

SB 2385

Measure Title: RELATING TO BEVERAGES FOR CHILDREN.

Report Title: Sugar-Sweetened Beverages Restriction; Child Care Facilities

Description: Establishes restrictions on sugar-sweetened beverages and other beverages served in child care facilities.

Companion:

Package: None

Current Referral: HMS, CPH

Introducer(s): BAKER, Harimoto, Kidani, Tokuda

DAVID Y. IGE
GOVERNOR



RACHAEL WONG, DrPH
DIRECTOR

PANKAJ BHANOT
DEPUTY DIRECTOR

STATE OF HAWAII
DEPARTMENT OF HUMAN SERVICES
P. O. Box 339
Honolulu, Hawaii 96809-0339

February 1, 2016

MEMORANDUM

TO: The Honorable Suzanne Chun Oakland, Chair
Senate Committee on Human Services

FROM: Rachael Wong, DrPH, Director

SUBJECT: **SB 2385 – RELATING TO BEVERAGES FOR CHILDREN**

Hearing: Tuesday, February 2, 2016; 1:15 p.m.
Conference Room 016, State Capitol

DEPARTMENT'S POSITION: The Department of Human Services (DHS) appreciates the intent of this bill to address childhood obesity and dental caries, and provides comments as similar federal regulations already exist.

PURPOSE: The purpose of this measure is to establish additional restrictions on sugar-sweetened beverages and other beverages served in child care facilities.

The Department of Human Services (DHS) strongly supports the early investment in children and their development, which includes promoting healthy living, nurturing well-being, and a whole-family approach. We do this through collaboration and within federal guidelines. Department regulations for licensed and registered child care homes and facilities already require that programs that provide meals and snacks must comply with the requirements of the United States Department of Agriculture (USDA) Child and Adult Care Food Program (CACFP), even if the programs are not participating in the USDA CACFP reimbursements. In the current

USDA CACFP requirements, milk and 100% fruit or vegetable juice are the only allowable fluids to be served to children in care. Any other type of beverage is not served to children in care by a licensed or registered child care home or facility.

The USDA CACFP issued proposed regulations in early 2015 and allowed comments to be submitted until May 2015. No additional updates have been provided by the USDA regarding the proposed regulations. In the proposed revisions for the CACFP, the USDA was still open to allowing flavored milk to be served for children ages 2-4 years with no more than twenty-two (22) grams of sugar per eight (8) fluid ounces. The proposed USDA revisions did not limit the amount of 100% fruit or vegetable juice to four (4) ounces served per day, as proposed by this measure. Therefore, if this measure is passed as currently drafted, the resulting law would be more restrictive than the USDA's federal food program regarding fruit or vegetable juice servings, even if the CACFP requirements were amended as proposed in early 2015. Also, it is unclear whether this measure considers flavored milk to be a sugar-sweetened beverage. If flavored milk is considered a sugar-sweetened beverage by Hawaii law, this would be another inconsistency with the USDA CACFP requirements which may lead to confusion for providers participating in the USDA CACFP reimbursements.

The Department is also concerned that Hawaii legislative mandates may not allow for sufficient flexibility to amend policies and practices in the future when revisions to federal guidelines or research findings are issued.

As currently drafted, this measure may have other unintended consequences. As noted in the preamble, in 2014 the estimate of 65,000 children under the age of 6 in Hawaii in need of child care is a concern as the current inventory of licensed child care facilities and registered family care homes only meets a little more than half of the needed capacity.

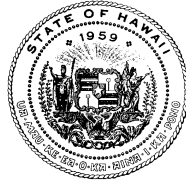
In fiscal year 2015, the Department monitored 623 licensed child care facilities and 535 registered family child care homes with a total of 35,332 child care slots. A significant number of children are in unregulated child care settings. The measure as drafted places additional statutory requirements on top of four sets of administrative rules that licensed child care facilities and registered family child care homes already are required to follow.

DHS would also like to note that some licensed and registered child care homes and facilities choose not to provide meal service, and the child's parents or guardians are responsible for providing the meals and beverages for the child. There is no exception in this measure that exempts beverages provided by the child's parents or guardians from meeting the requirements of this proposal, and this would put an additional burden on providers to be penalized for parental choice. One consideration is adding additional resources for prevention outreach, training or incentives on beverage choices to parents, their communities, support networks, and child care providers in all settings that promote and reinforce the establishment of practices of healthy living in early childhood and for whole families.

The Department also respectfully requests the Committee consider that DHS legislative proposals HB 2343 and SB 2872 seeks authority to conduct monitoring inspections of non-licensed or registered child care providers who are caring for children receiving DHS child care subsidies, as mandated by recent amendments to the Child Care and Development Block Grant Act of 2014, Public Law 113-186. The anticipated administrative requirement of conducting monitoring inspections for this additional population of child care providers, which will number over 1,000, is a priority for the limited resources of the DHS child care licensing staff, along with on-going regulation of existing licensed and registered child care homes and facilities.

To implement this proposed measure concurrently with the changes required by DHS legislative proposals HB 2343 and SB 2872, DHS estimates that an additional \$96,177 in general funds will be needed for four (4) FTE positions and other related administrative costs for fiscal year 2016-2017 and \$129,000 in general funds for fiscal years 2017 – 2018 and beyond.

Thank you for the opportunity to provide comments on this bill.



STATE OF HAWAII
DEPARTMENT OF HEALTH
P. O. Box 3378
Honolulu, HI 96801-3378
doh.testimony@doh.hawaii.gov

**Testimony COMMENTING on SB2385
RELATING TO BEVERAGES FOR CHILDREN**

SENATOR SUZANNE CHUN OAKLAND
SENATE COMMITTEE ON HUMAN SERVICES

Hearing Date: February 2, 2016

Room Number: 016

1 **Fiscal Implications:** The Department of Health (DOH) defers to the Department of Human
2 Services on the fiscal implications, recognizing that this measure will add to their regulatory
3 requirements and necessitate resources above current levels. The DOH stands ready to
4 collaborate and offer assistance to our sister agency in their important role in serving families
5 and children.

6 **Department Testimony:** The Department of Health offers comments on SB2385. The purpose
7 of this bill is to develop standards for beverages served in child care settings in an effort to help
8 prevent childhood obesity and dental caries. This bill would ensure that only the healthiest
9 beverages are served in child care settings.

10 Hawaii's child care settings can play an integral role in children's health and
11 development by providing a healthy food environment because many children spend large
12 amount of time in these settings. Many states, including California and Maryland, already
13 require that healthier drinks, such as water to replace sugar-sweetened beverages and
14 overconsumption of fruit juice in child care settings.¹

15 The concepts in this bill align with national recommendations for reducing the
16 consumption of sugar-sweetened beverages. The Division of Physical Activity, Nutrition and
17 Obesity (DNPAO) at the Centers for Disease Control and Prevention (CDC) recommends

¹ Robert Wood Johnson Foundation. RWJF Statement on Proposed Revisions to the Child and Adult Food Program. Available at: <http://www.rwjf.org/en/library/articles-and-news/2015/04/rwjf-statement-child-and-adult-care-food-program.html>

1 decreasing the consumption of sugar-sweetened beverages (SSBs) as an evidence-based strategy
2 for preventing and reducing overweight and obesity. To stem childhood obesity, *Caring for Our*
3 *Children: National Health and Safety Performance Standards* recommend that early care and
4 education programs avoid serving all concentrated sweets such as candy, sodas, sweetened
5 drinks, fruit nectars, and flavored milk, and not serving fruit juice to children younger than 12
6 months.

7 Today in Hawaii, more than one in four kindergarteners are overweight or obese and
8 have one of the highest rates of dental caries (cavities) in the nation.² There is a strong
9 correlation between weight and the consumption of SSBs like soda. In children each 12-ounce
10 soft drink consumed daily, increases their odds of becoming obese by 60%.³ The average
11 number of decayed teeth among 5-9 year olds in Hawaii at 3.9 is double the national average of
12 1.9.⁴ According to one study, among young children, aged 1 through 5 years, consumption of
13 SSBs was associated with an 80-100% increased risk of dental caries.⁵ Fruit juice has been
14 shown among children aged 2 to 4 years, to contribute roughly 100 calories to a daily diet,⁶ and
15 drinking too much juice may be associated with obesity, diarrhea and tooth decay.⁷

16 Thank you for the opportunity to provide comments.

17 **Offered Amendments:** None.

² Hau`Oli Mau Loa Foundation. Strategic Directions for the Children of Hawaii. Available at: <http://hauolimauloa.org/wp-content/uploads/2013/09/HML-StrategicDirections.pdf>

³ Ludwig DS, Peterson KE, Gortmaker SL. Relation between consumption of sugar-sweetened drinks and childhood obesity: a prospective, observational analysis. *Lancet*. 2001;357:505-8.

⁴ Hau`Oli Mau Loa Foundation. Strategic Directions for the Children of Hawaii. Available at: <http://hauolimauloa.org/wp-content/uploads/2013/09/HML-StrategicDirections.pdf>

⁵ Marshall TA, Levy SM, Broffitt B, Warren JJ, Eichenberger-Gilmore JM, Burns TL, Stumbo PJ. Dental caries and beverage consumption in young children. *Pediatrics*. 2003;112 (3 Pt 1):e184-e191.

⁶ Marshall TA, Levy SM, Broffitt B, Warren JJ, Eichenberger-Gilmore JM, Burns TL, Stumbo PJ. Dental caries and beverage consumption in young children. *Pediatrics*. 2003;112 (3 Pt 1):e184-e191.

⁷ Wojcicki JM, Heyman MB. Reducing Childhood Obesity by Eliminating 100% Fruit Juice. *American Journal of Public Health*: September 2012, Vol. 102, No. 9, pp. 1630-1633.



Testimony in Support of SB 2385, “RELATING TO BEVERAGES FOR CHILDREN”

The American Heart Association **supports** SB 2385.

Sugary drinks are an unnecessary part of the American diet that decades ago were just a treat and are now guzzled at alarming rates. From sports drinks to sodas to fruit-flavored drinks, today’s children are drinking their age in these sugary drinks each week. Today’s children derive 10% to 15% of their total calories from sugary beverages. Reducing consumption will improve rates of obesity, diabetes and heart disease.

Sugary beverages represent the single largest of sugar in the American diet. An average 20-oz. sugary beverage such as soda contains more than 16 teaspoons of sugar.

Too much added sugar from soda and sports drinks can overload critical organs over time, leading to serious diseases such as heart disease, stroke, high blood pressure, type 2 diabetes and dental erosion, pancreatic cancer, and metabolic syndrome. Sugar-sweetened beverages are also associated with a risk of weight gain and obesity.

Drinking just one 12-ounce soda every day increases a child’s odds of becoming obese by 60 percent, and doubles the risk of dental carries. While most sugary beverages contain little or no nutritional value, soft drink consumption is also associated with lower intakes of milk (therefore calcium and other nutrients).

Childhood obesity has more than tripled in the past 30 years, and obese children are at least twice as likely as non-obese children to become obese adults. **1 in 3 children entering kindergarten in Hawaii are overweight or obese.**

Consuming sugar through beverages also fools your body. When you consume sugar as a beverage you don’t feel as full. It’s easy to down 10 or more teaspoons of sugar in a single 12-oz. soda. **The American Heart Association recommends no more than 6 teaspoons of added sugar per day for women and no more than 9 teaspoons per day for men.** Thus, one average 12-oz. can of sugary beverage can put you over the daily maximum recommended amounts of added sugar.

Overweight and obesity account for approximately \$147 billion in annual health care costs nationally, or 9 percent of all medical spending. **An estimated \$470 million is spent annually on obesity-related health problems in Hawaii. Roughly half of those costs may be paid by Medicare and Medicaid, meaning taxpayers absorb the costs for health care associated with obesity treatment.**

The AHA urges your **SUPPORT** for **SB 2385** as part of a comprehensive approach to reducing and reversing Hawaii’s overweight and obesity epidemic.

Respectfully submitted,

Donald B. Weisman
Hawaii Government Relations Director

*“Building healthier lives,
free of cardiovascular
diseases and stroke.”*

life is why™ es por la vida™ 全为生命™

Please remember the American Heart Association in your will.





HPCA

HAWAI'I PRIMARY CARE ASSOC

Senate Committee on Human Services

The Hon. Suzanne Chun Oakland, Chair

The Hon. Gil Riviere, Vice Chair

Testimony on Senate Bill 1385

Relating to Beverages for Children

Submitted by Dustin Stevens, Public Affairs and Policy Director

February 2, 2016, 1:15 pm, Room 016

The Hawai'i Primary Care Association, which represents community health centers in Hawai'i, supports Senate Bill 1385, establishing restrictions on sugar-sweetened beverages and other beverages served in child care facilities.

There is little doubt that a growing health crisis exists in Hawaii regarding obesity, aided in no small part by the consumption of sugar sweetened beverages. The average person in the state consumes more than 170 liquid calories every day, almost all without any nutritional value. This consumption does not come without consequences, as the average annual obesity related medical expenditures in the state exceed \$470M.

Research has displayed that taste preferences and eating habits are formed in early childhood years, and this bill would aid that by requiring the serving of healthy beverages in child care facilities. In Hawaii, close to 65K children attended some form of child care, spending on average thirty hours per week in non-parental care. By limiting what drinks are served, an enormous number of calories and their related health risks could be avoided.

In addition, the decreased consumption of such beverages would have a positive effect on oral health outcomes. In Hawaii, the average number of decayed teeth among children ages 5-9 is 3.9, more than double the national average. This bill would help alleviate that by limiting the amount of sugared liquids children are coming in contact with.

For these reasons we support Senate Bill 2385 and thank you for the opportunity to testify.



Date: February 1, 2016

To: The Honorable Suzanne Chun Oakland, Chair
The Honorable Gil Riviere, Vice Chair
Members of the Senate Committee on Human Services

From: Jessica Yamauchi, Executive Director, Hawai'i Public Health Institute

Re: **Strong Support for SB 2385, Relating to Beverages for Children**

Hrg: February 2, 2016 at 1:15 pm at Capitol Room 016

Thank you for the opportunity to offer testimony in strong support of SB 2385, Relating to Beverages for Children.

The Hawai'i Public Health Institute (HIPHI) supports and promotes policy efforts to create a healthy Hawai'i. HIPHI weaves silos into working relationships as an effective network, ensuring that we come together across sectors to advance collaboration and innovation in public health and work towards making Hawai'i the healthiest place on earth.

SB 2385 will develop standards for beverages served in childcare facilities in an effort to help prevent childhood obesity and dental caries. The concept of this bill is based on national recommendations for reducing the consumption of sugar-sweetened beverages. The Division of Physical Activity, Nutrition and Obesity (DNPAO) at the Centers for Disease Control and Prevention (CDC) recommends decreasing the consumption of sugar-sweetened beverages as one of six evidence-based strategies for preventing and reducing overweight and obesity.

Today in Hawai'i, more than one in four kindergartners are overweight or obese and Hawai'i spends an estimated \$470,000,000 annually on obesity-related medical costs. The children of Hawai'i also have one of the highest rates of dental caries (cavities) in the nation. The average number of decayed teeth among 5-9 year-olds in Hawai'i is 3.9, double the national average. These figures underscore the need to provide healthy food and beverages to ensure that the children of Hawai'i can make healthy choices to prevent obesity and dental decay.

In Hawai'i current childcare facility requirements have specific nutrition regulations, however, they do not restrict facilities from serving sugar-sweetened beverages or excessive amounts of fruit juice.

Research demonstrates that taste preferences and lifelong healthy habits are formed in early childhood years. Consuming sugar-sweetened beverages at an early age may perpetuate that preference throughout life. There is overwhelming evidence on the link between obesity and the consumption of sugar-sweetened beverages like soda. In children, each 12 oz. soft drink consumed daily increases their odds of becoming obese by 60%. Research linking sugar-

sweetened beverages to dental caries is also strong. Among young children, aged 1 through 5, consumption of sugar-sweetened beverages was associated with an 80-100% increased risk of dental caries.

The fruit juice beverage standards in this bill are consistent with recommendations from the American Academy of Pediatrics, as well as the 2005 Dietary Guidelines for Americans. Fruit juice restrictions have been established because fruit juice is also full of sugar and among children aged 2 to 4 years, 100% juice contributes roughly 100 calories to a daily diet. Drinking too much juice may be associated with obesity, diarrhea and tooth decay.

Our child care settings can play an integral role in children's health and development by providing a healthy food environment because many children spend a large amount of time in early child care settings. More than 11 million children under the age of 6 in the United States spend an average of 30 hours per week in non-parental childcare settings. In 2014, close to 65,000 children in Hawai'i under the age of 6 potentially were in need of child care.

Many states, including California and Maryland, already require that healthier drinks, such as water, replace sugar-sweetened beverages and the over-consumption of fruit juice in child care settings. HIPHI urges you to support SB 2385 to protect our children's health by ensuring that only healthy beverages are served in child care settings and as a part of a comprehensive approach to reducing and reversing Hawai'i's obesity epidemic.

Thank you for the opportunity to provide testimony.

A handwritten signature in black ink that reads "Jessica Yamauchi". The signature is written in a cursive, flowing style.

Jessica Yamauchi, MA
Executive Director



250 Vineyard Street
Honolulu, Hawaii 96813
(808) 521-9531

FamilyProgramsHawaii.com

TO: Senator Suzanne Chun Oakland, Chair
Senator Gil Riviere, Vice Chair
Committee on Human Services

HEARING: Tuesday, February 2, 2016
1:15 PM
Conference Room 016

FROM: Judith Wilhoite
Family Advocate
It Takes An Ohana

RE: SB2385 – Relating to BEVERAGES FOR CHILDREN

Thank you for the opportunity to testify. I am the Family Advocate for Family Program Hawaii's *It Takes An Ohana* (ITAO) program and a resource caregiver. We strongly support SB 2385.

SB2385 will help protect the health of Hawaii's most precious resource – her keiki. Consider these facts come from Harvard School of Public Health:

- Sugary drinks are a major contributor to the obesity epidemic.
- People who drink sugary beverages do not feel as full as if they had eaten the same calories from solid food, and studies show that people consuming sugary beverages don't compensate for their high caloric content by eating less food.
- One out of three children in the United States are overweight or obese, and the nation spends an estimated \$190 billion a year treating obesity-related health conditions.
- Rising consumption of sugary drinks has been a major contributor to the obesity epidemic.
- Children and youth in the US averaged 224 calories per day from sugary beverages in 1999 to 2004—nearly 11% of their daily calorie intake. (15) From 1989 to 2008, calories from sugary beverages increased by 60% in children ages 6 to 11, from 130 to 209 calories per day, and the percentage of children consuming them rose from 79% to 91%.
- Studies in children and adults have found that reducing sugary drink consumption can lead to better weight control among those who are initially overweight.

What our children drink makes more of a difference than one would think. Let's help keep our children healthy and strong by supporting SB 2385.

We help kids

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Executive Director, Leslie Lam

February 1, 2016

Senate Committee on Human Services
The Honorable Senator Suzanne Chun Oakland, Chair
Hawaii State Capitol, Conference Room 016
Honolulu, Hawaii 96813

Dear Senator Chun Oakland and Members of the Senate Committee on Human Services:

On behalf of the American Diabetes Association (ADA) we are asking for your support of SB 2385. The ADA supports and helps advocate for such policies since they align with our focus on the prevention of type 2 diabetes, through policies that address physical activity and nutrition.

Diabetes is one of the most serious, common, and costly diseases in Hawaii affecting nearly 600,000 individuals with prediabetes or diabetes. The total cost for diabetes in Hawaii is well over \$1.5 billion posing a major public health problem. The ADA believes that if we are to truly make strides against this devastating disease, we must fund diabetes research and programs, improve health care, and support proven prevention measures.

ADA does recommend and has supported policies promoting nutritious school lunches, healthy vending machine options, to decrease consumption of sugar-sweetened beverages and increased opportunities for physical education and physical activity in schools as part of our overall prevention work. We support the goals of good nutrition and physical activity for children and commend the Hawaii legislature in considering legislation to help Stop prediabetes and diabetes and improve the health outcomes for a healthy Hawaii!

Please feel free to contact me to discuss your concerns or questions. I am available at llam@diabetes.org or 808.947.5979.

Sincerely,



Leslie Lam, Executive Director
American Diabetes Association





Hawaii
Children's Action Network
Building a unified voice for Hawaii's children

February 2, 2016

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Address

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P: (808) 531-5502

To: Senator Suzanne Chun Oakland, Chair
Senator Gil Riviere, Vice Chair
Senate Committee on Human Services

From: Deborah Zysman, Executive Director
Hawaii Children's Action Network

Re: **SB 2385 – Relating to Beverages for Children - Support**
Hawaii State Capitol, Room 016 – February 2, 2016 – 1:15 P.M.

On behalf of Hawaii Children's Action Network (HCAN), formerly Good Beginnings Alliance, we are writing in support of SB 2385, Relating to Beverages for Children.

HCAN is committed to improving lives and being a strong voice advocating for Hawai'i's children. Last fall, HCAN convened input in person and online from more than 50 organizations and individuals that came forward to support or express interest for a number of issues affecting children and families in our state that resulted in the compilation of 2016 Hawai'i Children's Policy Agenda, which can be accessed at <http://www.hawaii-can.org/2016policyagenda>.

In Hawai'i, more than one in four kindergartners are overweight or obese. As a state, we spend an estimated \$470 million annually on obesity-related medical costs. Hawai'i's children also have one of the highest rates of dental caries (cavities) in the nation, double the national average.

(Bill#) is intended to develop standards for beverages served in childcare facilities in an effort to help prevent childhood obesity and dental caries. While current childcare facility requirements have specific nutrition requirements in place, this bill is intended strengthen requirements focusing on prevention.

These figures underscore the need to provide healthy food and beverages to ensure that the children of Hawai'i can make healthy choices to prevent obesity and dental decay.

For these reasons, HCAN respectfully requests that the committee vote to pass this bill.

From: [Lesli Yano](#)
To: [HMS Testimony](#)
Subject: Support for SB 2385, Relating to Beverages for Children
Date: Monday, February 01, 2016 9:48:00 AM

To: The Honorable Suzanne Chun Oakland, Chair
The Honorable Gil Riviere, Vice Chair
Members of the Senate Committee on Human Services

Hrg: Senate Committee on Human Services, February 2, 2016, 1:15 pm, Room 016

Re: Support for SB 2385, Relating to Beverages for Children

Thank you for the opportunity to offer testimony in support of SB 2385, Relating to Beverages for Children.

This bill will develop standards for beverages served in childcare facilities in an effort to help prevent childhood obesity and dental decay. SB 2385 will ensure that only the healthiest beverages are served in childcare settings.

Today in Hawai'i, more than one in four kindergartners are overweight or obese and Hawai'i spends an estimated \$470,000,000 annually on obesity-related medical costs. Hawaii's children also have one of the highest rates of dental caries (cavities) in the nation. The average number of decayed teeth among 5-9 year-olds in Hawai'i is 3.9, double the national average. These figures underscore the need to provide healthy food and beverages to help the children of Hawai'i avoid obesity and dental decay.

In Hawai'i current childcare facility requirements have specific nutrition regulations, however, they do not restrict facilities from serving sugar-sweetened beverages or excessive amounts of fruit juice.

Research demonstrates that taste preferences and lifelong healthy habits are formed in early childhood years. Consuming sugar-sweetened beverages at an early age may perpetuate that preference throughout life. There is overwhelming evidence on the link between obesity and the consumption of sugar-sweetened beverages like soda. In children, each 12 oz. soft drink consumed daily increases their odds of becoming obese by 60%. Research linking sugar-sweetened beverages to dental cavities is also strong. Among young children, aged 1 through 5, consumption of sugar-sweetened beverages was associated with an 80-100% increased risk of dental decay.

The fruit juice beverage standards in this bill are consistent with recommendations from the American Academy of Pediatrics, as well as the 2005 Dietary Guidelines for Americans. Fruit juice restrictions have been established because fruit juice is also full of sugar and among children aged 2 to 4 years, 100% juice contributes roughly 100 calories to a daily diet. Drinking too much juice may be associated with obesity, diarrhea and tooth decay.

Our childcare settings can play an integral role in children's health and development by providing a healthy food environment because many children spend a large amount of time in early childcare settings. More than 11 million children under the age of 6 in the United States spend an average of 30 hours per week in non-parental childcare settings. In 2014, close to 65,000 children in Hawai'i under the age of 6 potentially were in need of child care.

Many states, including California and Maryland, already require that healthier drinks, such as water, replace sugar-sweetened beverages and the over-consumption of fruit juice in child care settings. I ask you to support SB 2385 to protect our children's health by ensuring that only healthy beverages are served in child care settings and as a part of a comprehensive approach to reducing and reversing Hawaii's obesity epidemic.

Thank you for the opportunity to provide testimony.

Lesli Yano

1778 Ala Moana Blvd 812
Honolulu, HI 96815

From: mailinglist@capitol.hawaii.gov
To: [HMS Testimony](#)
Cc: mshimokawa@pcmah.com
Subject: Submitted testimony for SB2385 on Feb 2, 2016 13:15PM
Date: Friday, January 29, 2016 10:21:07 AM

SB2385

Submitted on: 1/29/2016

Testimony for HMS on Feb 2, 2016 13:15PM in Conference Room 016

| Submitted By | Organization | Testifier Position | Present at Hearing |
|---------------------|---------------------|---------------------------|---------------------------|
| Malia Shimokawa, MD | Individual | Support | No |

Comments: As a pediatrician, obesity medicine specialist and mother, I am writing in full support of this measure that would greatly limit access to sugar-sweetened beverages for our most vulnerable population, children. By restricting SSB from being served in day care centers this would also serve as a powerful example for parents to mirror this in their homes. It is medically shown that eliminating/limiting SSB in children not only leads to healthier weight and minimizes medical co-morbidities such as diabetes and heart disease, these healthy habits and taste preferences lead to healthier adults. I commend the authors of this bill for this effort
Respectfully, Malia Shimokawa, MD Board-Certified, Pediatrics Board-Certified, Obesity Medicine Medical Director, NEW Keiki (weight management) Program, Kapiolani Medical Center for Women and Children Pediatrics, Pearl City Medical Associates

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

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From: [Cynthia P Chow](#)
To: [HMS Testimony](#)
Subject: Support for SB 2385, Relating to Beverages for Children
Date: Monday, February 01, 2016 4:18:45 PM

To: The Honorable Suzanne Chun Oakland, Chair
The Honorable Gil Riviere, Vice Chair
Members of the Senate Committee on Human Services

Hrg: Senate Committee on Human Services, February 2, 2016, 1:15 pm, Room 016

Re: Support for SB 2385, Relating to Beverages for Children

Thank you for the opportunity to offer testimony in support of SB 2385, Relating to Beverages for Children.

This bill will develop standards for beverages served in childcare facilities in an effort to help prevent childhood obesity and dental decay. SB 2385 will ensure that only the healthiest beverages are served in childcare settings.

Today in Hawai'i, more than one in four kindergartners are overweight or obese and Hawai'i spends an estimated \$470,000,000 annually on obesity-related medical costs. Hawaii's children also have one of the highest rates of dental caries (cavities) in the nation. The average number of decayed teeth among 5-9 year-olds in Hawai'i is 3.9, double the national average. These figures underscore the need to provide healthy food and beverages to help the children of Hawai'i avoid obesity and dental decay.

In Hawai'i current childcare facility requirements have specific nutrition regulations, however, they do not restrict facilities from serving sugar-sweetened beverages or excessive amounts of fruit juice.

Research demonstrates that taste preferences and lifelong healthy habits are formed in early childhood years. Consuming sugar-sweetened beverages at an early age may perpetuate that preference throughout life. There is overwhelming evidence on the link between obesity and the consumption of sugar-sweetened beverages like soda. In children, each 12 oz. soft drink consumed daily increases their odds of becoming obese by 60%. Research linking sugar-sweetened beverages to dental cavities is also strong. Among young children, aged 1 through 5, consumption of sugar-sweetened beverages was associated with an 80-100% increased risk of dental decay.

The fruit juice beverage standards in this bill are consistent with recommendations from the American Academy of Pediatrics, as well as the 2005 Dietary Guidelines for Americans. Fruit juice restrictions have been established because fruit juice is also full of sugar and among children aged 2 to 4 years, 100% juice contributes roughly 100 calories to a daily diet. Drinking too much juice may be associated with obesity, diarrhea and tooth decay.

Our childcare settings can play an integral role in children's health and development by providing a healthy food environment because many children spend a large amount of time in early childcare settings. More than 11 million children under the age of 6 in the United States spend an average of 30 hours per week in non-parental childcare settings. In 2014, close to 65,000 children in Hawai'i under the age of 6 potentially were in need of child care.

Many states, including California and Maryland, already require that healthier drinks, such as water, replace sugar-sweetened beverages and the over-consumption of fruit juice in child care settings. I ask you to support SB 2385 to protect our children's health by ensuring that only healthy beverages are served in child care settings and as a part of a comprehensive approach to reducing and reversing Hawaii's obesity epidemic.

Thank you for the opportunity to provide testimony.

Cynthia P Chow

46-369 Haiku Road
D-6
Kaneohe, HI 96744

From: [Jayson O'Donnell](#)
To: [HMS Testimony](#)
Subject: Support for SB 2385, Relating to Beverages for Children
Date: Monday, February 01, 2016 4:15:47 PM

To: The Honorable Suzanne Chun Oakland, Chair
The Honorable Gil Riviere, Vice Chair
Members of the Senate Committee on Human Services

Hrg: Senate Committee on Human Services, February 2, 2016, 1:15 pm, Room 016

Re: Support for SB 2385, Relating to Beverages for Children

Thank you for the opportunity to offer testimony in support of SB 2385, Relating to Beverages for Children.

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Thank you for the opportunity to provide testimony.

Jayson O'Donnell

3311 Campbell Ave
Honolulu, HI 96815

From: [Cynthia P Chow](#)
To: [HMS Testimony](#)
Subject: Support for SB 2385, Relating to Beverages for Children
Date: Monday, February 01, 2016 3:38:22 PM

To: The Honorable Suzanne Chun Oakland, Chair
The Honorable Gil Riviere, Vice Chair
Members of the Senate Committee on Human Services

Hrg: Senate Committee on Human Services, February 2, 2016, 1:15 pm, Room 016

Re: Support for SB 2385, Relating to Beverages for Children

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Thank you for the opportunity to provide testimony.

Cynthia P Chow

46-369 Haiku Road
D-6
Kaneohe, HI 96744

From: [Michele Nihipali](#)
To: [HMS Testimony](#)
Subject: Support for SB 2385, Relating to Beverages for Children
Date: Monday, February 01, 2016 1:15:51 PM

To: The Honorable Suzanne Chun Oakland, Chair
The Honorable Gil Riviere, Vice Chair
Members of the Senate Committee on Human Services

Hrg: Senate Committee on Human Services, February 2, 2016, 1:15 pm, Room 016

Re: Support for SB 2385, Relating to Beverages for Children

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Thank you for the opportunity to provide testimony.

Michele Nihipali

54-074 Kamehameha Hwy. # A
54-074 A Kam Hwy
Hauula, HI 96717

From: [Maria Moreno - Chow](#)
To: [HMS Testimony](#)
Subject: Support for SB 2385, Relating to Beverages for Children
Date: Monday, February 01, 2016 12:54:07 PM

To: The Honorable Suzanne Chun Oakland, Chair
The Honorable Gil Riviere, Vice Chair
Members of the Senate Committee on Human Services

Hrg: Senate Committee on Human Services, February 2, 2016, 1:15 pm, Room 016

Re: Support for SB 2385, Relating to Beverages for Children

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Thank you for the opportunity to provide testimony.

Maria Moreno - Chow

548 Uluaa st.
Kailua, HI 96734

From: [Christopher La Chica](#)
To: [HMS Testimony](#)
Subject: Support for SB 2385, Relating to Beverages for Children
Date: Monday, February 01, 2016 12:33:56 PM

To: The Honorable Suzanne Chun Oakland, Chair
The Honorable Gil Riviere, Vice Chair
Members of the Senate Committee on Human Services

Hrg: Senate Committee on Human Services, February 2, 2016, 1:15 pm, Room 016

Re: Support for SB 2385, Relating to Beverages for Children

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Thank you for the opportunity to provide testimony.

Christopher La Chica

Mililani, HI 96789

From: [Curtis Palmer](#)
To: [HMS Testimony](#)
Subject: Support for SB 2385, Relating to Beverages for Children
Date: Monday, February 01, 2016 12:03:29 PM

To: The Honorable Suzanne Chun Oakland, Chair
The Honorable Gil Riviere, Vice Chair
Members of the Senate Committee on Human Services

Hrg: Senate Committee on Human Services, February 2, 2016, 1:15 pm, Room 016

Re: Support for SB 2385, Relating to Beverages for Children

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Thank you for the opportunity to provide testimony.

Curtis Palmer

45-615 Puuluna Pl
Kaneohe, HI 96744

From: [Marilyn Gagen](#)
To: [HMS Testimony](#)
Subject: Support for SB 2385, Relating to Beverages for Children
Date: Monday, February 01, 2016 11:42:18 AM

To: The Honorable Suzanne Chun Oakland, Chair
The Honorable Gil Riviere, Vice Chair
Members of the Senate Committee on Human Services

Hrg: Senate Committee on Human Services, February 2, 2016, 1:15 pm, Room 016

Re: Support for SB 2385, Relating to Beverages for Children

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Thank you for the opportunity to provide testimony.

Marilyn Gagen

59-398 Ka Nani Drive
N/A
Kamuela, HI 96743

From: [Sandy Barr Rivera](#)
To: [HMS Testimony](#)
Subject: Support for SB 2385, Relating to Beverages for Children
Date: Monday, February 01, 2016 11:29:01 AM

To: The Honorable Suzanne Chun Oakland, Chair
The Honorable Gil Riviere, Vice Chair
Members of the Senate Committee on Human Services

Hrg: Senate Committee on Human Services, February 2, 2016, 1:15 pm, Room 016

Re: Support for SB 2385, Relating to Beverages for Children

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Thank you for the opportunity to provide testimony.

Sandy Barr Rivera

45-476 Ilima Street
Box 1561
Honokaa, HI 96727

From: [Karyn Leisz-Foley](#)
To: [HMS Testimony](#)
Subject: Support for SB 2385, Relating to Beverages for Children
Date: Monday, February 01, 2016 11:26:16 AM

To: The Honorable Suzanne Chun Oakland, Chair
The Honorable Gil Riviere, Vice Chair
Members of the Senate Committee on Human Services

Hrg: Senate Committee on Human Services, February 2, 2016, 1:15 pm, Room 016

Re: Support for SB 2385, Relating to Beverages for Children

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Thank you for the opportunity to provide testimony.

Karyn Leisz-Foley

260 Hookipa Road
Kapaa, HI 96746

From: [Peiqi Ruan](#)
To: [HMS Testimony](#)
Subject: Support for SB 2385, Relating to Beverages for Children
Date: Monday, February 01, 2016 11:12:39 AM

To: The Honorable Suzanne Chun Oakland, Chair
The Honorable Gil Riviere, Vice Chair
Members of the Senate Committee on Human Services

Hrg: Senate Committee on Human Services February 2, 2016, 1:15 pm, Room 016

Re: Support for SB 2385, Relating to Beverages for Children

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The fruit juice beverage standards in this bill are consistent with recommendations from the American Academy of Pediatrics, as well as the 2005 Dietary Guidelines for Americans. Fruit juice restrictions have been established because fruit juice is also full of sugar and among children aged 2 to 4 years, 100% juice contributes roughly 100 calories to a daily diet. Drinking too much juice may be associated with obesity, diarrhea and tooth decay.

Our childcare settings can play an integral role in children's health and development by providing a healthy food environment because many children spend a large amount of time in early childcare settings. More than 11 million children under the age of 6 in the United States spend an average of 30 hours per week in non-parental childcare settings. In 2014, close to 65,000 children in Hawai'i under the age of 6 potentially were in need of child care.

Many states, including California and Maryland, already require that healthier drinks, such as water, replace sugar-sweetened beverages and the over-consumption of fruit juice in child care settings. I ask you to support SB 2385 to protect our children's health by ensuring that only healthy beverages are served in child care settings and as a part of a comprehensive approach to reducing and reversing Hawaii's obesity epidemic.

Thank you for the opportunity to provide testimony.

Peiqi Ruan

3009 Ala Makahala Pl 1505
Honolulu, HI 96818

From: [Kathryn Braun](#)
To: [HMS Testimony](#)
Subject: Support for SB 2385, Relating to Beverages for Children
Date: Monday, February 01, 2016 11:01:37 AM

To: The Honorable Suzanne Chun Oakland, Chair
The Honorable Gil Riviere, Vice Chair
Members of the Senate Committee on Human Services

Hrg: Senate Committee on Human Services, February 2, 2016, 1:15 pm, Room 016

Re: Support for SB 2385, Relating to Beverages for Children

Thank you for the opportunity to offer testimony in support of SB 2385, Relating to Beverages for Children.

This bill will develop standards for beverages served in childcare facilities in an effort to help prevent childhood obesity and dental decay. SB 2385 will ensure that only the healthiest beverages are served in childcare settings.

Today in Hawai'i, more than one in four kindergartners are overweight or obese and Hawai'i spends an estimated \$470,000,000 annually on obesity-related medical costs. Hawaii's children also have one of the highest rates of dental caries (cavities) in the nation. The average number of decayed teeth among 5-9 year-olds in Hawai'i is 3.9, double the national average. These figures underscore the need to provide healthy food and beverages to help the children of Hawai'i avoid obesity and dental decay.

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Thank you for the opportunity to provide testimony.

Kathryn Braun

625 Iolani Ave #504
Honolulu, HI 96813

From: [Michael Kellar](#)
To: [HMS Testimony](#)
Subject: Support for SB 2385, Relating to Beverages for Children
Date: Monday, February 01, 2016 11:00:12 AM

To: The Honorable Suzanne Chun Oakland, Chair
The Honorable Gil Riviere, Vice Chair
Members of the Senate Committee on Human Services

Hrg: Senate Committee on Human Services, February 2, 2016, 1:15 pm, Room 016

Re: Support for SB 2385, Relating to Beverages for Children

Thank you for the opportunity to offer testimony in support of SB 2385, Relating to Beverages for Children.

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Many states, including California and Maryland, already require that healthier drinks, such as water, replace sugar-sweetened beverages and the over-consumption of fruit juice in child care settings. I ask you to support SB 2385 to protect our children's health by ensuring that only healthy beverages are served in child care settings and as a part of a comprehensive approach to reducing and reversing Hawaii's obesity epidemic.

Thank you for the opportunity to provide testimony.

Michael Kellar

435 Haleloa Place, Apt. E
Honolulu, HI 96821

From: [Nicole Kerr](#)
To: [HMS Testimony](#)
Subject: Support for SB 2385, Relating to Beverages for Children
Date: Monday, February 01, 2016 10:56:26 AM

To: The Honorable Suzanne Chun Oakland, Chair
The Honorable Gil Riviere, Vice Chair
Members of the Senate Committee on Human Services

Hrg: Senate Committee on Human Services, February 2, 2016, 1:15 pm, Room 016

Re: Support for SB 2385, Relating to Beverages for Children

Thank you for the opportunity to offer testimony in support of SB 2385, Relating to Beverages for Children.

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Thank you for the opportunity to provide testimony.

Nicole Kerr

520 N. Kalaheo
Kailua, HI 96734

From: [Lynne Miura](#)
To: [HMS Testimony](#)
Subject: Support for SB 2385, Relating to Beverages for Children
Date: Monday, February 01, 2016 10:54:21 AM

To: The Honorable Suzanne Chun Oakland, Chair
The Honorable Gil Riviere, Vice Chair
Members of the Senate Committee on Human Services

Hrg: Senate Committee on Human Services, February 2, 2016, 1:15 pm, Room 016

Re: Support for SB 2385, Relating to Beverages for Children

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Thank you for the opportunity to provide testimony.

Lynne Miura

455 Aulima Loop
Kailua, HI 96734

From: [Ronald Chow](#)
To: [HMS Testimony](#)
Subject: Support for SB 2385, Relating to Beverages for Children
Date: Monday, February 01, 2016 10:13:23 AM

To: The Honorable Suzanne Chun Oakland, Chair
The Honorable Gil Riviere, Vice Chair
Members of the Senate Committee on Human Services

Hrg: Senate Committee on Human Services, February 2, 2016, 1:15 pm, Room 016

Re: Support for SB 2385, Relating to Beverages for Children

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Thank you for the opportunity to provide testimony.

Ronald Chow

548 ULUOA ST
KAILUA, HI 96734

From: [Hau"oli Tomoso](#)
To: [HMS Testimony](#)
Subject: Support for SB 2385, Relating to Beverages for Children
Date: Monday, February 01, 2016 10:12:59 AM

To: The Honorable Suzanne Chun Oakland, Chair
The Honorable Gil Riviere, Vice Chair
Members of the Senate Committee on Human Services

Hrg: Senate Committee on Human Services, February 2, 2016, 1:15 pm, Room 016

Re: Support for SB 2385, Relating to Beverages for Children

Thank you for the opportunity to offer testimony in support of SB 2385, Relating to Beverages for Children.

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Thank you for the opportunity to provide testimony.

John A. H. Tomoso, MSW, ACSW, LSW
51 Ku'ula Street
Kahului, HI 96732-2906

Hau'oli Tomoso
51 Ku'ula Street
Kahului, HI 96732

From: [Courtney Voss](#)
To: [HMS Testimony](#)
Subject: Support for SB 2385, Relating to Beverages for Children
Date: Monday, February 01, 2016 10:11:57 AM

To: The Honorable Suzanne Chun Oakland, Chair
The Honorable Gil Riviere, Vice Chair
Members of the Senate Committee on Human Services

Hrg: Senate Committee on Human Services, February 2, 2016, 1:15 pm, Room 016

Re: Support for SB 2385, Relating to Beverages for Children

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Thank you for the opportunity to provide testimony.

Courtney Voss

850 Richards Street
Haleiwa, HI 96712

From: [Paul Ho](#)
To: [HMS Testimony](#)
Subject: Support for SB 2385, Relating to Beverages for Children
Date: Monday, February 01, 2016 10:11:53 AM

To: The Honorable Suzanne Chun Oakland, Chair
The Honorable Gil Riviere, Vice Chair
Members of the Senate Committee on Human Services

Hrg: Senate Committee on Human Services, February 2, 2016, 1:15 pm, Room 016

Re: Support for SB 2385, Relating to Beverages for Children

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Thank you for the opportunity to provide testimony.

Paul Ho

88 Piikoi Street
3903
Honolulu, HI 96814

February 1, 2016

To:
The Honorable Suzanne Chun Oakland, Chair
The Honorable Gil Reviere, Vice Chair
Committee on Human Services

From:
Cristeta Ancog M.D, FAAP

Re: Strong Support for SB2385

Thank you for the opportunity to testify in **strong support** of SB 2385. I strongly support setting standards for nutrition in child care facilities by ensuring that healthy beverages are served. Restricting sugar-sweetened beverages and limiting the amount of fruit juice served in child care settings will help prevent childhood obesity and dental cavities in Hawaii.

I am a board certified pediatrician, and am deeply concerned about the epidemic of pediatric obesity in our state. In over 25 years of practice, I have witnessed the increase in overweight and obese children. Across the state, the highest rates are in the low income and Native Hawaiian populations, but every demographic is part of this obesity epidemic. Studies show that 70% of these overweight children will become overweight adults, which increases the complications that are associated with obesity, especially type 2 diabetes and early cardiac disease. We are already seeing these complications in children.

We know that eating habits of children are formed in their early years. Children can easily drink a lot of juice because it tastes good. Drinking sugar-sweetened beverages such as sweetened fruit juice increases caloric intake without adding any nutritional value. Even too much 100% juice is not healthy. While the American Academy of Pediatrics does suggest 100% fruit juice as an acceptable part of a healthy diet, they advise no more than 4 to 6 ounces a day. Any more than this reduces a child's appetite for other, more nutritious foods. Fruit juice offers no nutritional benefits over whole fruit. Whole fruits provide fiber and other nutrients. The AAP recommends that children drink water and milk.

Promoting healthy eating habits in childcare settings will teach children how to lead healthy lifestyles. It is much better to prevent obesity than to treat it later on. We all know how hard it is to make lifestyle changes and lose weight when we are older.

Please help create a healthier Hawaii and pass SB2385.

Sincerely,
Cristeta Ancog MD,
Fellow, American Academy of Pediatrics,
Board Certified, American Board of Pediatrics
98-1941 F Kaahumanu St
Aiea, HI 96701