@hawaii.rr.com
Subject: Testimony for SB1179 on 2/16/2011 2:45:00 PM

**LATE
TESTIMONY**

Testimony for HTH 2/16/2011 2:45:00 PM SB1179

Conference room: 229
Testifier position: support
Testifier will be present: No
Submitted by: JoAnn Farnsworth
Organization: Individual
Address:
Phone:
E-mail: jfarnsworth@hawaii.rr.com
Submitted on: 2/15/2011

Comments:

I am in support of this bill to create a sustainable source of funding for early childhood health and wellness.



Hearing date:
Wednesday,
February 16,
2011,
2:45 p.m.
Senate Health
Committee
Room 229

To: Senator Josh Green, Chair
Senator Clarence Nishihara, Vice Chair
SENATE COMMITTEE ON HEALTH

From: Elisabeth Chun, Executive Director
Good Beginnings Alliance

Date: Wednesday, February 16, 2011, 2:45 p.m.
Conference Room 229

Subject: **SB1179: Establishes a tax on the sale of sugar-sweetened beverages in the State. Creates a children's health promotion special fund.**

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The Good Beginnings Alliance is a policy and advocacy organization focused on Hawaii's youngest children and their families. We strive to ensure a nurturing, safe and healthy development for all children from pre-birth to age eight. We believe all children deserve safe and supportive environments that meet their needs as they grow and develop. Good Beginnings is also a member of One Voice for Hawaii's Children (www.onevoiceforchildren.net), an alliance of organizations and individuals committed to the development of an effective and equitably funded early childhood system that gives all young children the opportunity to arrive at kindergarten safe, healthy and ready to succeed. The following information is provided to help you in your decision-making process.

During the past three years, our state's challenged economy has resulted in significant cuts to direct services that are part of Hawaii's comprehensive early childhood system (e.g., Healthy Start, Child Care Subsidies, Preschool Open Doors). We are seeing the results of these cuts to early childhood programs in decreased school readiness for our public school kindergarten students. Per the Hawaii State School Readiness Assessment for School Year 2010-2011, less than 1 out of 4 kindergarten classes had most of their students displaying the necessary pre-literacy and pre-math skills to succeed in school. More information on this issue can be found in our issue brief entitled, "Hawaii's Young Children Not Ready to Succeed" (http://www.goodbeginnings.org/images/uploads/GBA_Issue_Brief_May_2010.pdf).

We must invest in our keiki to ensure the long-term well-being of Hawaii's citizens. A dedicated and sustainable funding stream is required to support a comprehensive early childhood system for Hawaii. Research shows the strong linkage between the nurturing of a healthy child and the long term positive educational, health, and life outcomes of an adult. This proposed sugar-sweetened beverage tax would be an appropriate and critical funding source for the Early Learning Council as they support comprehensive early childhood programs that ensure our keiki are safe, healthy and ready to succeed.

We are hopeful that more can be done for our young children and their families this year. Mahalo for your consideration.

For more information contact: Good Beginnings Alliance; phone: 531-5502;
lchun@goodbeginnings.org

LIFE
TESTIMONY

Samuel N.
and Mary
CASTLE
FOUNDATION

Hearing date:
Wednesday,
February 16,
2011, 2:45 p.m.,
Senate Healthy
Committee
Room 229

To: Senator Josh Green, Chair
Senator Clarence Nishihara, Vice Chair
SENATE COMMITTEE ON HEALTH

From: Alfred Castle, Executive Director, Treasurer
Samuel N. and Mary Castle Foundation

Date: Wednesday, February 16, 2011, 2:45 p.m.
Conference Room 229

Subject: **SB1179: Establishes a tax on the sale of sugar-sweetened beverages in the State. Creates a children's health promotion special fund.**

My name is Al Castle, and I serve the Executive Director, Treasurer of the Samuel N. and Mary Castle Foundation and as the Co-Chair of the Keiki Funders Network, an alliance of private philanthropic foundations in Hawaii supporting quality early childhood education.

Hawaii was one of the first countries to create a progressive kindergarten education for a multi-cultural, multi-racial population. During the 1890's, private funders, primarily women, worked collegially to privately fund kindergartens modeled on the progressive educational pedagogy of American philosopher John Dewey and George H. Mead at the University of Chicago. In 1943, the Territorial Department of Education responded to the community by adopting kindergartens and providing a more comprehensive tax supported K-12 system--in the midst of World War II.

Today, Hawaii again faces significant challenges in taking the next step forward by establishing quality early childhood education for all of Hawaii's keiki. Our foundation and others have worked hard to "soften the blow" to our families with young children through grants to a number of early childhood programs. However, a sustainable funding source is needed if Hawaii is to create a comprehensive early childhood system for the benefit of our keiki.

Other states accomplished this through lotteries, alcohol/tobacco taxes, and other means. Scientific research has shown the strong linkage between the nurturing of a healthy child and the long term positive educational, health, and life outcomes of an adult. We believe this proposal is an appropriate and critical funding source for the Early Learning Council as they support comprehensive early childhood programs for our keiki. To ensure all Hawaii's children receive access to quality early education, it will take substantial public and private support. Mahalo for your consideration.

green1 - Karen

**LATE
TESTIMONY**

From: mailinglist@capitol.hawaii.gov
Sent: Tuesday, February 15, 2011 7:28 PM
To: HTHTestimony
Cc: gfarstrup@msn.com
Subject: Testimony for SB1179 on 2/16/2011 2:45:00 PM .

Testimony for HTH 2/16/2011 2:45:00 PM SB1179

Conference room: 229
Testifier position: support
Testifier will be present: No
Submitted by: Greg and Pat Farstrup
Organization: Individual
Address:
Phone:
E-mail: gfarstrup@msn.com
Submitted on: 2/15/2011

Comments:

This sounds like a sensible proposal for improving the health of our neighbors and friends, as well as for raising some income to help meet the deficit.

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Samuel N.
and Mary
CASTLE
FOUNDATION

Hearing date:
Wednesday,
February 16,
2011, 2:45 p.m.,
Senate Healthy
Committee
Room 229

To: Senator Josh Green, Chair
Senator Clarence Nishihara, Vice Chair
SENATE COMMITTEE ON HEALTH

From: Alfred Castle, Executive Director, Treasurer
Samuel N. and Mary Castle Foundation

Date: Wednesday, February 16, 2011, 2:45 p.m.
Conference Room 229

Subject: **SB1179: Establishes a tax on the sale of sugar-sweetened beverages in the State. Creates a children's health promotion special fund.**

My name is Al Castle, and I serve the Executive Director, Treasurer of the Samuel N. and Mary Castle Foundation and as the Co-Chair of the Keiki Funders Network, an alliance of private philanthropic foundations in Hawaii supporting quality early childhood education.

Hawaii was one of the first countries to create a progressive kindergarten education for a multi-cultural, multi-racial population. During the 1890's, private funders, primarily women, worked collegially to privately fund kindergartens modeled on the progressive educational pedagogy of American philosopher John Dewey and George H. Mead at the University of Chicago. In 1943, the Territorial Department of Education responded to the community by adopting kindergartens and providing a more comprehensive tax supported K-12 system--in the midst of World War II.

Today, Hawaii again faces significant challenges in taking the next step forward by establishing quality early childhood education for all of Hawaii's keiki. Our foundation and others have worked hard to "soften the blow" to our families with young children through grants to a number of early childhood programs. However, a sustainable funding source is needed if Hawaii is to create a comprehensive early childhood system for the benefit of our keiki.

Other states accomplished this through lotteries, alcohol/tobacco taxes, and other means. Scientific research has shown the strong linkage between the nurturing of a healthy child and the long term positive educational, health, and life outcomes of an adult. We believe this proposal is an appropriate and critical funding source for the Early Learning Council as they support comprehensive early childhood programs for our keiki. To ensure all Hawaii's children receive access to quality early education, it will take substantial public and private support. Mahalo for your consideration.

TO: Members of the Committee on Health

FROM: Natalie Iwasa
Honolulu, HI 96825
808-395-3233

**LATE
TESTIMONY**

HEARING: 2:45 p.m. Wednesday, February 16, 2011

SUBJECT: SB1179 Sugar-Sweetened Beverages Tax - **OPPOSED**

Aloha Chair Green, Vice Chair Nishihara and Committee Members,

Thank you for allowing me to provide testimony in opposition to SB 1179 which would place a fee on certain sugar-sweetened beverages, create a special fund and adds to the burden of businesses in our state.

While the intention of this bill is worthwhile (creating a fund to fight obesity in children), I oppose it because it increases the administrative burden on businesses. I find the requirement for retailers to pay the fee on behalf of distributors, if the distributor does not pay it, particularly onerous.

Please vote "no" on this measure.

HONOLULU, HAWAII 96813
STATE CAPITOL

The Senate



green1 - Karen

From: jenybissell@hawaii.rr.com
Sent: Tuesday, February 15, 2011 10:46 PM
To: HTHTestimony
Subject: SB1179 is up for hearing by the Senate Health Committee tomorrow Wed 2/16 Hearing notice

LATE
TESTIMONY

Dear Honorable Members of the Senate Health Committee,

Thank you for the opportunity to provide written testimony as a private citizen. My name is Jeny Bissell and I am a Registered Nurse for the State Department of Health in the Maui District Health Office. I have been blessed with many collaborative partnerships opportunities while living and working on Maui for many years to ensure that our children and their families are assured availability of and access to protective health and social services. Yes, there are challenges and I am encouraged by the community and your constituents to persevere; and to continue to push the agenda on children's and families health promotion and prevention not just in the Tri-isle County of Maui but also in our entire state.

Please help us champion the promotion of children's health by moving and keeping SB1179 alive. Please support SB1179. It will be a win-win, cost savings, the policy will afford science and evidence based processes/strategies in children's (and across the lifespan) health promotion and prevention, and more importantly is the right thing to do.

I would like to share with you the following research based data:

1. Childhood Obesity. For 4 and 5 year olds entering Kindergarten, 28.5% are overweight or at risk for overweight (HI Med J 2006). According to the Health Status of Children in Hawaii: 2007 National Survey of Children's Health, "40% of children 10-17 years of age in Hawaii that are below Federal Poverty Level (FPL) are overweight/obese."
2. Parenting. According to the New England Journal of Medicine, this may be the first generation where parents will outlive their children. Parents and caregivers of children can be role models and practice healthy eating and physical activity and limiting consumption of sugar-sweetened beverages.
3. Excessive Sugar. According to the American Journal of Clinical Nutrition, "The weight of epidemiologic and experimental evidence indicates that a greater consumption of sugar sweetened beverages is associated with weight gain and obesity."
4. Childhood Diabetes. Diabetes used to be an "old person" disease, but not anymore as childhood obesity rates are on the rise. According to the New England Journal of Medicine (2009), "The consumption of sugar-sweetened beverages has been linked to risks for obesity, diabetes, and heart disease."
5. Dental Disease. There are a variety of studies that link dental disease to soft drink consumption. For neighbor island residents, many have to fly to Oahu to treat dental carries as access to oral health care continues to be a challenging issue.

Thank you for your time and I truly appreciate all that you do.

Mahalo, Dios ti agngina, Maraming Salamat
HONOLULU, HAWAII 96813

Jeny Bissell
Private Citizen
South Maui

The Senate

