From:	mailinglist@capitol.hawaii.gov
To:	HTHTestimony
Cc:	adele.mattoon@doh.hawaii.gov
Subject:	Submitted testimony for SB1256 on Feb 13, 2015 13:35PM
Date:	Thursday, February 12, 2015 12:44:25 PM
Attachments:	SB1256 HTH 02-13-15 HTH.pdf

<u>SB1256</u>

Submitted on: 2/12/2015 Testimony for HTH on Feb 13, 2015 13:35PM in Conference Room 414

Submitted By	Organization	Testifier Position	Present at Hearing
Danette Wong Tomiyasu	Department of Health	Comments Only	Yes

Comments: see attachment

Please note that testimony submitted <u>less than 24 hours prior to the hearing</u>, 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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WRITTEN ONLY

TESTIMONY BY WESLEY K. MACHIDA DIRECTOR, DEPARTMENT OF BUDGET AND FINANCE STATE OF HAWAII TO THE SENATE COMMITTEE ON HEALTH ON SENATE BILL NO. 1256

February 13, 2015

RELATING TO OBESITY PREVENTION

Senate Bill No. 1256 imposes a fee on sugar sweetened beverages and establishes the Obesity and Chronic Disease Prevention Special Fund within the Department of Health (DOH). The intent of the bill is to prevent obesity and chronic disease related to the consumption of sugar sweetened beverages and to support obesity prevention programs. The bill appropriates an unspecified expenditure ceiling for the proposed Obesity and Chronic Disease Prevention Special Fund for FY 16 and FY 17 and establishes the Hawaii interagency obesity prevention council to oversee and coordinate obesity prevention policies in the State.

While the Department of Budget and Finance does not take any position on the policy of Obesity Prevention programs, as a matter of general policy, the department does not support the creation of special funds which do not meet the requirements of Section 37-52.3, Hawaii Revised Statutes. Special funds should: 1) serve a need as demonstrated by the purpose, scope of work and an explanation why the program cannot be implemented successfully under the general fund appropriation process; 2) reflect a clear nexus between the benefits sought and charges made upon the users or beneficiaries or a clear link between the program and the sources of revenue; 3) provides an appropriate means of financing for the program or activity; and 4) demonstrates the capacity to be financially self-sustaining. In regards to this bill, it is difficult to determine whether the special fund meets the criteria to establish a special fund.

TAXBILLSERVICE

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Honolulu, Hawaii 96813 Tel. 536-4587

SUBJECT: MISCELLANEOUS, Fee on sugar sweetened beverages

BILL NUMBER: SB 1256; HB 1439 (Identical)

INTRODUCED BY: SB by Taniguchi by request; HB by Belatti by request

EXECUTIVE SUMMARY: This bill proposes to impose a tax on sugar-sweetened beverages, ostensibly to discourage childhood obesity. The connection between such beverages and childhood obesity is tenuous. Rather, this proposal should be seen for what it really is: it's a new tax. As a new tax, it has the potential for being highly regressive – the burden would fall heavily on people with the least ability to pay. It does not appear to be consistent with good tax policy.

BRIEF SUMMARY: Adds a new part to HRS chapter 321 to establish a sugar-sweetened beverage fee. Requires a distributor, which includes any person, manufacturer or wholesale dealer who receives, stores, manufacturers, bottles, or distributes sugar-sweetened beverages, syrup, or powder in this state to pay a fee of: (1) \$1.28 per gallon of bottled sugar-sweetened beverages sold or offered for sale to a retailer; and (2) \$1.28 per gallon of sugar-sweetened beverage produced from syrup or powder sold or offered for sale either as syrup or powder or as a sugar-sweetened beverage derived from that syrup or powder. Defines "sugar-sweetened beverage" as any nonalcoholic beverage, carbonated or noncarbonated, which is intended for human consumption and contains any added caloric sweetener.

"Sugar-sweetened beverage" does not include: (1) beverages consisting of 100% natural fruit or vegetable juice with no added caloric sweetener; (2) milk without any added caloric sweetener; (3) dietary aids such as liquid products manufactured for use as: (a) an oral nutritional therapy for persons who cannot absorb or metabolize dietary nutrients from food or beverages; (b) a source of necessary nutrition used due to a medical condition; or (c) an oral electrolyte solution for infants and children formulated to prevent dehydration due to illness; (4) infant formula; and (5) beverages containing less than 4.2 grams of added caloric sweetener per eight ounces of beverage.

Any retailer that sells bottled sugar-sweetened beverages, syrup, or powder in the state to a consumer on which the fee imposed by this section has not been paid by a distributor, shall be liable for the fee at the time of sale to the consumer. Allows a distributor to add the amount of the fees to the price of sugar-sweetened beverages sold to a retailer, and the retailer shall pass the amount of the fees through to a consumer as a component of the final retail purchase price. The amount of the fees shall be stated separately on all invoices, signs, sales or delivery slips, bills, and statements that advertise or indicate the price of such beverages.

The following shall be exempt from the fee: (1) bottled sugar-sweetened beverages, syrups, and powder sold by a distributor or a retailer expressly for resale or consumption outside the state; and (2) bottled sugar-sweetened beverages, syrups, and powder sold by a distributor to another distributor, if the sales

SB 1256; HB 1439 - Continued

invoice clearly indicates that the sale is exempt. If the sale is to a person who is both a distributor and a retailer, the sale shall also be exempt from the fee and the fee shall be paid when the purchasing distributor, who is also a retailer, resells the product to a retailer or a consumer.

Establishes the obesity and chronic disease prevention special fund into which shall be deposited sugar-sweetened beverage fees, interest payments, and penalty payments. The fund shall be used for: (1) costs to implement this program; (2) coordination and support of evidence-based statewide obesity prevention programs by the department of health or other state agencies; (3) support of prenatal surveillance and assessment, home visitation, early childhood oral health prevention, and coordination for families, infants, and children at highest health and domestic violence risk; and (4) support of health promotion from birth to childhood to provide a systems approach that will ensure children and families have healthy lifestyles and wellness.

Delineates provisions for the filing of the return, payment, penalties, record keeping, inspection of records, and appeals related to the imposition of the fee.

Adds a new section to HRS chapter 321 to provide for the establishment of Hawaii interagency obesity prevention council to: (1) formulate and advise the governor on the implementation of a unified ten-year state obesity prevention strategic plan to address child and adult obesity in Hawaii; (2) promote collaboration among public agencies and private stakeholders to lower obesity rates in the state; (3) monitor the progress of the state obesity prevention strategic plan; (4) provide recommendations to state agencies, the legislature, and the private sector on improving the quality, availability, and coordination of obesity prevention policies and activities; (5) develop specific strategies to address social determinants of health as they relate to obesity prevention; and (6) activate, coordinate, and maintain responsive action among the public, business, and educational communities to become part of an obesity prevention strategy.

Appropriates \$______ out of the obesity and chronic disease prevention special fund in fiscal 2016 and fiscal 2017 to the department of health to support child and adult obesity and chronic disease prevention programs, including programs relating to diabetes, cardiovascular disease, promotion of healthy lifestyles, physical fitness, nutrition, early childhood health, and other prevention-oriented public health programs.

EFFECTIVE DATE: July 1, 2015

STAFF COMMENTS: This measure proposes a new fee on sugar-sweetened beverages sold in the state; however, it would appear that while diet soft drinks and natural fruit juices are not subject to the proposed fee, studies have indicated that diet soft drinks may also contribute to weight gain, diabetes, and other health problems while natural fruit juices are laden with sugars albeit "natural." Proponents of a fee on sugary drinks declare that such a fee would act as a disincentive to excessive consumption of such beverages. The problem with that argument is that it penalizes those who may consume such beverages in moderation. Further, this proposal is a piecemeal approach to the whole issue of childhood obesity which proponents claim it targets.

This measure should be recognized for what it truly is, another strategy to raise even more money to expand government, in this case the department of health. High caloric beverages represent just one aspect of the childhood obesity dilemma. Of even greater concern should be the sedentary lifestyle of

SB 1256; HB 1439 - Continued

children today as opposed to fifty years ago. Preoccupied by hand-held devices, children today are more likely to tuck themselves into a corner for hours of texting and e-mailing friends. If one believes that sugary beverages are the culprits of childhood obesity, the lack of physical activity should also be targeted as a major contributor of obesity.

The other obvious phenomenon is that childhood obesity has a marked propensity to be found in children who come from poor families. With limited financial means, poor families do not have access to components of a healthy diet including fresh fruits and vegetables and milk as a beverage instead of the canned soft drinks found in many of these homes. Where food is readily available, these children will overeat in fear that there may not be a next meal or the next meal will be sparse. The bottom line is that there are many contributing factors to childhood obesity and slapping additional fees on sugary beverages as the panacea fails to recognize and understand the complexity of the issue.

The U.S. Department of Health and Human Services says, "the causes of childhood obesity are multifactorial." John Rosemond, author of the *Parent Power* column, notes that, "the reason so many of our children are obese is because they consume too much bad stuff and move too little. Their diets are high in bad carbohydrates (i.e., junk food) like french fries, soda and sweets and low in fresh vegetables, fruits and healthful sources of protein. They spend entirely too much time in front of televisions, video games and computers and not enough time in physical activity. And make no mistake, the best physical activity for a child is free play. A child enrolled in an adult-micromanaged sport is not getting half the exercise kids got playing sandlot games in the 1950's and '60s, when childhood obesity was rare."

He goes on to note that, "In rare instances a medical issue might precede childhood obesity, but the typical overweight kid has a lifestyle problem. As such, the solution is for parents to begin making their children's weight a high priority. Yes, schools need to eliminate carbo-load lunches along with soda and snack machines, but in the final analysis, childhood obesity is going to be prevented and solved at home."

Rosemond also observes, "This is not rocket science. Eat at least 90 percent of your meals at home, around the table as opposed to in front of a television set. If that means taking your kids out of most after-school activities, do it! Most of them involve minimal activity anyway. Prepare meals that are heart-healthy. When your children are hungry between meals, give them apples, cheese and raw vegetables. When they're thirsty, direct them to the faucet."

The fee on sugar-sweetened beverages proposed in this measure should be viewed as a discriminatory fee increase on such beverages. Taxpayers, as well as lawmakers, should view this part of the bill for what it is, a money grab disguised as an effort to prevent childhood obesity. As we have learned from the beverage container deposit fee, unless people's habits are changed, no financial disincentive, save one that is confiscatory, will discourage or encourage certain types of human behavior. Further, economics more than not dictates what families consume. For example, fresh vegetables and fresh fruit that contribute to a healthier diet are sometimes beyond the means of the poor so they tend to consume large quantities of carbohydrates because they are cheap and filling, but not particularly healthy. If the intent is to promote healthier eating patterns, then that goal can be achieved only with education and understanding on the part of families to replace unhealthy choices with healthy choices. This proposal lacks understanding of what it takes to solve the problems of childhood obesity, high blood pressure and diabetes and focuses only on sugar-sweetened beverages as the cause of the problem.

SB 1256; HB 1439 - Continued

To adopt this measure in the belief that it will deter the consumption of such beverages and, therefore, address childhood obesity would be a great disservice to all children as the problem is multifaceted. Adoption of this measure in the belief it will prevent this disease reflects ignorance of the problem.

From an administrative and compliance perspective, these proposals to tax sweetened sugary drinks may pose a challenge as products are developed. For example, does a "power" drink like "Red Bull," which has sugar as an ingredient, be tagged with the fee even though it does not appeal to children? The proposed fee discriminates against those consumers who use these sugar-sweetened products in moderation. Similarly, beverages that have traces of sweetner will be caught in the net even though by content there is little sweetner.

If lawmakers believe that imposing a financial disincentive to discourage the consumption of any product that contributes to childhood obesity is necessary, then they may want to explore a confiscatory fee on all hand-held devices like tablets, cell phones, and handheld video game devices.

Finally, while this measure would distribute the moneys from the sugar-sweetened beverage fee into the newly created obesity and chronic disease prevention special fund, a direct appropriation for the purposes stated would be preferable to the earmarking mechanism proposed in this measure.

Digested 2/12/2015

From:	mailinglist@capitol.hawaii.gov	
To:	HTHTestimony	
Cc:	advocacy@hawaiipca.net	
Subject:	Submitted testimony for SB1256 on Feb 13, 2015 13:35PM	
Date:	Thursday, February 12, 2015 10:17:55 AM	
Attachments:	SB1256 SSB_HTH_2-13-15.pdf	

<u>SB1256</u>

Submitted on: 2/12/2015 Testimony for HTH on Feb 13, 2015 13:35PM in Conference Room 414

Submitted By	Organization	Testifier Position	Present at Hearing
Nani Medeiros	HPCA	Support	No

Comments:

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From: Beth Irikura

Date: February 11, 2015

Hrg: Senate Committee on Health;

Re: Strong Support for SB 1256, Relating to Obesity Prevention

Thank you for the opportunity to submit testimony in support of SB 1256. I strongly support establishing a fee on sugar-sweetened beverages sold in the State to designate the funds to be used for obesity prevention programs coordinated by the Department of Health.

Obesity is a growing problem with about one-third of U.S. adults (35.7 percent)¹ and approximately 17 percent (12.5 million) of children and adolescents aged 2 to 19 years old are obese². In Hawaii, 57% of adults in Hawaii are overweight or obese and approximately 1 out of 4 children entering Kindergarten are overweight or obese³.

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⁵ Serdula MK, Ivery D, Coates RJ, et al. "Do Obese Children Become Obese Adults? A Review of the Literature." American Journal of Preventive Medicine, 22(2): 167–177, 1993.

⁶ Trust for America's Health. *F as in Fat: How Obesity Threatens America's Future*. 2012. Available at: <u>http://fasinfat.org/obesity-rates-trends-overview</u>.

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⁸ Harvard School of Public Health Nutrition Source. *The Nutrition Source: Time to Focus on Healthier Drinks*. Boston: Harvard School of Public Health. Available at: <u>www.hsph.harvard.edu/nutritionsource/healthy-drinks/focus</u>.

⁹ Obesity, 2012; Am J Public Health 2007; Physical Behavior 2010

may account for \$147 billion in annual health care costs nationally¹⁰, with Hawaii spending an estimated \$470 million annually on obesity-related medical costs¹¹.

A fee of 1 cent per ounce on sugar-sweetened beverages is expected to reduce consumption by 8-10 percent¹² and will raise approximately \$38 million in new revenue in 2015-2016 for obesity prevention programs¹³. This added revenue would establish an obesity prevention fund within the Department of Health for communities. Funds could help to ensure that all schools have Certified Physical Education teachers and adequate and accessible water fountains are available in all schools and parks.

This bill will save lives and help our keiki to be healthier. I respectfully ask you to pass this bill.

Mahalo,

Beth Irikura irikura@yahoo.com

¹⁰ Finkelstein EA, Trogdon JG, Cohen JW, et al. Annual Medical Spending Attributable to Obesity: Payer- and Service-Specific Estimates. *Health Affairs*, 28(5): w822–w831, 2009. Available at: *www.obesity.procon.org/sourcefiles/FinkelsteinAnnualMedicalSpending.pdf*.

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¹³ Obesity (Silver Spring). 2012 Jan;20(1):214-20. doi: 10.1038/oby.2011.169. Epub 2011 Jun 16.

From: Calvin Ellison

Date: February 11, 2015

Hrg: Senate Committee on Health;

Re: Strong Support for SB 1256, Relating to Obesity Prevention

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A fee of 1 cent per ounce on sugar-sweetened beverages is expected to reduce consumption by 8-10 percent¹² and will raise approximately \$38 million in new revenue in 2015-2016 for obesity prevention programs¹³. This added revenue would establish an obesity prevention fund within the Department of Health for communities. Funds could help to ensure that all schools have Certified Physical Education teachers and adequate and accessible water fountains are available in all schools and parks.

This bill will save lives and help our keiki to be healthier. I respectfully ask you to pass this bill.

Mahalo,

Calvin Ellison calvine@gmail.com

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Date: February 11, 2015

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This bill will save lives and help our keiki to be healthier. I respectfully ask you to pass this bill.

Mahalo,

Clifford Chang

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From: Daria Fand

Date: February 11, 2015

Hrg: Senate Committee on Health;

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This bill will save lives and help our keiki to be healthier. I respectfully ask you to pass this bill.

Mahalo,

Daria Fand daria@hawaiiantel.net

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From: Kristin Speltz

Date: February 11, 2015

Hrg: Senate Committee on Health;

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⁷ Johnson RK, Appel LJ, Brands M, et al. Dietary Sugars Intake and Cardiovascular Health: A Scientific Statement From the American Heart Association. *Circulation*, 120: 1011–1120, 2009. Available at: http://circ.ahajournals.org/content/120/11/1011.full.pdf.

⁸ Harvard School of Public Health Nutrition Source. *The Nutrition Source: Time to Focus on Healthier Drinks*. Boston: Harvard School of Public Health. Available at: <u>www.hsph.harvard.edu/nutritionsource/healthy-drinks/focus</u>.

⁹ Obesity, 2012; Am J Public Health 2007; Physical Behavior 2010

may account for \$147 billion in annual health care costs nationally¹⁰, with Hawaii spending an estimated \$470 million annually on obesity-related medical costs¹¹.

A fee of 1 cent per ounce on sugar-sweetened beverages is expected to reduce consumption by 8-10 percent¹² and will raise approximately \$38 million in new revenue in 2015-2016 for obesity prevention programs¹³. This added revenue would establish an obesity prevention fund within the Department of Health for communities. Funds could help to ensure that all schools have Certified Physical Education teachers and adequate and accessible water fountains are available in all schools and parks.

This bill will save lives and help our keiki to be healthier. I respectfully ask you to pass this bill.

Mahalo,

Kristin Speltz MrsSpeltz@gmail.com

¹⁰ Finkelstein EA, Trogdon JG, Cohen JW, et al. Annual Medical Spending Attributable to Obesity: Payer- and Service-Specific Estimates. *Health Affairs*, 28(5): w822–w831, 2009. Available at: www.obesity.procon.org/sourcefiles/FinkelsteinAnnualMedicalSpending.pdf.

¹¹ Obesity, 2012; 20(1): 214-220

¹² Andreyeva T, Long MW, and Brownell KD. The Impact of Food Prices on Consumption: A Systematic Review of Research on the Price Elasticity of Demand for Food. American Journal of Public Health, 100(2): 216–222, 2010. Available at: www.yaleruddcenter.org/resources/upload/docs/what/economics/FoodPricesElasticity AJPH 2.10.pdf.

¹³ Obesity (Silver Spring). 2012 Jan;20(1):214-20. doi: 10.1038/oby.2011.169. Epub 2011 Jun 16.

From: Lisa Kehl

Date: February 11, 2015

Hrg: Senate Committee on Health;

Re: Strong Support for SB 1256, Relating to Obesity Prevention

Thank you for the opportunity to submit testimony in support of SB 1256. I strongly support establishing a fee on sugar-sweetened beverages sold in the State to designate the funds to be used for obesity prevention programs coordinated by the Department of Health.

Obesity is a growing problem with about one-third of U.S. adults (35.7 percent)¹ and approximately 17 percent (12.5 million) of children and adolescents aged 2 to 19 years old are obese². In Hawaii, 57% of adults in Hawaii are overweight or obese and approximately 1 out of 4 children entering Kindergarten are overweight or obese³.

¹ Centers for Disease Control and Prevention. *Obesity and Overweight for Professionals: Data and Statistics: Adult Obesity.* Available at: <u>www.cdc.gov/obesity/data/adult.html</u>.

² Centers for Disease Control and Prevention. *Obesity and Overweight for Professionals: Childhood: Data: DNPAO | CDC.* Available at: <u>www.cdc.gov/obesity/data/childhood.html</u>.

³ Behavioral Risk Factor Surveillance Study, Hawaii State Department of Health 2011

⁴ Centers for Disease Control and Prevention. *CDC – Obesity – Facts – Adolescent and School Health*. Available at: <u>www.cdc.gov/healthyyouth/obesity/facts.htm</u>.

⁵ Serdula MK, Ivery D, Coates RJ, et al. "Do Obese Children Become Obese Adults? A Review of the Literature." American Journal of Preventive Medicine, 22(2): 167–177, 1993.

⁶ Trust for America's Health. *F as in Fat: How Obesity Threatens America's Future*. 2012. Available at: <u>http://fasinfat.org/obesity-rates-trends-overview</u>.

⁷ Johnson RK, Appel LJ, Brands M, et al. Dietary Sugars Intake and Cardiovascular Health: A Scientific Statement From the American Heart Association. *Circulation*, 120: 1011–1120, 2009. Available at: http://circ.ahajournals.org/content/120/11/1011.full.pdf.

⁸ Harvard School of Public Health Nutrition Source. *The Nutrition Source: Time to Focus on Healthier Drinks*. Boston: Harvard School of Public Health. Available at: <u>www.hsph.harvard.edu/nutritionsource/healthy-drinks/focus</u>.

⁹ Obesity, 2012; Am J Public Health 2007; Physical Behavior 2010

may account for \$147 billion in annual health care costs nationally¹⁰, with Hawaii spending an estimated \$470 million annually on obesity-related medical costs¹¹.

A fee of 1 cent per ounce on sugar-sweetened beverages is expected to reduce consumption by 8-10 percent¹² and will raise approximately \$38 million in new revenue in 2015-2016 for obesity prevention programs¹³. This added revenue would establish an obesity prevention fund within the Department of Health for communities. Funds could help to ensure that all schools have Certified Physical Education teachers and adequate and accessible water fountains are available in all schools and parks.

This bill will save lives and help our keiki to be healthier. I respectfully ask you to pass this bill.

Mahalo,

Lisa Kehl kehl@hawaii.edu

¹⁰ Finkelstein EA, Trogdon JG, Cohen JW, et al. Annual Medical Spending Attributable to Obesity: Payer- and Service-Specific Estimates. *Health Affairs*, 28(5): w822–w831, 2009. Available at: *www.obesity.procon.org/sourcefiles/FinkelsteinAnnualMedicalSpending.pdf*.

¹¹ Obesity, 2012; 20(1): 214-220

 ¹² Andreyeva T, Long MW, and Brownell KD. The Impact of Food Prices on Consumption: A Systematic Review of Research on the Price Elasticity of Demand for Food. *American Journal of Public Health*, 100(2): 216–222, 2010.
Available at: <u>www.yaleruddcenter.org/resources/upload/docs/what/economics/FoodPricesElasticity_AJPH_2.10.pdf</u>.
¹³ Obesity (Silver Spring). 2012 Jan;20(1):214-20. doi: 10.1038/oby.2011.169. Epub 2011 Jun 16.

From: Maile Corpus

Date: February 11, 2015

Hrg: Senate Committee on Health;

Re: Strong Support for SB 1256, Relating to Obesity Prevention

Thank you for the opportunity to submit testimony in support of SB 1256. I strongly support establishing a fee on sugar-sweetened beverages sold in the State to designate the funds to be used for obesity prevention programs coordinated by the Department of Health.

Obesity is a growing problem with about one-third of U.S. adults (35.7 percent)¹ and approximately 17 percent (12.5 million) of children and adolescents aged 2 to 19 years old are obese². In Hawaii, 57% of adults in Hawaii are overweight or obese and approximately 1 out of 4 children entering Kindergarten are overweight or obese³.

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² Centers for Disease Control and Prevention. *Obesity and Overweight for Professionals: Childhood: Data: DNPAO | CDC.* Available at: <u>www.cdc.gov/obesity/data/childhood.html</u>.

³ Behavioral Risk Factor Surveillance Study, Hawaii State Department of Health 2011

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⁵ Serdula MK, Ivery D, Coates RJ, et al. "Do Obese Children Become Obese Adults? A Review of the Literature." American Journal of Preventive Medicine, 22(2): 167–177, 1993.

⁶ Trust for America's Health. *F as in Fat: How Obesity Threatens America's Future*. 2012. Available at: <u>http://fasinfat.org/obesity-rates-trends-overview</u>.

⁷ Johnson RK, Appel LJ, Brands M, et al. Dietary Sugars Intake and Cardiovascular Health: A Scientific Statement From the American Heart Association. *Circulation*, 120: 1011–1120, 2009. Available at: http://circ.ahajournals.org/content/120/11/1011.full.pdf.

⁸ Harvard School of Public Health Nutrition Source. *The Nutrition Source: Time to Focus on Healthier Drinks*. Boston: Harvard School of Public Health. Available at: <u>www.hsph.harvard.edu/nutritionsource/healthy-drinks/focus</u>.

⁹ Obesity, 2012; Am J Public Health 2007; Physical Behavior 2010

may account for \$147 billion in annual health care costs nationally¹⁰, with Hawaii spending an estimated \$470 million annually on obesity-related medical costs¹¹.

A fee of 1 cent per ounce on sugar-sweetened beverages is expected to reduce consumption by 8-10 percent¹² and will raise approximately \$38 million in new revenue in 2015-2016 for obesity prevention programs¹³. This added revenue would establish an obesity prevention fund within the Department of Health for communities. Funds could help to ensure that all schools have Certified Physical Education teachers and adequate and accessible water fountains are available in all schools and parks.

This bill will save lives and help our keiki to be healthier. I respectfully ask you to pass this bill.

Mahalo,

Maile Corpus Mcorpus3@hawaii.edu

¹⁰ Finkelstein EA, Trogdon JG, Cohen JW, et al. Annual Medical Spending Attributable to Obesity: Payer- and Service-Specific Estimates. *Health Affairs*, 28(5): w822–w831, 2009. Available at: *www.obesity.procon.org/sourcefiles/FinkelsteinAnnualMedicalSpending.pdf*.

¹¹ Obesity, 2012; 20(1): 214-220

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Available at: <u>www.yaleruddcenter.org/resources/upload/docs/what/economics/FoodPricesElasticity_AJPH_2.10.pdf</u>.
¹³ Obesity (Silver Spring). 2012 Jan;20(1):214-20. doi: 10.1038/oby.2011.169. Epub 2011 Jun 16.

From: Midge Wright

Date: February 11, 2015

Hrg: Senate Committee on Health;

Re: Strong Support for SB 1256, Relating to Obesity Prevention

Thank you for the opportunity to submit testimony in support of SB 1256. I strongly support establishing a fee on sugar-sweetened beverages sold in the State to designate the funds to be used for obesity prevention programs coordinated by the Department of Health.

Obesity is a growing problem with about one-third of U.S. adults (35.7 percent)¹ and approximately 17 percent (12.5 million) of children and adolescents aged 2 to 19 years old are obese². In Hawaii, 57% of adults in Hawaii are overweight or obese and approximately 1 out of 4 children entering Kindergarten are overweight or obese³.

¹ Centers for Disease Control and Prevention. *Obesity and Overweight for Professionals: Data and Statistics: Adult Obesity.* Available at: <u>www.cdc.gov/obesity/data/adult.html</u>.

² Centers for Disease Control and Prevention. *Obesity and Overweight for Professionals: Childhood: Data: DNPAO | CDC.* Available at: <u>www.cdc.gov/obesity/data/childhood.html</u>.

³ Behavioral Risk Factor Surveillance Study, Hawaii State Department of Health 2011

⁴ Centers for Disease Control and Prevention. *CDC – Obesity – Facts – Adolescent and School Health*. Available at: <u>www.cdc.gov/healthyyouth/obesity/facts.htm</u>.

⁵ Serdula MK, Ivery D, Coates RJ, et al. "Do Obese Children Become Obese Adults? A Review of the Literature." American Journal of Preventive Medicine, 22(2): 167–177, 1993.

⁶ Trust for America's Health. *F as in Fat: How Obesity Threatens America's Future*. 2012. Available at: <u>http://fasinfat.org/obesity-rates-trends-overview</u>.

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⁸ Harvard School of Public Health Nutrition Source. *The Nutrition Source: Time to Focus on Healthier Drinks*. Boston: Harvard School of Public Health. Available at: <u>www.hsph.harvard.edu/nutritionsource/healthy-drinks/focus</u>.

⁹ Obesity, 2012; Am J Public Health 2007; Physical Behavior 2010

may account for \$147 billion in annual health care costs nationally¹⁰, with Hawaii spending an estimated \$470 million annually on obesity-related medical costs¹¹.

A fee of 1 cent per ounce on sugar-sweetened beverages is expected to reduce consumption by 8-10 percent¹² and will raise approximately \$38 million in new revenue in 2015-2016 for obesity prevention programs¹³. This added revenue would establish an obesity prevention fund within the Department of Health for communities. Funds could help to ensure that all schools have Certified Physical Education teachers and adequate and accessible water fountains are available in all schools and parks.

This bill will save lives and help our keiki to be healthier. I respectfully ask you to pass this bill.

Mahalo,

Midge Wright

¹⁰ Finkelstein EA, Trogdon JG, Cohen JW, et al. Annual Medical Spending Attributable to Obesity: Payer- and Service-Specific Estimates. *Health Affairs*, 28(5): w822–w831, 2009. Available at: www.obesity.procon.org/sourcefiles/FinkelsteinAnnualMedicalSpending.pdf.

¹¹ Obesity, 2012; 20(1): 214-220

¹² Andreyeva T, Long MW, and Brownell KD. The Impact of Food Prices on Consumption: A Systematic Review of Research on the Price Elasticity of Demand for Food. American Journal of Public Health, 100(2): 216–222, 2010. Available at: www.yaleruddcenter.org/resources/upload/docs/what/economics/FoodPricesElasticity AJPH 2.10.pdf.

¹³ Obesity (Silver Spring). 2012 Jan;20(1):214-20. doi: 10.1038/oby.2011.169. Epub 2011 Jun 16.

From: Nicole Ellison

Date: February 11, 2015

Hrg: Senate Committee on Health;

Re: Strong Support for SB 1256, Relating to Obesity Prevention

Thank you for the opportunity to submit testimony in support of SB 1256. I strongly support establishing a fee on sugar-sweetened beverages sold in the State to designate the funds to be used for obesity prevention programs coordinated by the Department of Health.

Obesity is a growing problem with about one-third of U.S. adults (35.7 percent)¹ and approximately 17 percent (12.5 million) of children and adolescents aged 2 to 19 years old are obese². In Hawaii, 57% of adults in Hawaii are overweight or obese and approximately 1 out of 4 children entering Kindergarten are overweight or obese³.

¹ Centers for Disease Control and Prevention. *Obesity and Overweight for Professionals: Data and Statistics: Adult Obesity.* Available at: <u>www.cdc.gov/obesity/data/adult.html</u>.

² Centers for Disease Control and Prevention. *Obesity and Overweight for Professionals: Childhood: Data: DNPAO | CDC.* Available at: <u>www.cdc.gov/obesity/data/childhood.html</u>.

³ Behavioral Risk Factor Surveillance Study, Hawaii State Department of Health 2011

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⁵ Serdula MK, Ivery D, Coates RJ, et al. "Do Obese Children Become Obese Adults? A Review of the Literature." American Journal of Preventive Medicine, 22(2): 167–177, 1993.

⁶ Trust for America's Health. *F as in Fat: How Obesity Threatens America's Future*. 2012. Available at: <u>http://fasinfat.org/obesity-rates-trends-overview</u>.

⁷ Johnson RK, Appel LJ, Brands M, et al. Dietary Sugars Intake and Cardiovascular Health: A Scientific Statement From the American Heart Association. *Circulation*, 120: 1011–1120, 2009. Available at: http://circ.ahajournals.org/content/120/11/1011.full.pdf.

⁸ Harvard School of Public Health Nutrition Source. *The Nutrition Source: Time to Focus on Healthier Drinks*. Boston: Harvard School of Public Health. Available at: <u>www.hsph.harvard.edu/nutritionsource/healthy-drinks/focus</u>.

⁹ Obesity, 2012; Am J Public Health 2007; Physical Behavior 2010

may account for \$147 billion in annual health care costs nationally¹⁰, with Hawaii spending an estimated \$470 million annually on obesity-related medical costs¹¹.

A fee of 1 cent per ounce on sugar-sweetened beverages is expected to reduce consumption by 8-10 percent¹² and will raise approximately \$38 million in new revenue in 2015-2016 for obesity prevention programs¹³. This added revenue would establish an obesity prevention fund within the Department of Health for communities. Funds could help to ensure that all schools have Certified Physical Education teachers and adequate and accessible water fountains are available in all schools and parks.

This bill will save lives and help our keiki to be healthier. I respectfully ask you to pass this bill.

Mahalo,

Nicole Ellison Fujioka2@hawaii.edu

¹⁰ Finkelstein EA, Trogdon JG, Cohen JW, et al. Annual Medical Spending Attributable to Obesity: Payer- and Service-Specific Estimates. *Health Affairs*, 28(5): w822–w831, 2009. Available at: *www.obesity.procon.org/sourcefiles/FinkelsteinAnnualMedicalSpending.pdf*.

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Available at: <u>www.yaleruddcenter.org/resources/upload/docs/what/economics/FoodPricesElasticity_AJPH_2.10.pdf</u>.
¹³ Obesity (Silver Spring). 2012 Jan;20(1):214-20. doi: 10.1038/oby.2011.169. Epub 2011 Jun 16.

From: Nicole Kerr

Date: February 11, 2015

Hrg: Senate Committee on Health;

Re: Strong Support for SB 1256, Relating to Obesity Prevention

Thank you for the opportunity to submit testimony in support of SB 1256. I strongly support establishing a fee on sugar-sweetened beverages sold in the State to designate the funds to be used for obesity prevention programs coordinated by the Department of Health.

Obesity is a growing problem with about one-third of U.S. adults (35.7 percent)¹ and approximately 17 percent (12.5 million) of children and adolescents aged 2 to 19 years old are obese². In Hawaii, 57% of adults in Hawaii are overweight or obese and approximately 1 out of 4 children entering Kindergarten are overweight or obese³.

¹ Centers for Disease Control and Prevention. *Obesity and Overweight for Professionals: Data and Statistics: Adult Obesity.* Available at: <u>www.cdc.gov/obesity/data/adult.html</u>.

² Centers for Disease Control and Prevention. *Obesity and Overweight for Professionals: Childhood: Data: DNPAO | CDC.* Available at: <u>www.cdc.gov/obesity/data/childhood.html</u>.

³ Behavioral Risk Factor Surveillance Study, Hawaii State Department of Health 2011

⁴ Centers for Disease Control and Prevention. *CDC – Obesity – Facts – Adolescent and School Health*. Available at: <u>www.cdc.gov/healthyyouth/obesity/facts.htm</u>.

⁵ Serdula MK, Ivery D, Coates RJ, et al. "Do Obese Children Become Obese Adults? A Review of the Literature." American Journal of Preventive Medicine, 22(2): 167–177, 1993.

⁶ Trust for America's Health. *F as in Fat: How Obesity Threatens America's Future*. 2012. Available at: <u>http://fasinfat.org/obesity-rates-trends-overview</u>.

⁷ Johnson RK, Appel LJ, Brands M, et al. Dietary Sugars Intake and Cardiovascular Health: A Scientific Statement From the American Heart Association. *Circulation*, 120: 1011–1120, 2009. Available at: http://circ.ahajournals.org/content/120/11/1011.full.pdf.

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⁹ Obesity, 2012; Am J Public Health 2007; Physical Behavior 2010

may account for \$147 billion in annual health care costs nationally¹⁰, with Hawaii spending an estimated \$470 million annually on obesity-related medical costs¹¹.

A fee of 1 cent per ounce on sugar-sweetened beverages is expected to reduce consumption by 8-10 percent¹² and will raise approximately \$38 million in new revenue in 2015-2016 for obesity prevention programs¹³. This added revenue would establish an obesity prevention fund within the Department of Health for communities. Funds could help to ensure that all schools have Certified Physical Education teachers and adequate and accessible water fountains are available in all schools and parks.

This bill will save lives and help our keiki to be healthier. I respectfully ask you to pass this bill.

Mahalo,

Nicole Kerr nicole@nicolekerr.com

¹⁰ Finkelstein EA, Trogdon JG, Cohen JW, et al. Annual Medical Spending Attributable to Obesity: Payer- and Service-Specific Estimates. *Health Affairs*, 28(5): w822–w831, 2009. Available at: *www.obesity.procon.org/sourcefiles/FinkelsteinAnnualMedicalSpending.pdf*.

¹¹ Obesity, 2012; 20(1): 214-220

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Available at: <u>www.yaleruddcenter.org/resources/upload/docs/what/economics/FoodPricesElasticity_AJPH_2.10.pdf</u>.
¹³ Obesity (Silver Spring). 2012 Jan;20(1):214-20. doi: 10.1038/oby.2011.169. Epub 2011 Jun 16.

- To: The Honorable Josh Green, Chair, Committee on Health The Honorable Glenn Wakai, Vice Chair, Committee on Health Members, Senate Committee on Health
- From: Tony Rodriguez Larkin
- Date: February 11, 2015
- Hrg: Senate Committee on Health;

Re: Strong Support for SB 1256, Relating to Obesity Prevention

Thank you for the opportunity to submit testimony in support of SB 1256. I strongly support establishing a fee on sugar-sweetened beverages sold in the State to designate the funds to be used for obesity prevention programs coordinated by the Department of Health.

Obesity is a growing problem with about one-third of U.S. adults (35.7 percent)¹ and approximately 17 percent (12.5 million) of children and adolescents aged 2 to 19 years old are obese². In Hawaii, 57% of adults in Hawaii are overweight or obese and approximately 1 out of 4 children entering Kindergarten are overweight or obese³.

¹ Centers for Disease Control and Prevention. *Obesity and Overweight for Professionals: Data and Statistics: Adult Obesity.* Available at: <u>www.cdc.gov/obesity/data/adult.html</u>.

² Centers for Disease Control and Prevention. *Obesity and Overweight for Professionals: Childhood: Data: DNPAO | CDC.* Available at: <u>www.cdc.gov/obesity/data/childhood.html</u>.

³ Behavioral Risk Factor Surveillance Study, Hawaii State Department of Health 2011

⁴ Centers for Disease Control and Prevention. *CDC – Obesity – Facts – Adolescent and School Health*. Available at: <u>www.cdc.gov/healthyyouth/obesity/facts.htm</u>.

⁵ Serdula MK, Ivery D, Coates RJ, et al. "Do Obese Children Become Obese Adults? A Review of the Literature." American Journal of Preventive Medicine, 22(2): 167–177, 1993.

⁶ Trust for America's Health. *F as in Fat: How Obesity Threatens America's Future*. 2012. Available at: <u>http://fasinfat.org/obesity-rates-trends-overview</u>.

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⁹ Obesity, 2012; Am J Public Health 2007; Physical Behavior 2010

may account for \$147 billion in annual health care costs nationally¹⁰, with Hawaii spending an estimated \$470 million annually on obesity-related medical costs¹¹.

A fee of 1 cent per ounce on sugar-sweetened beverages is expected to reduce consumption by 8-10 percent¹² and will raise approximately \$38 million in new revenue in 2015-2016 for obesity prevention programs¹³. This added revenue would establish an obesity prevention fund within the Department of Health for communities. Funds could help to ensure that all schools have Certified Physical Education teachers and adequate and accessible water fountains are available in all schools and parks.

This bill will save lives and help our keiki to be healthier. I respectfully ask you to pass this bill.

Mahalo,

Tony Rodriguez Larkin

¹⁰ Finkelstein EA, Trogdon JG, Cohen JW, et al. Annual Medical Spending Attributable to Obesity: Payer- and Service-Specific Estimates. *Health Affairs*, 28(5): w822–w831, 2009. Available at: www.obesity.procon.org/sourcefiles/FinkelsteinAnnualMedicalSpending.pdf.

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¹³ Obesity (Silver Spring). 2012 Jan;20(1):214-20. doi: 10.1038/oby.2011.169. Epub 2011 Jun 16.

February 11, 2015

To: The Honorable Josh Green, Chair, Committee on Health The Honorable Glenn Wakai, Vice Chair, Committee on Health Members, Senate Committee on Health

Hrg: Senate Committee on Health; Friday, February 13, 2015, 1:35 p.m.in Conference Room 414

Re: Strong Support for SB 1256, Relating to Obesity Prevention

Thank you for the opportunity to submit testimony in support of SB 1256. I strongly support establishing a fee on sugar-sweetened beverages sold in the State to designate the funds to be used for obesity prevention programs coordinated by the Department of Health.

Obesity is a growing problem with about one-third of U.S. adults (35.7 percent) 1 and approximately 17 percent (12.5 million) of children and adolescents aged 2 to 19 years old are obese2. In Hawaii, 57% of adults in Hawaii are overweight or obese and approximately 1 out of 4 children entering Kindergarten are overweight or obese3.

Childhood obesity has more than tripled in the past 30 years, and obese children are at least twice as likely as nonobese children to become obese adults. 13 states, including Hawaii, currently have an adult obesity rate above 30 percent, 41 states have rates of at least 25 percent, and every state has a rate above 20 percent. Sugar-sweetened beverages are the single largest source of added sugars in the American diet, and an average 20-ounce sugarsweetened beverage such as soda contains more than 16 teaspoons of sugar. Obesity increases the risk of serious health conditions such as type 2 diabetes, coronary heart disease, stroke, hypertension, some types of cancer, sleep apnea and other respiratory problems. Obesity-related health conditions have serious economic costs and overweight and obesity may account for \$147 billion in annual health care costs nationally, with Hawaii spending an estimated \$470 million annually on obesity-related medical costs.

A fee of 1 cent per ounce on sugar-sweetened beverages is expected to reduce consumption by 8-10 percent and will raise approximately \$38 million in new revenue in 2015-2016 for obesity prevention programs. This added revenue would establish an obesity prevention fund within the Department of Health for communities. Funds could help to ensure that all schools have Certified Physical Education teachers and adequate and accessible water fountains are available in all schools and parks.

This bill will save lives and help our keiki to be healthier. I respectfully ask you to pass this bill.

Mahalo,

Below are list the resources used for the information used in my testimony.

1Centers for Disease Control and Prevention. Obesity and Overweight for Professionals: Data and Statistics: Adult Obesity. Available at: www.cdc.gov/obesity/data/adult.html.

2Centers for Disease Control and Prevention. Obesity and Overweight for Professionals: Childhood: Data: DNPAO | CDC. Available at: www.cdc.gov/obesity/data/childhood.html.

3Behavioral Risk Factor Surveillance Study, Hawaii State Department of Health 2011

4Centers for Disease Control and Prevention. CDC – Obesity – Facts – Adolescent and School Health. Available at: www.cdc.gov/healthyyouth/obesity/facts.htm.

5Serdula MK, Ivery D, Coates RJ, et al. "Do Obese Children Become Obese Adults? A Review of the Literature." American Journal of Preventive Medicine, 22(2): 167–177, 1993.

6Trust for America's Health. F as in Fat: How Obesity Threatens America's Future. 2012. Available at: <u>http://fasinfat.org/obesity-rates-trends-overview</u>.

7Johnson RK, Appel LJ, Brands M, et al. Dietary Sugars Intake and Cardiovascular Health: A Scientific Statement From the American Heart Association. Circulation, 120: 1011–1120, 2009. Available at: http://circ.ahajournals.org/content/120/11/1011.full.pdf.

8Harvard School of Public Health Nutrition Source. The Nutrition Source:Time to Focus on Healthier Drinks. Boston: Harvard School of Public Health. Available at: www.hsph.harvard.edu/nutritionsource/healthydrinks/focus.

9Obesity, 2012; Am J Public Health 2007; Physical Behavior 2010

10Finkelstein EA, Trogdon JG, Cohen JW, et al. Annual Medical Spending Attributable to Obesity: Payer- and Service-Specific Estimates. Health Affairs, 28(5): w822–w831, 2009. Available at:

www.obesity.procon.org/sourcefiles/FinkelsteinAnnualMedicalSpending.pdf.

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Kenneth Nakamura 1319 Punahou St Honolulu, HI 96826 February 11, 2015

To: The Honorable Josh Green, Chair, Committee on Health The Honorable Glenn Wakai, Vice Chair, Committee on Health Members, Senate Committee on Health

Hrg: Senate Committee on Health; Friday, February 13, 2015, 1:35 p.m.in Conference Room 414

Re: Strong Support for SB 1256, Relating to Obesity Prevention

Thank you for the opportunity to submit testimony in support of SB 1256. I strongly support establishing a fee on sugar-sweetened beverages sold in the State to designate the funds to be used for obesity prevention programs coordinated by the Department of Health.

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Childhood obesity has more than tripled in the past 30 years, and obese children are at least twice as likely as nonobese children to become obese adults. 13 states, including Hawaii, currently have an adult obesity rate above 30 percent, 41 states have rates of at least 25 percent, and every state has a rate above 20 percent. Sugar-sweetened beverages are the single largest source of added sugars in the American diet, and an average 20-ounce sugarsweetened beverage such as soda contains more than 16 teaspoons of sugar. Obesity increases the risk of serious health conditions such as type 2 diabetes, coronary heart disease, stroke, hypertension, some types of cancer, sleep apnea and other respiratory problems. Obesity-related health conditions have serious economic costs and overweight and obesity may account for \$147 billion in annual health care costs nationally, with Hawaii spending an estimated \$470 million annually on obesity-related medical costs.

A fee of 1 cent per ounce on sugar-sweetened beverages is expected to reduce consumption by 8-10 percent and will raise approximately \$38 million in new revenue in 2015-2016 for obesity prevention programs. This added revenue would establish an obesity prevention fund within the Department of Health for communities. Funds could help to ensure that all schools have Certified Physical Education teachers and adequate and accessible water fountains are available in all schools and parks.

This bill will save lives and help our keiki to be healthier. I respectfully ask you to pass this bill.

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Yukiko Morimoto 2550 Kuhio Avenue, Apt. 2205 Honolulu, HI 96815 February 11, 2015

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Kim Swartz 98-1394 Hinu Pl, #B Pearl City, HI 96782

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Michael Kellar 45-401 Mokulele Dr. #32 Kaneohe, HI 96744

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Paul Smith 134 Kapahulu Ave #418 Honolulu-Waikiki, HI 96815

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Valerie Yontz 677 Auwina Street 677 Auwina Street Kailua, HI 96734-3430 Kailua, HI 96734

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Thomas Wills 5079 Maunalani Circle Honolulu, HI 96816

To: The Honorable Josh Green, Chair, Committee on Health The Honorable Glenn Wakai, Vice Chair, Committee on Health Members, Senate Committee on Health

Hrg: Senate Committee on Health; Friday, February 13, 2015, 1:35 p.m.in Conference Room 414

Re: Strong Support for SB 1256, Relating to Obesity Prevention

Thank you for the opportunity to submit testimony in support of SB 1256. I strongly support establishing a fee on sugar-sweetened beverages sold in the State to designate the funds to be used for obesity prevention programs coordinated by the Department of Health.

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Zeyana Saad-Jube 3478 Keahi Place Honolulu, HI 96822

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Michelle Schiffl 1655 Kanapuu Dr Kailua, HI 96734

To: The Honorable Josh Green, Chair, Committee on Health The Honorable Glenn Wakai, Vice Chair, Committee on Health Members, Senate Committee on Health

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Kei-Lin Cerf POB 385699 Waikoloa, HI 96738

To: The Honorable Josh Green, Chair, Committee on Health The Honorable Glenn Wakai, Vice Chair, Committee on Health Members, Senate Committee on Health

Hrg: Senate Committee on Health; Friday, February 13, 2015, 1:35 p.m.in Conference Room 414

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Venkataraman Balaraman 94-1015 Ahiu Place Mililani, HI 96789

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As a retired 29 year public health worker, I have seen the devastating results of consumption of sugar laden drinks on Hawai`i children and adults, including my own family. Establishing a fee on these drinks would be a positive first step for reducing their consumption.

Sally Jo Manea, Epidemiology Specialist, Kauai District health Office, retired

Sally Jo Manea 6415 Olohena Road Kapaa, HI 96746

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Karli Bergheer 221 Mahalani Street, Suite 99 Wailuku, HI 96793

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Rebecca Knight 2439 Kapiolani Blvd #1004 Honolulu, HI 96826

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Napualani Spock Kealaloa Avenue Makawao, HI 96768

To: The Honorable Josh Green, Chair, Committee on Health The Honorable Glenn Wakai, Vice Chair, Committee on Health Members, Senate Committee on Health

Hrg: Senate Committee on Health; Friday, February 13, 2015, 1:35 p.m.in Conference Room 414

Re: Strong Support for SB 1256, Relating to Obesity Prevention

Thank you for the opportunity to submit testimony in support of SB 1256. I strongly support establishing a fee on sugar-sweetened beverages sold in the State to designate the funds to be used for obesity prevention programs coordinated by the Department of Health.

As a cardiologist and Director of Cardiovascular Research at the Medical School I recognize the important role of obesity and resulting diabetes as increasingly common contributors to heart disease. The tax should reduce consumption, directly addressing the problem, and should also support exercise programs at schools, encouraging a healthy life-style in our children.

A fee of 1 cent per ounce on sugar-sweetened beverages is expected to reduce consumption by 8-10 percent and will raise approximately \$38 million in new revenue in 2015-2016 for obesity prevention programs. This added revenue would establish an obesity prevention fund within the Department of Health for communities. Funds could help to ensure that all schools have Certified Physical Education teachers and adequate and accessible water fountains are available in all schools and parks.

This bill will save lives and help our keiki to be healthier. I respectfully ask you to pass this bill.

Mahalo, Ralph Shohet, MD Professor of Medicine Former President of the Oahu Affiliate of the American Heart Association

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Ralph Shohet 4151A Nuuanu Pali Drive Honolulu, HI 96817

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Executive Officers: John Schilf, RSM Hawaii - Chairperson Derek Kurisu, KTA Superstores - Vice Chair Lisa DeCoito, Aloha Petroleum - Treasurer John Erickson, Frito-Lay - Secretary Lauren Zirbel, Executive Director

1050 Bishop St. PMB 235 Honolulu, HI 96813 Fax : 808-791-0702 Telephone : 808-533-1292

TO: COMMITTEE ON HEALTH Senator Josh Green, Chair Senator Glenn Wakai, Vice Chair

FROM: HAWAII FOOD INDUSTRY ASSOCIATION Lauren Zirbel, Executive Director

DATE:	February 13, 2015
TIME:	1:35pm
PLACE:	Conference Room 414

RE: SB1256

Position: Oppose

The Hawaii Food Industry Association is comprised of two hundred member companies representing retailers, suppliers, producers, and distributors of food and beverage related products in the State of Hawaii.

This bill is yet another tax on groceries. Here in Hawaii, even though we pay up to 70% more for groceries than the national average¹, we are still one of the only states that pay taxes on groceries. This "fee" would be an additional regressive, unnecessary, and unfair tax.

The tax in this bill would disproportionately affect retailers, especially small business owners, and lower income consumers, two groups that can least afford an added financial burden. Retailers would have to take on the administrative cost and burden of calculating and implementing this fee, they would also have to pay the fee on all stock on their shelves, and only recuperate it as individual units are sold, and then pay it again when they restock. For retailers the costs associated with this fee go far beyond the fee itself and retailers may have to raises prices on other grocery items in order to make up the difference.

Since the fee amounts to a few cents per individual beverage it is unlikely to affect the purchasing choice of higher income consumers, but it could make the difference to lower income consumers and will certainly be a tremendous cost to retailers. The way that this tax would be implemented makes it seem like an attempt to fill the budget deficit by punishing lower income people for drinking soda and punishing retailers for stocking soda.

¹USDA calculation provided by Civil Beat, "Living Hawaii: Why Is the Price of Paradise so High?" http://www.civilbeat.com/2013/09/19815-living-hawaii-why-is-the-price-of-paradise-so-high/

This bill purports to have the goal of reducing obesity, and also mentions addressing tooth decay. While these goals are extremely laudable, these are complex issues that are not simply related to consuming one type of beverage. The bill cherry picks a few studies, one of which is over 30 years old, to back up these claims, but it does not give a comprehensive explanation of why this added tax is necessary. Given that Hawaii is the healthiest state in the nation² with the second lowest obesity rates in the nation³, and as previously noted, we already pay extremely high prices for groceries, there should be very strong justification for any action by the government that would drive our grocery prices up even more.

In addition to hurting everyday consumers and retailers, other casualty of this bill would be Hawaii's beverage, craft beverage, and bottling industries. These industries provide hundreds of jobs, many in areas where other employment options are limited. While this tax might make some money for the government, it could cost much in terms of economic damage and lost jobs.

Finally, we would ask that when considering this bill the legislature look at the bottle fee which has been placed on these and similar products and is also administered by the Department of Health. As noted in the recent Audit of the Glass Advance Disposal Fee Program there are a range of problems with the current program and "a number of shortcomings we found in the department's administration of the glass ADF, particularly regarding overseeing costs and compliance with state laws." Given that it would seem ill advised to burden the Department it is hard to see how the Department will meet the bill's vague purpose of "Designating the fees to be used for the coordination of obesity prevention programs by the department of health."

This bill has some very admirable goals, but another tax is not the way to achieve them. Especially a tax, which hurts the economy, drives up grocery costs, punishes low income consumers, burdens businesses, and is modeled after a failing program. For these reasons we ask that this measure be deferred indefinitely.

Thank you for the opportunity to testify.

² American Health Rankings

http://www.americashealthrankings.org/HI

³ State of Obesity

http://stateofobesity.org/states/hi/

To: The Honorable Josh Green, Chair, Committee on Health The Honorable Glenn Wakai, Vice Chair, Committee on Health Members, Senate Committee on Health

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This bill will save lives and help our keiki to be healthier. I respectfully ask you to pass this bill.

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Milette Oliveros 1288 Kapiolani Blvd Apt 2308 Honolulu, HI 96814

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Jinan Banna 3029 Lowrey Ave Apt J-3017 Honolulu, HI 96822

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Cheryl Reeser 51-E Kealaloa Ave Makawao, HI 96768

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This bill will save lives and help our keiki to be healthier. I respectfully ask you to pass this bill.

Mahalo, Stacy Haumea

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Stacy Haumea POB 4182 Hilo, HI 96720

To: The Honorable Josh Green, Chair, Committee on Health The Honorable Glenn Wakai, Vice Chair, Committee on Health Members, Senate Committee on Health

Hrg: Senate Committee on Health; Friday, February 13, 2015, 1:35 p.m.in Conference Room 414

Re: Strong Support for SB 1256, Relating to Obesity Prevention

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Howard Saiki 45-480 B Apiki Street Apt. D1202 Kaneohe, HI 96744

To: The Honorable Josh Green, Chair, Committee on Health The Honorable Glenn Wakai, Vice Chair, Committee on Health Members, Senate Committee on Health

Hrg: Senate Committee on Health; Friday, February 13, 2015, 1:35 p.m.in Conference Room 414

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cynthia Damo PO box 715 Hana, HI 96713

To: The Honorable Josh Green, Chair, Committee on Health The Honorable Glenn Wakai, Vice Chair, Committee on Health Members, Senate Committee on Health

Hrg: Senate Committee on Health; Friday, February 13, 2015, 1:35 p.m.in Conference Room 414

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Dina Mezheritsky 119A Kulalani Circle Kula, HI 96790

To: The Honorable Josh Green, Chair, Committee on Health The Honorable Glenn Wakai, Vice Chair, Committee on Health Members, Senate Committee on Health

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Pualei Kaohelaulii 8010 Iwipolena Road P.O. Box 52 Kekaha, HI 96752

<u>SB1256</u>

Submitted on: 2/11/2015 Testimony for HTH on Feb 13, 2015 13:35PM in Conference Room 414

Submitted By	Organization	Testifier Position	Present at Hearing
Maile Goo	Individual	Support	No

Comments: February 11, 2015 To: The Honorable Josh Green, Chair, Committee on Health The Honorable Glenn Wakai, Vice Chair, Committee on Health Members, Senate Committee on Health Hrg: Senate Committee on Health; Friday, February 13, 2015, 1:35 p.m.in Conference Room 414 Re: Strong Support for SB 1256, Relating to Obesity Prevention Thank you for the opportunity to submit testimony in support of SB 1256. I strongly support establishing a fee on sugar-sweetened beverages sold in the State to designate the funds to be used for obesity prevention programs coordinated by the Department of Health. Obesity is a growing problem with about one-third of U.S. adults (35.7 percent) 1 and approximately 17 percent (12.5 million) of children and adolescents aged 2 to 19 years old are obese2. In Hawaii, 57% of adults in Hawaii are overweight or obese and approximately 1 out of 4 children entering Kindergarten are overweight or obese3. Childhood obesity has more than tripled in the past 30 years, and obese children are at least twice as likely as nonobese children to become obese adults. 13 states, including Hawaii, currently have an adult obesity rate above 30 percent, 41 states have rates of at least 25 percent, and every state has a rate above 20 percent. Sugar-sweetened beverages are the single largest source of added sugars in the American diet, and an average 20-ounce sugar-sweetened beverage such as soda contains more than 16 teaspoons of sugar. Obesity increases the risk of serious health conditions such as type 2 diabetes, coronary heart disease, stroke, hypertension, some types of cancer, sleep apnea and other respiratory problems. Obesity-related health conditions have serious economic costs and overweight and obesity may account for \$147 billion in annual health care costs nationally, with Hawaii spending an estimated \$470 million annually on obesity-related medical costs. A fee of 1 cent per ounce on sugar-sweetened beverages is expected to reduce consumption by 8-10 percent and will raise approximately \$38 million in new revenue in 2015-2016 for obesity prevention programs. This added revenue would establish an obesity prevention fund within the Department of Health for communities. Funds could help to ensure that all schools have Certified Physical Education teachers and adequate and accessible water fountains are available in all schools and parks. This bill will save lives and help our keiki to be healthier. I respectfully ask you to pass this bill. Mahalo, Maile Goo 3683 Woodlawn Terrace Place Honolulu, Hawaii 96822

Please note that testimony submitted <u>less than 24 hours prior to the hearing</u>, 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.

Do not reply to this email. This inbox is not monitored. For assistance please email webmaster@capitol.hawaii.gov

Senate Committee on Health Chair Josh Green Vice Chair Glenn Wakai Hawaii State Capitol 415 South Beretania Street

Re: SB 1256, Relating to Obesity Prevention

Dear Chair Green, Vice Chair Wakai, and Members of the Committee,

I am writing to you today on behalf of myself and my fellow employees of the Ball Hawaii Can Plant. My colleagues and I are strongly opposed to SB 1256.

Located in Kapolei, the Ball Hawaii Can Plant is the only can manufacturing plant in Hawaii. Since 1979, we have produced cans for dozens of locally manufactured products.

Our company is a major contributor to the local economy. We support over 45 good jobs.

My colleagues and I are very concerned about the effects SB 1256 would have on our company. The effects of this tax would be far-reaching for us. If this tax passes, the sustainability of the Ball Hawaii Can Plant would be in jeopardy and with it the jobs of my fellow employees.

We are the only company in Hawaii that produces cans. If this tax passes and we shut down, Hawaii would have to import empty cans from the mainland. This would create even more costs for the supply chain and result in higher prices passed onto the consumer.

Obesity is a seriously problem, but singling out one group of products for higher taxes is not the solution. Rather than create new taxes that would put jobs in jeopardy, we need to work together to help educate people about the importance of good diet and exercise.

The Ball Hawaii Can Plant has been a fixture in our state for over 35 years, and we look forward to serving our customers for many years to come. Please don't put our jobs at risk by supporting this policy.

Sincerely,

Marco Blanco

To: The Honorable Josh Green, Chair, Committee on Health The Honorable Glenn Wakai, Vice Chair, Committee on Health Members, Senate Committee on Health

Hrg: Senate Committee on Health; Friday, February 13, 2015, 1:35 p.m.in Conference Room 414

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Stuart Coleman 2121 Algaroba St., #1107 Honolulu, HI 96826 Ball Corporation Michelle Matsuoka – Administrative Manager 91-320 Komohana Street February 11, 2015

Senate Committee on Health Chair Josh Green Vice Chair Glenn Wakai Hawaii State Capitol 415 South Beretania Street

Re: SB 1256, Relating to Obesity Prevention

Dear Chair Green, Vice Chair Wakai, and Members of the Committee,

My name is Michelle Matsuoka and I am writing to you today on behalf of myself and an employee of the Ball Hawaii Can Plant. I am strongly opposed to SB 1256.

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The Ball Hawaii Can Plant has been a fixture in our state for over 35 years, and we look forward to serving our customers for many years to come. Please don't put our jobs at risk by supporting this policy.

Sincerely, Michelle Matsuoka Jeff Martin Ball Corporation 91-320 Komohana Street Kapolei, Hawaii 96707

February 11, 2015

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Located in Kapolei, the Ball Hawaii Can Plant is the only can manufacturing plant in Hawaii. Since 1979, we have produced cans for dozens of locally manufactured products.

Our company is a major contributor to the local economy. We support over 45 good jobs.

My colleagues and I are very concerned about the effects SB 1256 would have on our company. The effects of this tax would be far-reaching for us. If this tax passes, the sustainability of the Ball Hawaii Can Plant would be in jeopardy and with it the jobs of my fellow employees.

We are the only company in Hawaii that produces cans. If this tax passes and we shut down, Hawaii would have to import empty cans from the mainland. This would create even more costs for the supply chain and result in higher prices passed onto the consumer.

Obesity is a seriously problem, but singling out one group of products for higher taxes is not the solution. Rather than create new taxes that would put jobs in jeopardy, we need to work together to help educate people about the importance of good diet and exercise.

The Ball Hawaii Can Plant has been a fixture in our state for over 35 years, and we look forward to serving our customers for many years to come. Please don't put our jobs at risk by supporting this policy.

Sincerely,

Jeff Martin Ball Corporation 91-320 Komohana St. Kapolei, Hawaii 96707

Senate Committee on Health Chair Josh Green Vice Chair Glenn Wakai Hawaii State Capitol 415 South Beretania Street

Re: SB 1256, Relating to Obesity Prevention

Dear Chair Green, Vice Chair Wakai, and Members of the Committee,

Aloha my name is Simi T Leo, and I am writing to you today on behalf of myself and my fellow employees of the Ball Hawaii Can Plant. My colleagues and I are strongly opposed to SB 1256.

Located in Kapolei, the Ball Hawaii Can Plant is the only can manufacturing plant in Hawaii. Since 1979, we have produced cans for dozens of locally manufactured products.

Our company is a major contributor to the local economy. We support over 45 good jobs.

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Sincerely,

Simi T Leo

TESTIMONY: Jean Butel

To:	The Honorable Josh Green, Chair, Committee on Health
	The Honorable Glenn Wakai, Vice Chair, Committee on Health
	Members, Senate Committee on Health
From:	Jean Butel
Date:	February 11, 2015
Hrg:	House Committee on Health

Re: Strong Support for SB 1256, Relating to Obesity Prevention

Thank you for the opportunity to submit testimony in support of SB 1256. I strongly support establishing a fee on sugarsweetened beverages sold in the State to designate the funds to be used for obesity prevention programs coordinated by the Department of Health.

Obesity is a growing problem with about one-third of U.S. adults (35.7 percent)ⁱ and approximately 17 percent (12.5 million) of children and adolescents aged 2 to 19 years old are obeseⁱⁱ. In Hawaii, 57% of adults in Hawaii are overweight or obese and approximately 1 out of 4 children entering Kindergarten are overweight or obeseⁱⁱⁱ.

I should know I was once an obese adult. I have lost 100 pounds and it wasn't easy. Gaining weight is easy. There are "empty" calories in many foods and beverages - calories that add pounds and make us fat and unhealthy. Sugar sweetened beverages are a big source of those empty calories. Having been an obese adult, I know the pitfalls of bad habits and "of just having one won't make a difference" mentality. It does. One soda contains about 150 calories. 150 x 365 = 54,750 calories or about 10 pounds a year. If a 10% decrease in sugar sweetened beverage consumption is realized then we would expect to see a decrease in added sugar and calories in the American diet, a step in the right direction.

Childhood obesity has more than tripled in the past 30 years^{iv}, and obese children are at least twice as likely as nonobese children to become obese adults^v. I was one of those "pretty plus" children. 13 states, including Hawaii, currently have an adult obesity rate above 30 percent, 41 states have rates of at least 25 percent, and every state has a rate above 20 percent^{vi}. Sugar-sweetened beverages are the single largest source of added sugars in the American diet^{vii}, and an average 20-ounce sugar-sweetened beverage such as soda contains more than 16 teaspoons of sugar^{viii}. Obesity increases the risk of serious health conditions such as type 2 diabetes, coronary heart disease, stroke, hypertension, some types of cancer, sleep apnea and other respiratory problems^{ix}. Obesity-related health conditions have serious economic costs and overweight and obesity may account for \$147 billion in annual health care costs nationally^x, with Hawaii spending an estimated \$470 million annually on obesity-related medical costs^{xi}.

A fee of 1 cent per ounce on sugar-sweetened beverages is expected to reduce consumption by 8-10 percent^{xii} and will raise approximately \$38 million in new revenue in 2015-2016 for obesity prevention programs^{xiii}. This added revenue would establish an obesity prevention fund within the Department of Health for communities. Funds could help to ensure that all schools have Certified Physical Education teachers and adequate and accessible water fountains are available in all schools and parks.

This bill will save lives and help our keiki to be healthier. I respectfully ask you to pass this bill.

Mahalo,

Jean A. Butel

ⁱ Centers for Disease Control and Prevention. Obesity and Overweight for Professionals: Data and Statistics: Adult Obesity. Available at: www.cdc.gov/obesity/data/adult.html.

ⁱⁱ Centers for Disease Control and Prevention. *Obesity and Overweight for Professionals: Childhood: Data: DNPAO | CDC*. Available at: <u>www.cdc.gov/obesity/data/childhood.html</u>.

iii Behavioral Risk Factor Surveillance Study, Hawaii State Department of Health 2011

^{iv} Centers for Disease Control and Prevention. CDC – Obesity – Facts – Adolescent and School Health. Available at:

www.cdc.gov/healthyyouth/obesity/facts.htm.

^v Serdula MK, Ivery D, Coates RJ, et al. "Do Obese Children Become Obese Adults? A Review of the Literature." American Journal of Preventive Medicine, 22(2): 167–177, 1993.

^{vi} Trust for America's Health. *F as in Fat: How Obesity Threatens America's Future*. 2012. Available at: <u>http://fasinfat.org/obesity-rates-</u> <u>trends-overview</u>.

^{vii} Johnson RK, Appel LJ, Brands M, et al. Dietary Sugars Intake and Cardiovascular Health: A Scientific Statement From the American Heart Association. *Circulation*, 120: 1011–1120, 2009. Available at: <u>http://circ.ahajournals.org/content/120/11/1011.full.pdf</u>.

viii Harvard School of Public Health Nutrition Source. *The Nutrition Source: Time to Focus on Healthier Drinks*. Boston: Harvard School of Public Health. Available at: <u>www.hsph.harvard.edu/nutritionsource/healthy-drinks/focus</u>.

^{ix} Obesity, 2012; Am J Public Health 2007; Physical Behavior 2010

 ^x Finkelstein EA, Trogdon JG, Cohen JW, et al. Annual Medical Spending Attributable to Obesity: Payer- and Service-Specific Estimates. *Health Affairs*, 28(5): w822–w831, 2009. Available at: <u>www.obesity.procon.org/sourcefiles/FinkelsteinAnnualMedicalSpending.pdf</u>.
^{xi} Obesity, 2012; 20(1): 214-220

^{xii} Andreyeva T, Long MW, and Brownell KD. The Impact of Food Prices on Consumption: A Systematic Review of Research on the Price Elasticity of Demand for Food. *American Journal of Public Health*, 100(2): 216–222, 2010. Available at:

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^{xiii} <u>Obesity (Silver Spring).</u> 2012 Jan;20(1):214-20. doi: 10.1038/oby.2011.169. Epub 2011 Jun 16.

To: The Honorable Josh Green, Chair, Committee on Health The Honorable Glenn Wakai, Vice Chair, Committee on Health Members, Senate Committee on Health

Hrg: Senate Committee on Health; Friday, February 13, 2015, 1:35 p.m.in Conference Room 414

Re: Strong Support for SB 1256, Relating to Obesity Prevention

Thank you for the opportunity to submit testimony in support of SB 1256. I strongly support establishing a fee on sugar-sweetened beverages sold in the State to designate the funds to be used for obesity prevention programs coordinated by the Department of Health.

Obesity is a growing problem with about one-third of U.S. adults (35.7 percent) 1 and approximately 17 percent (12.5 million) of children and adolescents aged 2 to 19 years old are obese2. In Hawaii, 57% of adults in Hawaii are overweight or obese and approximately 1 out of 4 children entering Kindergarten are overweight or obese3.

Childhood obesity has more than tripled in the past 30 years, and obese children are at least twice as likely as nonobese children to become obese adults. 13 states, including Hawaii, currently have an adult obesity rate above 30 percent, 41 states have rates of at least 25 percent, and every state has a rate above 20 percent. Sugar-sweetened beverages are the single largest source of added sugars in the American diet, and an average 20-ounce sugarsweetened beverage such as soda contains more than 16 teaspoons of sugar. Obesity increases the risk of serious health conditions such as type 2 diabetes, coronary heart disease, stroke, hypertension, some types of cancer, sleep apnea and other respiratory problems. Obesity-related health conditions have serious economic costs and overweight and obesity may account for \$147 billion in annual health care costs nationally, with Hawaii spending an estimated \$470 million annually on obesity-related medical costs.

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This bill will save lives and help our keiki to be healthier. I respectfully ask you to pass this bill.

Mahalo,

Below are list the resources used for the information used in my testimony.

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Jennifer Hausler 1429 kuloko st Kuloko Pearl city, HI 96782



Hawaii Restaurant Association

2909 Waialae Avenue #22 Honolulu, Hawaii 96826 www.HawaiiRestaurant.org

Phone: (808) 944-9105 Email: info@HawaiiRestaurant.org

Date: February 11, 2015

To: Sen. Josh Green, Chair Members on the Committee on Health

From: Victor Lim, Hawaii Restaurant Association

Subject: SB 1256 Sugar-Sweetened Beverage Fee

The Hawaii Restaurant Association stands in opposition of SB 1256 which proposes to charge a fee for sugarsweetened fee as a means to fund obesity prevention and many other causes.

Obesity is a very complicated issue dealing with many factors from total calorie intake, physical exercise that result in calorie burn, life styles, genetics, etc. Just blaming sugar-sweetened beverages on this issue when so many factors might contribute to obesity is not correct.

Sugar-sweetened beverages consumption here in Hawaii and America has been on a steady decline over the past years and the sale of low calorie and non calorie beverages including water is on the rise. This is true not only in the general retail markets but also in the restaurant industry.

Menu labeling showing calorie contents on restaurant menus, movie theatres' foods and beverages, convenience stores foods and beverages, supermarket prepared foods will be coming into full affect before the end of 2015. For those of us that has been doing menu labeling for the past few years, we do see a change in consumer buying patterns. We should allow the current laws to come into full effect before imposing additional taxes (fees) on our consumers. This bill will result in unfairly hurting the ones that can least afford because of what the consequences will be with additional costs.

Thank you very much for allowing us to share our point of view.

To: The Honorable Josh Green, Chair, Committee on Health The Honorable Glenn Wakai, Vice Chair, Committee on Health Members, Senate Committee on Health

Hrg: Senate Committee on Health; Friday, February 13, 2015, 1:35 p.m.in Conference Room 414

Re: Strong Support for SB 1256, Relating to Obesity Prevention

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This bill will save lives and help our keiki to be healthier. I respectfully ask you to pass this bill.

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Kanani Kilbey 1319 Punahou Street, 7th floor Attn: Dr. Bryan Mih, HEALTHY program Honolulu, HI 96826

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Brent Tamamoto 99-210 Kauhale Street Suite C-22 Aiea, HI 96701

Senate Committee on Health Chair Josh Green Vice Chair Glenn Wakai Hawaii State Capitol 415 South Beretania Street

Re: SB 1256, Relating to Obesity Prevention

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Our company is a major contributor to the local economy. We support over 45 good jobs.

My colleagues and I are very concerned about the effects SB 1256 would have on our company. The effects of this tax would be far-reaching for us. If this tax passes, the sustainability of the Ball Hawaii Can Plant would be in jeopardy and with it the jobs of my fellow employees.

We are the only company in Hawaii that produces cans. If this tax passes and we shut down, Hawaii would have to import empty cans from the mainland. This would create even more costs for the supply chain and result in higher prices passed onto the consumer.

Obesity is a seriously problem, but singling out one group of products for higher taxes is not the solution. Rather than create new taxes that would put jobs in jeopardy, we need to work together to help educate people about the importance of good diet and exercise.

The Ball Hawaii Can Plant has been a fixture in our state for over 35 years, and we look forward to serving our customers for many years to come. Please don't put our jobs at risk by supporting this policy.

Sincerely,

John Perez

Senate Committee on Health Chair Josh Green Vice Chair Glenn Wakai Hawaii State Capitol 415 South Beretania Street

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Sincerely,

Lyndon Shove

Senate Committee on Health Chair Josh Green Vice Chair Glenn Wakai Hawaii State Capitol 415 South Beretania Street

Re: SB 1256, Relating to Obesity Prevention

Dear Chair Green, Vice Chair Wakai, and Members of the Committee,

Aloha my name is Randy Canoy, and I am writing to you today on behalf of myself and my fellow employees of the Ball Hawaii Can Plant. My colleagues and I are strongly opposed to SB 1256.

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Sincerely,

Randy Canoy

Senate Committee on Health Chair: Josh Green Vice Chair: Glenn Wakai Hawaii State Capitol 415 South Beretania Street

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Kyle Pace
Senate Committee on Health Chair Josh Green Vice Chair Glenn Wakai Hawaii State Capitol 415 South Beretania Street

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Jeremy Dias

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The Ball Hawaii Can Plant has been a fixture in our state for over 35 years, and we look forward to serving our customers for many years to come. Please don't put our jobs at risk by supporting this policy.

Sincerely,

Daryl Kami

Senate Committee on Health Chair Josh Green Vice Chair Glenn Wakai Hawaii State Capitol 415 South Beretania Street

Re: SB 1256, Relating to Obesity Prevention

Dear Chair Green, Vice Chair Wakai, and Members of the Committee,

I am writing to you today on behalf of myself and my fellow employees of the Ball Hawaii Can Plant. My colleagues and I are strongly opposed to SB 1256.

Located in Kapolei, the Ball Hawaii Can Plant is the only can manufacturing plant in Hawaii. Since 1979, we have produced cans for dozens of locally manufactured products.

Our company is a major contributor to the local economy. We support over 45 good jobs.

My colleagues and I are very concerned about the effects SB 1256 would have on our company. The effects of this tax would be far-reaching for us. If this tax passes, the sustainability of the Ball Hawaii Can Plant would be in jeopardy and with it the jobs of my fellow employees.

We are the only company in Hawaii that produces cans. If this tax passes and we shut down, Hawaii would have to import empty cans from the mainland. This would create even more costs for the supply chain and result in higher prices passed onto the consumer.

Obesity is a seriously problem, but singling out one group of products for higher taxes is not the solution. Rather than create new taxes that would put jobs in jeopardy, we need to work together to help educate people about the importance of good diet and exercise.

The Ball Hawaii Can Plant has been a fixture in our state for over 35 years, and we look forward to serving our customers for many years to come. Please don't put our jobs at risk by supporting this policy.

Sincerely,

Michael Moniz

To:	The Honorable Josh Green, Chair, Committee on Health
	The Honorable Glenn Wakai, Vice Chair, Committee on Health
	Members, Senate Committee on Health

From: Melissa-Anne Wong, MS, RD, LD, CLE

Date: February 12, 2015

Hrg: House Committee on Health;

Re: Strong Support for SB 1256, Relating to Obesity Prevention

Thank you for the opportunity to submit testimony in support of SB 1256. I strongly support establishing a fee on sugar-sweetened beverages sold in the State to designate the funds to be used for obesity prevention programs coordinated by the Department of Health.

Obesity is a growing problem with about one-third of U.S. adults (35.7 percent)¹ and approximately 17 percent (12.5 million) of children and adolescents aged 2 to 19 years old are obese². In Hawaii, 57% of adults in Hawaii are overweight or obese and approximately 1 out of 4 children entering Kindergarten are overweight or obese³.

Childhood obesity has more than tripled in the past 30 years⁴, and obese children are at least twice as likely as non-obese children to become obese adults⁵. 13 states, including Hawaii, currently have an adult obesity rate above 30 percent, 41 states have rates of at least 25 percent, and every state has a rate above 20 percent⁶. Sugar-sweetened beverages are the single largest source of added sugars in the American diet⁷, and an average 20-ounce sugar-sweetened beverage such as soda contains more than 16 teaspoons of sugar⁸. Obesity increases the risk of serious health conditions such as type 2 diabetes, coronary heart disease, stroke, hypertension, some types of cancer, sleep apnea and other respiratory problems⁹. Obesity-related health conditions have serious economic costs and overweight and obesity

¹ Centers for Disease Control and Prevention. *Obesity and Overweight for Professionals: Data and Statistics: Adult Obesity.* Available at: <u>www.cdc.gov/obesity/data/adult.html</u>.

² Centers for Disease Control and Prevention. *Obesity and Overweight for Professionals: Childhood: Data: DNPAO | CDC.* Available at: <u>www.cdc.gov/obesity/data/childhood.html</u>.

³ Behavioral Risk Factor Surveillance Study, Hawaii State Department of Health 2011

⁴ Centers for Disease Control and Prevention. *CDC – Obesity – Facts – Adolescent and School Health*. Available at: <u>www.cdc.gov/healthyyouth/obesity/facts.htm</u>.

⁵ Serdula MK, Ivery D, Coates RJ, et al. "Do Obese Children Become Obese Adults? A Review of the Literature." American Journal of Preventive Medicine, 22(2): 167–177, 1993.

⁶ Trust for America's Health. *F as in Fat: How Obesity Threatens America's Future*. 2012. Available at: <u>http://fasinfat.org/obesity-rates-trends-overview</u>.

⁷ Johnson RK, Appel LJ, Brands M, et al. Dietary Sugars Intake and Cardiovascular Health: A Scientific Statement From the American Heart Association. *Circulation*, 120: 1011–1120, 2009. Available at: http://circ.ahajournals.org/content/120/11/1011.full.pdf.

⁸ Harvard School of Public Health Nutrition Source. *The Nutrition Source: Time to Focus on Healthier Drinks*. Boston: Harvard School of Public Health. Available at: <u>www.hsph.harvard.edu/nutritionsource/healthy-drinks/focus</u>.

⁹ Obesity, 2012; Am J Public Health 2007; Physical Behavior 2010

may account for \$147 billion in annual health care costs nationally¹⁰, with Hawaii spending an estimated \$470 million annually on obesity-related medical costs¹¹.

A fee of 1 cent per ounce on sugar-sweetened beverages is expected to reduce consumption by 8-10 percent¹² and will raise approximately \$38 million in new revenue in 2015-2016 for obesity prevention programs¹³. This added revenue would establish an obesity prevention fund within the Department of Health for communities. Funds could help to ensure that all schools have Certified Physical Education teachers and adequate and accessible water fountains are available in all schools and parks.

This bill will save lives and help our keiki to be healthier. I respectfully ask you to pass this bill.

Mahalo,

Melissa-Anne Wong, MS, RD, LD, CLE Registered Dietitian Waimanalo Health Center

¹⁰ Finkelstein EA, Trogdon JG, Cohen JW, et al. Annual Medical Spending Attributable to Obesity: Payer- and Service-Specific Estimates. *Health Affairs*, 28(5): w822–w831, 2009. Available at: *www.obesity.procon.org/sourcefiles/FinkelsteinAnnualMedicalSpending.pdf*.

¹¹ Obesity, 2012; 20(1): 214-220

 ¹² Andreyeva T, Long MW, and Brownell KD. The Impact of Food Prices on Consumption: A Systematic Review of Research on the Price Elasticity of Demand for Food. *American Journal of Public Health*, 100(2): 216–222, 2010.
 Available at: <u>www.yaleruddcenter.org/resources/upload/docs/what/economics/FoodPricesElasticity_AJPH_2.10.pdf</u>.
 ¹³ Obesity (Silver Spring). 2012 Jan;20(1):214-20. doi: 10.1038/oby.2011.169. Epub 2011 Jun 16.

Senate Committee on Health Chair Josh Green Vice Chair Glenn Wakai Hawaii State Capitol 415 South Beretania Street

Re: SB 1256, Relating to Obesity Prevention

Dear Chair Green, Vice Chair Wakai, and Members of the Committee,

I am writing to you today on behalf of myself and my fellow employees of the Ball Hawaii Can Plant. My colleagues and I are strongly opposed to SB 1256.

Located in Kapolei, the Ball Hawaii Can Plant is the only can manufacturing plant in Hawaii. Since 1979, we have produced cans for dozens of locally manufactured products.

Our company is a major contributor to the local economy. We support over 45 good jobs.

My colleagues and I are very concerned about the effects SB 1256 would have on our company. The effects of this tax would be far-reaching for us. If this tax passes, the sustainability of the Ball Hawaii Can Plant would be in jeopardy and with it the jobs of my fellow employees.

We are the only company in Hawaii that produces cans. If this tax passes and we shut down, Hawaii would have to import empty cans from the mainland. This would create even more costs for the supply chain and result in higher prices passed onto the consumer.

Obesity is a seriously problem, but singling out one group of products for higher taxes is not the solution. Rather than create new taxes that would put jobs in jeopardy, we need to work together to help educate people about the importance of good diet and exercise.

The Ball Hawaii Can Plant has been a fixture in our state for over 35 years, and we look forward to serving our customers for many years to come. Please don't put our jobs at risk by supporting this policy.

Sincerely,

Rodney K. Yogi

Senate Committee on Health Chair Josh Green Vice Chair Glenn Wakai Hawaii State Capitol 415 South Beretania Street

Re: SB 1256, Relating to Obesity Prevention

Dear Chair Green, Vice Chair Wakai, and Members of the Committee,

I am writing to you today on behalf of myself and my fellow employees of the Ball Hawaii Can Plant. My colleagues and I are strongly opposed to SB 1256.

Located in Kapolei, the Ball Hawaii Can Plant is the only can manufacturing plant in Hawaii. Since 1979, we have produced cans for dozens of locally manufactured products.

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Sincerely,

Duane Gella

Senate Committee on Health Chair Josh Green Vice Chair Glenn Wakai Hawaii State Capitol 415 South Beretania Street

Re: SB 1256, Relating to Obesity Prevention

Dear Chair Green, Vice Chair Wakai, and Members of the Committee,

I am writing to you today on behalf of myself and my fellow employees of the Ball Hawaii Can Plant. My colleagues and I are strongly opposed to SB 1256.

Located in Kapolei, the Ball Hawaii Can Plant is the only can manufacturing plant in Hawaii. Since 1979, we have produced cans for dozens of locally manufactured products.

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Sincerely,

Carmelita Manangan

Senate Committee on Health Chair Josh Green Vice Chair Glenn Wakai Hawaii State Capitol 415 South Beretania Street

Re: SB 1256, Relating to Obesity Prevention

Dear Chair Green, Vice Chair Wakai, and Members of the Committee,

I am writing to you today on behalf of myself and my fellow employees of the Ball Hawaii Can Plant. My colleagues and I are strongly opposed to SB 1256.

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Sincerely,

Glenn Rayno

From:	mailinglist@capitol.hawaii.gov
To:	HTHTestimony
Cc:	tshigemuraball@outlook.com
Subject:	Submitted testimony for SB1256 on Feb 13, 2015 13:35PM
Date:	Thursday, February 12, 2015 9:09:46 AM
Attachments:	<u>SB 1256.docx</u>

Submitted on: 2/12/2015 Testimony for HTH on Feb 13, 2015 13:35PM in Conference Room 414

Submitted By	Organization	Testifier Position	Present at Hearing
Tina Shigemura	Individual	Oppose	No

Comments:

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.

From:	mailinglist@capitol.hawaii.gov
To:	HTHTestimony
Cc:	08dapaga@gmail.com
Subject:	Submitted testimony for SB1256 on Feb 13, 2015 13:35PM
Date:	Thursday, February 12, 2015 9:28:15 AM
Attachments:	Testimony-D.Pdocx

Submitted on: 2/12/2015 Testimony for HTH on Feb 13, 2015 13:35PM in Conference Room 414

Submitted By	Organization	Testifier Position	Present at Hearing
Dara Pagaduan	Individual	Support	No

Comments:

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From:	mailinglist@capitol.hawaii.gov
To:	HTHTestimony
Cc:	Markwalden808@outlook.com
Subject:	Submitted testimony for SB1256 on Feb 13, 2015 13:35PM
Date:	Thursday, February 12, 2015 9:34:44 AM
Attachments:	<u>SB 1256.docx</u>

Submitted on: 2/12/2015 Testimony for HTH on Feb 13, 2015 13:35PM in Conference Room 414

Submitted By	Organization	Testifier Position	Present at Hearing
Mark Walden	Individual	Oppose	No

Comments:

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From:	mailinglist@capitol.hawaii.gov
To:	HTHTestimony
Cc:	justinkmi@hawaii.rr.com
Subject:	Submitted testimony for SB1256 on Feb 13, 2015 13:35PM
Date:	Thursday, February 12, 2015 9:46:41 AM
Attachments:	SB 1256 personal testimony.docx

Submitted on: 2/12/2015 Testimony for HTH on Feb 13, 2015 13:35PM in Conference Room 414

Submitted By	Organization	Testifier Position	Present at Hearing
Justin Miyashiro	Individual	Support	No

Comments:

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.

From:	mailinglist@capitol.hawaii.gov
To:	HTHTestimony
Cc:	weeklyupdate@hawaii.rr.com
Subject:	Submitted testimony for SB1256 on Feb 13, 2015 13:35PM
Date:	Thursday, February 12, 2015 9:52:20 AM
Attachments:	SB 1256 testimony.docx

Submitted on: 2/12/2015 Testimony for HTH on Feb 13, 2015 13:35PM in Conference Room 414

Submitted By	Organization	Testifier Position	Present at Hearing
Cristeta Ancog	Individual	Support	No

Comments:

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From:	mailinglist@capitol.hawaii.gov
To:	HTHTestimony
Cc:	JeffersonMiguel808@outlook.com
Subject:	Submitted testimony for SB1256 on Feb 13, 2015 13:35PM
Date:	Thursday, February 12, 2015 9:53:07 AM
Attachments:	<u>SB 1256.docx</u>

Submitted on: 2/12/2015 Testimony for HTH on Feb 13, 2015 13:35PM in Conference Room 414

Submitted By	Organization	Testifier Position	Present at Hearing
Jefferson Miguel	Individual	Oppose	No

Comments:

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From:	mailinglist@capitol.hawaii.gov
To:	HTHTestimony
Cc:	Marksamson808@outlook.com
Subject:	Submitted testimony for SB1256 on Feb 13, 2015 13:35PM
Date:	Thursday, February 12, 2015 10:03:10 AM
Attachments:	<u>SB 1256.docx</u>

Submitted on: 2/12/2015 Testimony for HTH on Feb 13, 2015 13:35PM in Conference Room 414

Submitted By	Organization	Testifier Position	Present at Hearing
Mark Samson	Individual	Oppose	No

Comments:

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.

From:	mailinglist@capitol.hawaii.gov
To:	HTHTestimony
Cc:	jessica@hiphi.org
Subject:	Submitted testimony for SB1256 on Feb 13, 2015 13:35PM
Date:	Thursday, February 12, 2015 10:07:49 AM
Attachments:	sb1256 support 2.12.15.pdf

Submitted on: 2/12/2015 Testimony for HTH on Feb 13, 2015 13:35PM in Conference Room 414

Submitted By	Organization	Testifier Position	Present at Hearing
Jessica Yamauchi	Hawaii Public Health Institute	Support	Yes

Comments:

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From:	mailinglist@capitol.hawaii.gov
To:	HTHTestimony
Cc:	KaliaKBrown@outlook.com
Subject:	Submitted testimony for SB1256 on Feb 13, 2015 13:35PM
Date:	Thursday, February 12, 2015 10:16:56 AM
Attachments:	<u>SB 1256.docx</u>

Submitted on: 2/12/2015 Testimony for HTH on Feb 13, 2015 13:35PM in Conference Room 414

Submitted By	Organization	Testifier Position	Present at Hearing
Kalia Brown	Individual	Oppose	No

Comments:

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From:	mailinglist@capitol.hawaii.gov
To:	HTHTestimony
Cc:	GordonKihune@outlook.com
Subject:	Submitted testimony for SB1256 on Feb 13, 2015 13:35PM
Date:	Thursday, February 12, 2015 10:49:02 AM
Attachments:	<u>SB 1256.docx</u>

Submitted on: 2/12/2015 Testimony for HTH on Feb 13, 2015 13:35PM in Conference Room 414

Submitted By	Organization	Testifier Position	Present at Hearing
Gordon Kihune	Individual	Oppose	No

Comments:

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From:	mailinglist@capitol.hawaii.gov
To:	HTHTestimony
Cc:	CharleyLebehn@outlook.com
Subject:	Submitted testimony for SB1256 on Feb 13, 2015 13:35PM
Date:	Thursday, February 12, 2015 10:57:02 AM
Attachments:	<u>SB 1256.docx</u>

Submitted on: 2/12/2015 Testimony for HTH on Feb 13, 2015 13:35PM in Conference Room 414

Submitted By	Organization	Testifier Position	Present at Hearing
Charley Lebehn	Individual	Oppose	No

Comments:

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.

From:	mailinglist@capitol.hawaii.gov
To:	HTHTestimony
Cc:	Arnoldedwards808@outlook.com
Subject:	Submitted testimony for SB1256 on Feb 13, 2015 13:35PM
Date:	Thursday, February 12, 2015 11:07:54 AM
Attachments:	<u>SB 1256.docx</u>

Submitted on: 2/12/2015 Testimony for HTH on Feb 13, 2015 13:35PM in Conference Room 414

Submitted By	Organization	Testifier Position	Present at Hearing
Arnold Edwards	Individual	Oppose	No

Comments:

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From:	mailinglist@capitol.hawaii.gov
To:	HTHTestimony
Cc:	FJamora@outlook.com
Subject:	Submitted testimony for SB1256 on Feb 13, 2015 13:35PM
Date:	Thursday, February 12, 2015 11:13:22 AM
Attachments:	<u>SB 1256.docx</u>

Submitted on: 2/12/2015 Testimony for HTH on Feb 13, 2015 13:35PM in Conference Room 414

Submitted By	Organization	Testifier Position	Present at Hearing
Francis Jamora	Individual	Oppose	No

Comments:

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From:	mailinglist@capitol.hawaii.gov
To:	HTHTestimony
Cc:	FrancisKahalekai@outlook.com
Subject:	Submitted testimony for SB1256 on Feb 13, 2015 13:35PM
Date:	Thursday, February 12, 2015 11:21:22 AM
Attachments:	<u>SB 1256.docx</u>

Submitted on: 2/12/2015 Testimony for HTH on Feb 13, 2015 13:35PM in Conference Room 414

Submitted By	Organization	Testifier Position	Present at Hearing
Francis Kahalekai	Individual	Oppose	No

Comments:

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From:	mailinglist@capitol.hawaii.gov
To:	HTHTestimony
Cc:	pheckathorn@queens.org
Subject:	Submitted testimony for SB1256 on Feb 13, 2015 13:35PM
Date:	Thursday, February 12, 2015 12:12:12 PM
Attachments:	02-13-15 - Sugar Sweetened Beverage Fee - SB 1256.docx

Submitted on: 2/12/2015 Testimony for HTH on Feb 13, 2015 13:35PM in Conference Room 414

Submitted By	Organization	Testifier Position	Present at Hearing
Paula Yoshioka	The Queen's Health Systems	Support	No

Comments:

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From:	mailinglist@capitol.hawaii.gov
To:	HTHTestimony
Cc:	pukapants 01@hotmail.com
Subject:	Submitted testimony for SB1256 on Feb 13, 2015 13:35PM
Date:	Thursday, February 12, 2015 12:49:22 PM
Attachments:	<u>SB 1256.docx</u>

Submitted on: 2/12/2015 Testimony for HTH on Feb 13, 2015 13:35PM in Conference Room 414

Submitted By	Organization	Testifier Position	Present at Hearing
Vincent Leong	Individual	Oppose	Yes

Comments:

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From:	mailinglist@capitol.hawaii.gov
To:	HTHTestimony
Cc:	coreykim@outlook.com
Subject:	Submitted testimony for SB1256 on Feb 13, 2015 13:35PM
Date:	Thursday, February 12, 2015 12:52:57 PM
Attachments:	<u>SB 1256.docx</u>

Submitted on: 2/12/2015 Testimony for HTH on Feb 13, 2015 13:35PM in Conference Room 414

Submitted By	Organization	Testifier Position	Present at Hearing
Corey Kim	Individual	Oppose	No

Comments:

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From:	Ann T. Yotsuji
То:	HTHTestimony
Subject:	HTH: Testimony for SB 1256 (David Thorp, American Beverage Association)
Date:	Thursday, February 12, 2015 1:15:29 PM
Attachments:	image001.png
	D. Thorp, ABA-sb1256-HTH-2.13.2015.pdf

Attached is testimony for SB 1256 Relating to Obesity Prevention:

Testifier: David Thorp, Senior Director, Government Affairs, American Beverage Association
Position: Oppose
Committee Hearing: HTH
Hearing Date: February 13, 2015
Hearing Time: 1:35 p.m.
Testifier will be present.

Thank you.

Ann Yotsuji, Secretary to R. Brian Tsujimura Ashford & Wriston



First Hawaiian Center, Suite 1400 999 Bishop Street Honolulu, Hawaii 96813 Tel: (808) 539-0822 Fax: (808) 533-4945 E-mail <u>ayotsuji@awlaw.com</u> Website: <u>www.ashfordwriston.com</u>

This message is only intended for the addressee named above. Its contents may be privileged or otherwise protected. Any unauthorized use, disclosure or copying of this message or its contents is prohibited. If you have received this message by mistake, please notify us immediately by reply mail or by collect telephone call.

Any personal opinions expressed in this message do not necessarily represent the views of Ashford & Wriston.

From:	mailinglist@capitol.hawaii.gov		
То:	HTHTestimony		
Cc:	ashley@rodriguezstrategies.com		
Subject:	Submitted testimony for SB1256 on Feb 13, 2015 13:35PM		
Date:	Thursday, February 12, 2015 2:43:00 PM		
Attachments:	Tailor Made Vending SB 1256 Testimony .pdf		

Submitted on: 2/12/2015 Testimony for HTH on Feb 13, 2015 13:35PM in Conference Room 414

Submit	ted By	Organization	Testifier Position	Present at Hearing
Vikki F	erstler	Tailor Made Vending	Oppose	No

Comments:

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From:	mailinglist@capitol.hawaii.gov		
То:	HTHTestimony		
Cc:	Iho@hawaiipublicpolicy.com		
Subject:	Submitted testimony for SB1256 on Feb 13, 2015 13:35PM		
Date:	Thursday, February 12, 2015 4:44:56 PM		
Attachments:	20150213 Times SB1256 Sugar Beverage Tax OPPOSE.pdf		

Submitted on: 2/12/2015 Testimony for HTH on Feb 13, 2015 13:35PM in Conference Room 414

Submitted By	Organization	Testifier Position	Present at Hearing
Bob Gutierrez	Times Supermarkets	Oppose	No

Comments:

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From:	mailinglist@capitol.hawaii.gov
To:	HTHTestimony
Cc:	don.weisman@heart.org
Subject:	Submitted testimony for SB1256 on Feb 13, 2015 13:35PM
Date:	Thursday, February 12, 2015 5:13:41 PM
Attachments:	American Heart Association testimony in SUPPORT of SB 1256 Relating to Obesity Prevention.docx

Submitted on: 2/12/2015 Testimony for HTH on Feb 13, 2015 13:35PM in Conference Room 414

Submitted By	Organization	Testifier Position	Present at Hearing
Don Weisman	American Heart Association	Support	Yes

Comments:

Please note that testimony submitted <u>less than 24 hours prior to the hearing</u>, 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.

From:	mailinglist@capitol.hawaii.gov		
To:	HTHTestimony		
Cc:	bryan@andayalaw.com		
Subject:	Submitted testimony for SB1256 on Feb 13, 2015 13:35PM		
Date:	Thursday, February 12, 2015 5:53:23 PM		
Attachments:	SB 1256 (2015) - Soda Tax Testimony.pdf		

Submitted on: 2/12/2015 Testimony for HTH on Feb 13, 2015 13:35PM in Conference Room 414

Submitted By	Organization	Testifier Position	Present at Hearing
Eddie Flores, Jr.	L & L Franchise	Oppose	No

Comments:

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To: The Honorable Josh Green, Chair, Committee on Health The Honorable Glenn Wakai, Vice Chair, Committee on Health Members, Senate Committee on Health

From: Aaron Higashi, Nanakuli High School 9th grade

Date: February 11, 2015

Hrg: Senate Committee on Health;

Re: Strong Support for SB 1256, Relating to Obesity Prevention

Thank you for the opportunity to submit testimony in support of SB 1256. I strongly support establishing a fee on sugar-sweetened beverages sold in the State to designate the funds to be used for obesity prevention programs coordinated by the Department of Health.

Obesity is a growing problem with about one-third of U.S. adults (35.7 percent)¹ and approximately 17 percent (12.5 million) of children and adolescents aged 2 to 19 years old are obese². In Hawaii, 57% of adults in Hawaii are overweight or obese and approximately 1 out of 4 children entering Kindergarten are overweight or obese³.

Childhood obesity has more than tripled in the past 30 years⁴, and obese children are at least twice as likely as non-obese children to become obese adults⁵. 13 states, including Hawaii, currently have an adult obesity rate above 30 percent, 41 states have rates of at least 25 percent, and every state has a rate above 20 percent⁶. Sugar-sweetened beverages are the single largest source of added sugars in the American diet⁷, and an average 20-ounce sugar-sweetened beverage such as soda contains more than 16 teaspoons of sugar⁸. Obesity increases the risk of serious health conditions such as type 2 diabetes, coronary heart disease, stroke, hypertension, some types of cancer, sleep apnea and other respiratory problems⁹. Obesity-related health conditions have serious economic costs and overweight and obesity

¹ Centers for Disease Control and Prevention. *Obesity and Overweight for Professionals: Data and Statistics: Adult Obesity.* Available at: <u>www.cdc.gov/obesity/data/adult.html</u>.

² Centers for Disease Control and Prevention. *Obesity and Overweight for Professionals: Childhood: Data: DNPAO | CDC.* Available at: <u>www.cdc.gov/obesity/data/childhood.html</u>.

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⁵ Serdula MK, Ivery D, Coates RJ, et al. "Do Obese Children Become Obese Adults? A Review of the Literature." American Journal of Preventive Medicine, 22(2): 167–177, 1993.

⁶ Trust for America's Health. *F as in Fat: How Obesity Threatens America's Future*. 2012. Available at: <u>http://fasinfat.org/obesity-rates-trends-overview</u>.

⁷ Johnson RK, Appel LJ, Brands M, et al. Dietary Sugars Intake and Cardiovascular Health: A Scientific Statement From the American Heart Association. *Circulation*, 120: 1011–1120, 2009. Available at: http://circ.ahajournals.org/content/120/11/1011.full.pdf.

⁸ Harvard School of Public Health Nutrition Source. *The Nutrition Source: Time to Focus on Healthier Drinks*. Boston: Harvard School of Public Health. Available at: <u>www.hsph.harvard.edu/nutritionsource/healthy-drinks/focus</u>.

⁹ Obesity, 2012; Am J Public Health 2007; Physical Behavior 2010
A fee of 1 cent per ounce on sugar-sweetened beverages is expected to reduce consumption by 8-10 percent¹² and will raise approximately \$38 million in new revenue in 2015-2016 for obesity prevention programs¹³. This added revenue would establish an obesity prevention fund within the Department of Health for communities. Funds could help to ensure that all schools have Certified Physical Education teachers and adequate and accessible water fountains are available in all schools and parks.

This bill will save lives and help our keiki to be healthier. I respectfully ask you to pass this bill.

Mahalo,

Aaron Higashi

¹⁰ Finkelstein EA, Trogdon JG, Cohen JW, et al. Annual Medical Spending Attributable to Obesity: Payer- and Service-Specific Estimates. *Health Affairs*, 28(5): w822–w831, 2009. Available at: www.obesity.procon.org/sourcefiles/FinkelsteinAnnualMedicalSpending.pdf.

¹¹ Obesity, 2012; 20(1): 214-220

¹² Andreyeva T, Long MW, and Brownell KD. The Impact of Food Prices on Consumption: A Systematic Review of Research on the Price Elasticity of Demand for Food. American Journal of Public Health, 100(2): 216–222, 2010. Available at: www.yaleruddcenter.org/resources/upload/docs/what/economics/FoodPricesElasticity AJPH 2.10.pdf.

¹³ Obesity (Silver Spring). 2012 Jan;20(1):214-20. doi: 10.1038/oby.2011.169. Epub 2011 Jun 16.

- To: The Honorable Josh Green, Chair, Committee on Health The Honorable Glenn Wakai, Vice Chair, Committee on Health Members, Senate Committee on Health
- From: AJ Bunton, Nanakuli High School student

Hrg: Senate Committee on Health;

Re: Strong Support for SB 1256, Relating to Obesity Prevention

Thank you for the opportunity to submit testimony in support of SB 1256. I strongly support establishing a fee on sugar-sweetened beverages sold in the State to designate the funds to be used for obesity prevention programs coordinated by the Department of Health.

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⁸ Harvard School of Public Health Nutrition Source. *The Nutrition Source: Time to Focus on Healthier Drinks*. Boston: Harvard School of Public Health. Available at: <u>www.hsph.harvard.edu/nutritionsource/healthy-drinks/focus</u>.

⁹ Obesity, 2012; Am J Public Health 2007; Physical Behavior 2010

A fee of 1 cent per ounce on sugar-sweetened beverages is expected to reduce consumption by 8-10 percent¹² and will raise approximately \$38 million in new revenue in 2015-2016 for obesity prevention programs¹³. This added revenue would establish an obesity prevention fund within the Department of Health for communities. Funds could help to ensure that all schools have Certified Physical Education teachers and adequate and accessible water fountains are available in all schools and parks.

This bill will save lives and help our keiki to be healthier. I respectfully ask you to pass this bill.

Mahalo,

AJ Bunton

¹⁰ Finkelstein EA, Trogdon JG, Cohen JW, et al. Annual Medical Spending Attributable to Obesity: Payer- and Service-Specific Estimates. *Health Affairs*, 28(5): w822–w831, 2009. Available at: www.obesity.procon.org/sourcefiles/FinkelsteinAnnualMedicalSpending.pdf.

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¹³ Obesity (Silver Spring). 2012 Jan;20(1):214-20. doi: 10.1038/oby.2011.169. Epub 2011 Jun 16.

- To: The Honorable Josh Green, Chair, Committee on Health The Honorable Glenn Wakai, Vice Chair, Committee on Health Members, Senate Committee on Health
- From: Barabara Sesepasara-Kotrys, Nanakuli Intermediate School student

Hrg: Senate Committee on Health;

Re: Strong Support for SB 1256, Relating to Obesity Prevention

Thank you for the opportunity to submit testimony in support of SB 1256. I strongly support establishing a fee on sugar-sweetened beverages sold in the State to designate the funds to be used for obesity prevention programs coordinated by the Department of Health.

Obesity is a growing problem with about one-third of U.S. adults (35.7 percent)¹ and approximately 17 percent (12.5 million) of children and adolescents aged 2 to 19 years old are obese². In Hawaii, 57% of adults in Hawaii are overweight or obese and approximately 1 out of 4 children entering Kindergarten are overweight or obese³.

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⁵ Serdula MK, Ivery D, Coates RJ, et al. "Do Obese Children Become Obese Adults? A Review of the Literature." American Journal of Preventive Medicine, 22(2): 167–177, 1993.

⁶ Trust for America's Health. *F as in Fat: How Obesity Threatens America's Future*. 2012. Available at: <u>http://fasinfat.org/obesity-rates-trends-overview</u>.

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⁸ Harvard School of Public Health Nutrition Source. *The Nutrition Source: Time to Focus on Healthier Drinks*. Boston: Harvard School of Public Health. Available at: <u>www.hsph.harvard.edu/nutritionsource/healthy-drinks/focus</u>.

⁹ Obesity, 2012; Am J Public Health 2007; Physical Behavior 2010

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This bill will save lives and help our keiki to be healthier. I respectfully ask you to pass this bill.

Mahalo,

Barbara Sesepasara-Kotrys

¹⁰ Finkelstein EA, Trogdon JG, Cohen JW, et al. Annual Medical Spending Attributable to Obesity: Payer- and Service-Specific Estimates. *Health Affairs*, 28(5): w822–w831, 2009. Available at: www.obesity.procon.org/sourcefiles/FinkelsteinAnnualMedicalSpending.pdf.

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¹³ Obesity (Silver Spring). 2012 Jan;20(1):214-20. doi: 10.1038/oby.2011.169. Epub 2011 Jun 16.

To: The Honorable Josh Green, Chair, Committee on Health The Honorable Glenn Wakai, Vice Chair, Committee on Health Members, Senate Committee on Health

From: Brandi Soon, Nanakuli Intermediate School student

Date: February 11, 2015

Hrg: Senate Committee on Health;

Re: Strong Support for SB 1256, Relating to Obesity Prevention

Thank you for the opportunity to submit testimony in support of SB 1256. I strongly support establishing a fee on sugar-sweetened beverages sold in the State to designate the funds to be used for obesity prevention programs coordinated by the Department of Health.

Obesity is a growing problem with about one-third of U.S. adults (35.7 percent)¹ and approximately 17 percent (12.5 million) of children and adolescents aged 2 to 19 years old are obese². In Hawaii, 57% of adults in Hawaii are overweight or obese and approximately 1 out of 4 children entering Kindergarten are overweight or obese³.

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⁷ Johnson RK, Appel LJ, Brands M, et al. Dietary Sugars Intake and Cardiovascular Health: A Scientific Statement From the American Heart Association. *Circulation*, 120: 1011–1120, 2009. Available at: http://circ.ahajournals.org/content/120/11/1011.full.pdf.

⁸ Harvard School of Public Health Nutrition Source. *The Nutrition Source: Time to Focus on Healthier Drinks*. Boston: Harvard School of Public Health. Available at: <u>www.hsph.harvard.edu/nutritionsource/healthy-drinks/focus</u>.

⁹ Obesity, 2012; Am J Public Health 2007; Physical Behavior 2010

A fee of 1 cent per ounce on sugar-sweetened beverages is expected to reduce consumption by 8-10 percent¹² and will raise approximately \$38 million in new revenue in 2015-2016 for obesity prevention programs¹³. This added revenue would establish an obesity prevention fund within the Department of Health for communities. Funds could help to ensure that all schools have Certified Physical Education teachers and adequate and accessible water fountains are available in all schools and parks.

This bill will save lives and help our keiki to be healthier. I respectfully ask you to pass this bill.

Mahalo,

Brandi Soon

¹⁰ Finkelstein EA, Trogdon JG, Cohen JW, et al. Annual Medical Spending Attributable to Obesity: Payer- and Service-Specific Estimates. *Health Affairs*, 28(5): w822–w831, 2009. Available at: www.obesity.procon.org/sourcefiles/FinkelsteinAnnualMedicalSpending.pdf.

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¹³ Obesity (Silver Spring). 2012 Jan;20(1):214-20. doi: 10.1038/oby.2011.169. Epub 2011 Jun 16.

- To: The Honorable Josh Green, Chair, Committee on Health The Honorable Glenn Wakai, Vice Chair, Committee on Health Members, Senate Committee on Health
- From: Bronson Sevellino, Nanakuli Intermediate School student

Hrg: Senate Committee on Health;

Re: Strong Support for SB 1256, Relating to Obesity Prevention

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⁹ Obesity, 2012; Am J Public Health 2007; Physical Behavior 2010

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This bill will save lives and help our keiki to be healthier. I respectfully ask you to pass this bill.

Mahalo,

Bronson Sevellino

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¹³ Obesity (Silver Spring). 2012 Jan;20(1):214-20. doi: 10.1038/oby.2011.169. Epub 2011 Jun 16.

To: The Honorable Josh Green, Chair, Committee on Health The Honorable Glenn Wakai, Vice Chair, Committee on Health Members, Senate Committee on Health

From: Byron Potts-Kalulu, Nanakuli High School student

Date: February 11, 2015

Hrg: Senate Committee on Health;

Re: Strong Support for SB 1256, Relating to Obesity Prevention

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This bill will save lives and help our keiki to be healthier. I respectfully ask you to pass this bill.

Mahalo,

Byron Potts-Kalulu

¹⁰ Finkelstein EA, Trogdon JG, Cohen JW, et al. Annual Medical Spending Attributable to Obesity: Payer- and Service-Specific Estimates. *Health Affairs*, 28(5): w822–w831, 2009. Available at: www.obesity.procon.org/sourcefiles/FinkelsteinAnnualMedicalSpending.pdf.

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- To: The Honorable Josh Green, Chair, Committee on Health The Honorable Glenn Wakai, Vice Chair, Committee on Health Members, Senate Committee on Health
- From: Ceriah Altobar, Nanakuli Intermediate School student

Hrg: Senate Committee on Health;

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Mahalo,

Ceriah Altobar

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- To: The Honorable Josh Green, Chair, Committee on Health The Honorable Glenn Wakai, Vice Chair, Committee on Health Members, Senate Committee on Health
- From: Cerise Altobar-Gomes, Nanakuli Intermediate School student

Hrg: Senate Committee on Health;

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⁹ Obesity, 2012; Am J Public Health 2007; Physical Behavior 2010

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This bill will save lives and help our keiki to be healthier. I respectfully ask you to pass this bill.

Mahalo,

Cerise Altobar-Gomes

¹⁰ Finkelstein EA, Trogdon JG, Cohen JW, et al. Annual Medical Spending Attributable to Obesity: Payer- and Service-Specific Estimates. *Health Affairs*, 28(5): w822–w831, 2009. Available at: www.obesity.procon.org/sourcefiles/FinkelsteinAnnualMedicalSpending.pdf.

¹¹ Obesity, 2012; 20(1): 214-220

¹² Andreyeva T, Long MW, and Brownell KD. The Impact of Food Prices on Consumption: A Systematic Review of Research on the Price Elasticity of Demand for Food. American Journal of Public Health, 100(2): 216–222, 2010. Available at: www.yaleruddcenter.org/resources/upload/docs/what/economics/FoodPricesElasticity AJPH 2.10.pdf.

¹³ Obesity (Silver Spring). 2012 Jan;20(1):214-20. doi: 10.1038/oby.2011.169. Epub 2011 Jun 16.

- To: The Honorable Josh Green, Chair, Committee on Health The Honorable Glenn Wakai, Vice Chair, Committee on Health Members, Senate Committee on Health
- From: Christina Ayala-Espinaso, Nanakuli High School student

Hrg: Senate Committee on Health;

Re: Strong Support for SB 1256, Relating to Obesity Prevention

Thank you for the opportunity to submit testimony in support of SB 1256. I strongly support establishing a fee on sugar-sweetened beverages sold in the State to designate the funds to be used for obesity prevention programs coordinated by the Department of Health.

Obesity is a growing problem with about one-third of U.S. adults (35.7 percent)¹ and approximately 17 percent (12.5 million) of children and adolescents aged 2 to 19 years old are obese². In Hawaii, 57% of adults in Hawaii are overweight or obese and approximately 1 out of 4 children entering Kindergarten are overweight or obese³.

¹ Centers for Disease Control and Prevention. *Obesity and Overweight for Professionals: Data and Statistics: Adult Obesity.* Available at: <u>www.cdc.gov/obesity/data/adult.html</u>.

² Centers for Disease Control and Prevention. *Obesity and Overweight for Professionals: Childhood: Data: DNPAO | CDC.* Available at: <u>www.cdc.gov/obesity/data/childhood.html</u>.

³ Behavioral Risk Factor Surveillance Study, Hawaii State Department of Health 2011

⁴ Centers for Disease Control and Prevention. *CDC – Obesity – Facts – Adolescent and School Health*. Available at: <u>www.cdc.gov/healthyyouth/obesity/facts.htm</u>.

⁵ Serdula MK, Ivery D, Coates RJ, et al. "Do Obese Children Become Obese Adults? A Review of the Literature." American Journal of Preventive Medicine, 22(2): 167–177, 1993.

⁶ Trust for America's Health. *F as in Fat: How Obesity Threatens America's Future*. 2012. Available at: <u>http://fasinfat.org/obesity-rates-trends-overview</u>.

⁷ Johnson RK, Appel LJ, Brands M, et al. Dietary Sugars Intake and Cardiovascular Health: A Scientific Statement From the American Heart Association. *Circulation*, 120: 1011–1120, 2009. Available at: http://circ.ahajournals.org/content/120/11/1011.full.pdf.

⁸ Harvard School of Public Health Nutrition Source. *The Nutrition Source: Time to Focus on Healthier Drinks*. Boston: Harvard School of Public Health. Available at: <u>www.hsph.harvard.edu/nutritionsource/healthy-drinks/focus</u>.

⁹ Obesity, 2012; Am J Public Health 2007; Physical Behavior 2010

A fee of 1 cent per ounce on sugar-sweetened beverages is expected to reduce consumption by 8-10 percent¹² and will raise approximately \$38 million in new revenue in 2015-2016 for obesity prevention programs¹³. This added revenue would establish an obesity prevention fund within the Department of Health for communities. Funds could help to ensure that all schools have Certified Physical Education teachers and adequate and accessible water fountains are available in all schools and parks.

This bill will save lives and help our keiki to be healthier. I respectfully ask you to pass this bill.

Mahalo,

Christina Ayala-Espinaso

¹⁰ Finkelstein EA, Trogdon JG, Cohen JW, et al. Annual Medical Spending Attributable to Obesity: Payer- and Service-Specific Estimates. *Health Affairs*, 28(5): w822–w831, 2009. Available at: www.obesity.procon.org/sourcefiles/FinkelsteinAnnualMedicalSpending.pdf.

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¹² Andreyeva T, Long MW, and Brownell KD. The Impact of Food Prices on Consumption: A Systematic Review of Research on the Price Elasticity of Demand for Food. American Journal of Public Health, 100(2): 216–222, 2010. Available at: www.yaleruddcenter.org/resources/upload/docs/what/economics/FoodPricesElasticity AJPH 2.10.pdf.

¹³ Obesity (Silver Spring). 2012 Jan;20(1):214-20. doi: 10.1038/oby.2011.169. Epub 2011 Jun 16.

To: The Honorable Josh Green, Chair, Committee on Health The Honorable Glenn Wakai, Vice Chair, Committee on Health Members, Senate Committee on Health

From: Hilari Ballenti, Nanakuli Intermediate School student

Date: February 11, 2015

Hrg: Senate Committee on Health;

Re: Strong Support for SB 1256, Relating to Obesity Prevention

Thank you for the opportunity to submit testimony in support of SB 1256. I strongly support establishing a fee on sugar-sweetened beverages sold in the State to designate the funds to be used for obesity prevention programs coordinated by the Department of Health.

Obesity is a growing problem with about one-third of U.S. adults (35.7 percent)¹ and approximately 17 percent (12.5 million) of children and adolescents aged 2 to 19 years old are obese². In Hawaii, 57% of adults in Hawaii are overweight or obese and approximately 1 out of 4 children entering Kindergarten are overweight or obese³.

¹ Centers for Disease Control and Prevention. *Obesity and Overweight for Professionals: Data and Statistics: Adult Obesity.* Available at: <u>www.cdc.gov/obesity/data/adult.html</u>.

² Centers for Disease Control and Prevention. *Obesity and Overweight for Professionals: Childhood: Data: DNPAO | CDC.* Available at: <u>www.cdc.gov/obesity/data/childhood.html</u>.

³ Behavioral Risk Factor Surveillance Study, Hawaii State Department of Health 2011

⁴ Centers for Disease Control and Prevention. *CDC – Obesity – Facts – Adolescent and School Health*. Available at: <u>www.cdc.gov/healthyyouth/obesity/facts.htm</u>.

⁵ Serdula MK, Ivery D, Coates RJ, et al. "Do Obese Children Become Obese Adults? A Review of the Literature." American Journal of Preventive Medicine, 22(2): 167–177, 1993.

⁶ Trust for America's Health. *F as in Fat: How Obesity Threatens America's Future*. 2012. Available at: <u>http://fasinfat.org/obesity-rates-trends-overview</u>.

⁷ Johnson RK, Appel LJ, Brands M, et al. Dietary Sugars Intake and Cardiovascular Health: A Scientific Statement From the American Heart Association. *Circulation*, 120: 1011–1120, 2009. Available at: http://circ.ahajournals.org/content/120/11/1011.full.pdf.

⁸ Harvard School of Public Health Nutrition Source. *The Nutrition Source: Time to Focus on Healthier Drinks*. Boston: Harvard School of Public Health. Available at: <u>www.hsph.harvard.edu/nutritionsource/healthy-drinks/focus</u>.

⁹ Obesity, 2012; Am J Public Health 2007; Physical Behavior 2010

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This bill will save lives and help our keiki to be healthier. I respectfully ask you to pass this bill.

Mahalo,

Hilari Ballenti

¹⁰ Finkelstein EA, Trogdon JG, Cohen JW, et al. Annual Medical Spending Attributable to Obesity: Payer- and Service-Specific Estimates. *Health Affairs*, 28(5): w822–w831, 2009. Available at: www.obesity.procon.org/sourcefiles/FinkelsteinAnnualMedicalSpending.pdf.

¹¹ Obesity, 2012; 20(1): 214-220

¹² Andreyeva T, Long MW, and Brownell KD. The Impact of Food Prices on Consumption: A Systematic Review of Research on the Price Elasticity of Demand for Food. American Journal of Public Health, 100(2): 216–222, 2010. Available at: www.yaleruddcenter.org/resources/upload/docs/what/economics/FoodPricesElasticity AJPH 2.10.pdf.

¹³ Obesity (Silver Spring). 2012 Jan;20(1):214-20. doi: 10.1038/oby.2011.169. Epub 2011 Jun 16.

To: The Honorable Josh Green, Chair, Committee on Health The Honorable Glenn Wakai, Vice Chair, Committee on Health Members, Senate Committee on Health

From: Ipo Kea, Nanakuli Intermediate School student 8th grade

Date: February 11, 2015

Hrg: Senate Committee on Health;

Re: Strong Support for SB 1256, Relating to Obesity Prevention

Thank you for the opportunity to submit testimony in support of SB 1256. I strongly support establishing a fee on sugar-sweetened beverages sold in the State to designate the funds to be used for obesity prevention programs coordinated by the Department of Health.

Obesity is a growing problem with about one-third of U.S. adults (35.7 percent)¹ and approximately 17 percent (12.5 million) of children and adolescents aged 2 to 19 years old are obese². In Hawaii, 57% of adults in Hawaii are overweight or obese and approximately 1 out of 4 children entering Kindergarten are overweight or obese³.

¹ Centers for Disease Control and Prevention. *Obesity and Overweight for Professionals: Data and Statistics: Adult Obesity.* Available at: <u>www.cdc.gov/obesity/data/adult.html</u>.

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³ Behavioral Risk Factor Surveillance Study, Hawaii State Department of Health 2011

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⁵ Serdula MK, Ivery D, Coates RJ, et al. "Do Obese Children Become Obese Adults? A Review of the Literature." American Journal of Preventive Medicine, 22(2): 167–177, 1993.

⁶ Trust for America's Health. *F as in Fat: How Obesity Threatens America's Future*. 2012. Available at: <u>http://fasinfat.org/obesity-rates-trends-overview</u>.

⁷ Johnson RK, Appel LJ, Brands M, et al. Dietary Sugars Intake and Cardiovascular Health: A Scientific Statement From the American Heart Association. *Circulation*, 120: 1011–1120, 2009. Available at: http://circ.ahajournals.org/content/120/11/1011.full.pdf.

⁸ Harvard School of Public Health Nutrition Source. *The Nutrition Source: Time to Focus on Healthier Drinks*. Boston: Harvard School of Public Health. Available at: <u>www.hsph.harvard.edu/nutritionsource/healthy-drinks/focus</u>.

⁹ Obesity, 2012; Am J Public Health 2007; Physical Behavior 2010

A fee of 1 cent per ounce on sugar-sweetened beverages is expected to reduce consumption by 8-10 percent¹² and will raise approximately \$38 million in new revenue in 2015-2016 for obesity prevention programs¹³. This added revenue would establish an obesity prevention fund within the Department of Health for communities. Funds could help to ensure that all schools have Certified Physical Education teachers and adequate and accessible water fountains are available in all schools and parks.

This bill will save lives and help our keiki to be healthier. I respectfully ask you to pass this bill.

Mahalo,

Ipo Kea

¹⁰ Finkelstein EA, Trogdon JG, Cohen JW, et al. Annual Medical Spending Attributable to Obesity: Payer- and Service-Specific Estimates. *Health Affairs*, 28(5): w822–w831, 2009. Available at: www.obesity.procon.org/sourcefiles/FinkelsteinAnnualMedicalSpending.pdf.

¹¹ Obesity, 2012; 20(1): 214-220

¹² Andreyeva T, Long MW, and Brownell KD. The Impact of Food Prices on Consumption: A Systematic Review of Research on the Price Elasticity of Demand for Food. American Journal of Public Health, 100(2): 216–222, 2010. Available at: www.yaleruddcenter.org/resources/upload/docs/what/economics/FoodPricesElasticity_AJPH_2.10.pdf.

¹³ Obesity (Silver Spring). 2012 Jan;20(1):214-20. doi: 10.1038/oby.2011.169. Epub 2011 Jun 16.

- To: The Honorable Josh Green, Chair, Committee on Health The Honorable Glenn Wakai, Vice Chair, Committee on Health Members, Senate Committee on Health
- From: Iwa Magallanes-Kaleikoa, Nanakuli Intermediate School student

Hrg: Senate Committee on Health;

Re: Strong Support for SB 1256, Relating to Obesity Prevention

Thank you for the opportunity to submit testimony in support of SB 1256. I strongly support establishing a fee on sugar-sweetened beverages sold in the State to designate the funds to be used for obesity prevention programs coordinated by the Department of Health.

Obesity is a growing problem with about one-third of U.S. adults (35.7 percent)¹ and approximately 17 percent (12.5 million) of children and adolescents aged 2 to 19 years old are obese². In Hawaii, 57% of adults in Hawaii are overweight or obese and approximately 1 out of 4 children entering Kindergarten are overweight or obese³.

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⁵ Serdula MK, Ivery D, Coates RJ, et al. "Do Obese Children Become Obese Adults? A Review of the Literature." American Journal of Preventive Medicine, 22(2): 167–177, 1993.

⁶ Trust for America's Health. *F as in Fat: How Obesity Threatens America's Future*. 2012. Available at: <u>http://fasinfat.org/obesity-rates-trends-overview</u>.

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⁸ Harvard School of Public Health Nutrition Source. *The Nutrition Source: Time to Focus on Healthier Drinks*. Boston: Harvard School of Public Health. Available at: <u>www.hsph.harvard.edu/nutritionsource/healthy-drinks/focus</u>.

⁹ Obesity, 2012; Am J Public Health 2007; Physical Behavior 2010

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This bill will save lives and help our keiki to be healthier. I respectfully ask you to pass this bill.

Mahalo,

Iwa Magallanes-Kaleikoa

¹⁰ Finkelstein EA, Trogdon JG, Cohen JW, et al. Annual Medical Spending Attributable to Obesity: Payer- and Service-Specific Estimates. *Health Affairs*, 28(5): w822–w831, 2009. Available at: www.obesity.procon.org/sourcefiles/FinkelsteinAnnualMedicalSpending.pdf.

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¹² Andreyeva T, Long MW, and Brownell KD. The Impact of Food Prices on Consumption: A Systematic Review of Research on the Price Elasticity of Demand for Food. American Journal of Public Health, 100(2): 216–222, 2010. Available at: www.yaleruddcenter.org/resources/upload/docs/what/economics/FoodPricesElasticity AJPH 2.10.pdf.

¹³ Obesity (Silver Spring). 2012 Jan;20(1):214-20. doi: 10.1038/oby.2011.169. Epub 2011 Jun 16.

To: The Honorable Josh Green, Chair, Committee on Health The Honorable Glenn Wakai, Vice Chair, Committee on Health Members, Senate Committee on Health

From: Jarod Peahi, Nanakuli Intermediate School student 8th grade

Date: February 11, 2015

Hrg: Senate Committee on Health;

Re: Strong Support for SB 1256, Relating to Obesity Prevention

Thank you for the opportunity to submit testimony in support of SB 1256. I strongly support establishing a fee on sugar-sweetened beverages sold in the State to designate the funds to be used for obesity prevention programs coordinated by the Department of Health.

Obesity is a growing problem with about one-third of U.S. adults (35.7 percent)¹ and approximately 17 percent (12.5 million) of children and adolescents aged 2 to 19 years old are obese². In Hawaii, 57% of adults in Hawaii are overweight or obese and approximately 1 out of 4 children entering Kindergarten are overweight or obese³.

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² Centers for Disease Control and Prevention. *Obesity and Overweight for Professionals: Childhood: Data: DNPAO | CDC.* Available at: <u>www.cdc.gov/obesity/data/childhood.html</u>.

³ Behavioral Risk Factor Surveillance Study, Hawaii State Department of Health 2011

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⁵ Serdula MK, Ivery D, Coates RJ, et al. "Do Obese Children Become Obese Adults? A Review of the Literature." American Journal of Preventive Medicine, 22(2): 167–177, 1993.

⁶ Trust for America's Health. *F as in Fat: How Obesity Threatens America's Future*. 2012. Available at: <u>http://fasinfat.org/obesity-rates-trends-overview</u>.

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⁹ Obesity, 2012; Am J Public Health 2007; Physical Behavior 2010

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This bill will save lives and help our keiki to be healthier. I respectfully ask you to pass this bill.

Mahalo,

Jarod Peahi

¹⁰ Finkelstein EA, Trogdon JG, Cohen JW, et al. Annual Medical Spending Attributable to Obesity: Payer- and Service-Specific Estimates. *Health Affairs*, 28(5): w822–w831, 2009. Available at: www.obesity.procon.org/sourcefiles/FinkelsteinAnnualMedicalSpending.pdf.

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¹³ Obesity (Silver Spring). 2012 Jan;20(1):214-20. doi: 10.1038/oby.2011.169. Epub 2011 Jun 16.

- To: The Honorable Josh Green, Chair, Committee on Health The Honorable Glenn Wakai, Vice Chair, Committee on Health Members, Senate Committee on Health
- From: Jason Hulo, Nanakuli High School student

Hrg: Senate Committee on Health;

Re: Strong Support for SB 1256, Relating to Obesity Prevention

Thank you for the opportunity to submit testimony in support of SB 1256. I strongly support establishing a fee on sugar-sweetened beverages sold in the State to designate the funds to be used for obesity prevention programs coordinated by the Department of Health.

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¹ Centers for Disease Control and Prevention. *Obesity and Overweight for Professionals: Data and Statistics: Adult Obesity.* Available at: <u>www.cdc.gov/obesity/data/adult.html</u>.

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³ Behavioral Risk Factor Surveillance Study, Hawaii State Department of Health 2011

⁴ Centers for Disease Control and Prevention. *CDC – Obesity – Facts – Adolescent and School Health*. Available at: <u>www.cdc.gov/healthyyouth/obesity/facts.htm</u>.

⁵ Serdula MK, Ivery D, Coates RJ, et al. "Do Obese Children Become Obese Adults? A Review of the Literature." American Journal of Preventive Medicine, 22(2): 167–177, 1993.

⁶ Trust for America's Health. *F as in Fat: How Obesity Threatens America's Future*. 2012. Available at: <u>http://fasinfat.org/obesity-rates-trends-overview</u>.

⁷ Johnson RK, Appel LJ, Brands M, et al. Dietary Sugars Intake and Cardiovascular Health: A Scientific Statement From the American Heart Association. *Circulation*, 120: 1011–1120, 2009. Available at: http://circ.ahajournals.org/content/120/11/1011.full.pdf.

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This bill will save lives and help our keiki to be healthier. I respectfully ask you to pass this bill.

Mahalo,

Jason Hulo

¹⁰ Finkelstein EA, Trogdon JG, Cohen JW, et al. Annual Medical Spending Attributable to Obesity: Payer- and Service-Specific Estimates. *Health Affairs*, 28(5): w822–w831, 2009. Available at: www.obesity.procon.org/sourcefiles/FinkelsteinAnnualMedicalSpending.pdf.

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¹³ Obesity (Silver Spring). 2012 Jan;20(1):214-20. doi: 10.1038/oby.2011.169. Epub 2011 Jun 16.

To: The Honorable Josh Green, Chair, Committee on Health The Honorable Glenn Wakai, Vice Chair, Committee on Health Members, Senate Committee on Health

From: Jason Rosa, Nanakuli High School 9th grade

Date: February 11, 2015

Hrg: Senate Committee on Health;

Re: Strong Support for SB 1256, Relating to Obesity Prevention

Thank you for the opportunity to submit testimony in support of SB 1256. I strongly support establishing a fee on sugar-sweetened beverages sold in the State to designate the funds to be used for obesity prevention programs coordinated by the Department of Health.

Obesity is a growing problem with about one-third of U.S. adults (35.7 percent)¹ and approximately 17 percent (12.5 million) of children and adolescents aged 2 to 19 years old are obese². In Hawaii, 57% of adults in Hawaii are overweight or obese and approximately 1 out of 4 children entering Kindergarten are overweight or obese³.

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² Centers for Disease Control and Prevention. *Obesity and Overweight for Professionals: Childhood: Data: DNPAO | CDC.* Available at: <u>www.cdc.gov/obesity/data/childhood.html</u>.

³ Behavioral Risk Factor Surveillance Study, Hawaii State Department of Health 2011

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⁵ Serdula MK, Ivery D, Coates RJ, et al. "Do Obese Children Become Obese Adults? A Review of the Literature." American Journal of Preventive Medicine, 22(2): 167–177, 1993.

⁶ Trust for America's Health. *F as in Fat: How Obesity Threatens America's Future*. 2012. Available at: <u>http://fasinfat.org/obesity-rates-trends-overview</u>.

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This bill will save lives and help our keiki to be healthier. I respectfully ask you to pass this bill.

Mahalo,

Jason Rosa

¹⁰ Finkelstein EA, Trogdon JG, Cohen JW, et al. Annual Medical Spending Attributable to Obesity: Payer- and Service-Specific Estimates. *Health Affairs*, 28(5): w822–w831, 2009. Available at: www.obesity.procon.org/sourcefiles/FinkelsteinAnnualMedicalSpending.pdf.

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¹³ Obesity (Silver Spring). 2012 Jan;20(1):214-20. doi: 10.1038/oby.2011.169. Epub 2011 Jun 16.

To: The Honorable Josh Green, Chair, Committee on Health The Honorable Glenn Wakai, Vice Chair, Committee on Health Members, Senate Committee on Health

From: Jhero Costales, Nanakuli High School student

Date: February 11, 2015

Hrg: Senate Committee on Health;

Re: Strong Support for SB 1256, Relating to Obesity Prevention

Thank you for the opportunity to submit testimony in support of SB 1256. I strongly support establishing a fee on sugar-sweetened beverages sold in the State to designate the funds to be used for obesity prevention programs coordinated by the Department of Health.

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³ Behavioral Risk Factor Surveillance Study, Hawaii State Department of Health 2011

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⁶ Trust for America's Health. *F as in Fat: How Obesity Threatens America's Future*. 2012. Available at: <u>http://fasinfat.org/obesity-rates-trends-overview</u>.

⁷ Johnson RK, Appel LJ, Brands M, et al. Dietary Sugars Intake and Cardiovascular Health: A Scientific Statement From the American Heart Association. *Circulation*, 120: 1011–1120, 2009. Available at: http://circ.ahajournals.org/content/120/11/1011.full.pdf.

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⁹ Obesity, 2012; Am J Public Health 2007; Physical Behavior 2010

A fee of 1 cent per ounce on sugar-sweetened beverages is expected to reduce consumption by 8-10 percent¹² and will raise approximately \$38 million in new revenue in 2015-2016 for obesity prevention programs¹³. This added revenue would establish an obesity prevention fund within the Department of Health for communities. Funds could help to ensure that all schools have Certified Physical Education teachers and adequate and accessible water fountains are available in all schools and parks.

This bill will save lives and help our keiki to be healthier. I respectfully ask you to pass this bill.

Mahalo,

Jhero Costales

¹⁰ Finkelstein EA, Trogdon JG, Cohen JW, et al. Annual Medical Spending Attributable to Obesity: Payer- and Service-Specific Estimates. *Health Affairs*, 28(5): w822–w831, 2009. Available at: www.obesity.procon.org/sourcefiles/FinkelsteinAnnualMedicalSpending.pdf.

¹¹ Obesity, 2012; 20(1): 214-220

¹² Andreyeva T, Long MW, and Brownell KD. The Impact of Food Prices on Consumption: A Systematic Review of Research on the Price Elasticity of Demand for Food. American Journal of Public Health, 100(2): 216–222, 2010. Available at: www.yaleruddcenter.org/resources/upload/docs/what/economics/FoodPricesElasticity AJPH 2.10.pdf.

¹³ Obesity (Silver Spring). 2012 Jan;20(1):214-20. doi: 10.1038/oby.2011.169. Epub 2011 Jun 16.

- To: The Honorable Josh Green, Chair, Committee on Health The Honorable Glenn Wakai, Vice Chair, Committee on Health Members, Senate Committee on Health
- From: Kahele Kea, Nanakuli High School student

Hrg: Senate Committee on Health;

Re: Strong Support for SB 1256, Relating to Obesity Prevention

Thank you for the opportunity to submit testimony in support of SB 1256. I strongly support establishing a fee on sugar-sweetened beverages sold in the State to designate the funds to be used for obesity prevention programs coordinated by the Department of Health.

Obesity is a growing problem with about one-third of U.S. adults (35.7 percent)¹ and approximately 17 percent (12.5 million) of children and adolescents aged 2 to 19 years old are obese². In Hawaii, 57% of adults in Hawaii are overweight or obese and approximately 1 out of 4 children entering Kindergarten are overweight or obese³.

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⁸ Harvard School of Public Health Nutrition Source. *The Nutrition Source: Time to Focus on Healthier Drinks*. Boston: Harvard School of Public Health. Available at: <u>www.hsph.harvard.edu/nutritionsource/healthy-drinks/focus</u>.

⁹ Obesity, 2012; Am J Public Health 2007; Physical Behavior 2010

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This bill will save lives and help our keiki to be healthier. I respectfully ask you to pass this bill.

Mahalo,

Kahele Kea

¹⁰ Finkelstein EA, Trogdon JG, Cohen JW, et al. Annual Medical Spending Attributable to Obesity: Payer- and Service-Specific Estimates. *Health Affairs*, 28(5): w822–w831, 2009. Available at: www.obesity.procon.org/sourcefiles/FinkelsteinAnnualMedicalSpending.pdf.

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¹³ Obesity (Silver Spring). 2012 Jan;20(1):214-20. doi: 10.1038/oby.2011.169. Epub 2011 Jun 16.

- To: The Honorable Josh Green, Chair, Committee on Health The Honorable Glenn Wakai, Vice Chair, Committee on Health Members, Senate Committee on Health
- From: Keoni Acosta-Mehelona, Nanakuli High School student

Hrg: Senate Committee on Health;

Re: Strong Support for SB 1256, Relating to Obesity Prevention

Thank you for the opportunity to submit testimony in support of SB 1256. I strongly support establishing a fee on sugar-sweetened beverages sold in the State to designate the funds to be used for obesity prevention programs coordinated by the Department of Health.

Obesity is a growing problem with about one-third of U.S. adults (35.7 percent)¹ and approximately 17 percent (12.5 million) of children and adolescents aged 2 to 19 years old are obese². In Hawaii, 57% of adults in Hawaii are overweight or obese and approximately 1 out of 4 children entering Kindergarten are overweight or obese³.

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⁸ Harvard School of Public Health Nutrition Source. *The Nutrition Source: Time to Focus on Healthier Drinks*. Boston: Harvard School of Public Health. Available at: <u>www.hsph.harvard.edu/nutritionsource/healthy-drinks/focus</u>.

⁹ Obesity, 2012; Am J Public Health 2007; Physical Behavior 2010

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This bill will save lives and help our keiki to be healthier. I respectfully ask you to pass this bill.

Mahalo,

Keoni Acosta-Mehelona

¹⁰ Finkelstein EA, Trogdon JG, Cohen JW, et al. Annual Medical Spending Attributable to Obesity: Payer- and Service-Specific Estimates. *Health Affairs*, 28(5): w822–w831, 2009. Available at: www.obesity.procon.org/sourcefiles/FinkelsteinAnnualMedicalSpending.pdf.

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¹³ Obesity (Silver Spring). 2012 Jan;20(1):214-20. doi: 10.1038/oby.2011.169. Epub 2011 Jun 16.

- To: The Honorable Josh Green, Chair, Committee on Health The Honorable Glenn Wakai, Vice Chair, Committee on Health Members, Senate Committee on Health
- From: Kezra Pa`e, Nanakuli Intermediate School student 7th grade

Hrg: Senate Committee on Health;

Re: Strong Support for SB 1256, Relating to Obesity Prevention

Thank you for the opportunity to submit testimony in support of SB 1256. I strongly support establishing a fee on sugar-sweetened beverages sold in the State to designate the funds to be used for obesity prevention programs coordinated by the Department of Health.

Obesity is a growing problem with about one-third of U.S. adults (35.7 percent)¹ and approximately 17 percent (12.5 million) of children and adolescents aged 2 to 19 years old are obese². In Hawaii, 57% of adults in Hawaii are overweight or obese and approximately 1 out of 4 children entering Kindergarten are overweight or obese³.

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³ Behavioral Risk Factor Surveillance Study, Hawaii State Department of Health 2011

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⁵ Serdula MK, Ivery D, Coates RJ, et al. "Do Obese Children Become Obese Adults? A Review of the Literature." American Journal of Preventive Medicine, 22(2): 167–177, 1993.

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This bill will save lives and help our keiki to be healthier. I respectfully ask you to pass this bill.

Mahalo,

Kezra Pa`e

¹⁰ Finkelstein EA, Trogdon JG, Cohen JW, et al. Annual Medical Spending Attributable to Obesity: Payer- and Service-Specific Estimates. *Health Affairs*, 28(5): w822–w831, 2009. Available at: www.obesity.procon.org/sourcefiles/FinkelsteinAnnualMedicalSpending.pdf.

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¹³ Obesity (Silver Spring). 2012 Jan;20(1):214-20. doi: 10.1038/oby.2011.169. Epub 2011 Jun 16.

- To: The Honorable Josh Green, Chair, Committee on Health The Honorable Glenn Wakai, Vice Chair, Committee on Health Members, Senate Committee on Health
- From: Laney Peahi-Ayau, Nanakuli Intermediate School student 8th grade

Hrg: Senate Committee on Health;

Re: Strong Support for SB 1256, Relating to Obesity Prevention

Thank you for the opportunity to submit testimony in support of SB 1256. I strongly support establishing a fee on sugar-sweetened beverages sold in the State to designate the funds to be used for obesity prevention programs coordinated by the Department of Health.

Obesity is a growing problem with about one-third of U.S. adults (35.7 percent)¹ and approximately 17 percent (12.5 million) of children and adolescents aged 2 to 19 years old are obese². In Hawaii, 57% of adults in Hawaii are overweight or obese and approximately 1 out of 4 children entering Kindergarten are overweight or obese³.

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This bill will save lives and help our keiki to be healthier. I respectfully ask you to pass this bill.

Mahalo,

Laney Peahi-Ayau

¹⁰ Finkelstein EA, Trogdon JG, Cohen JW, et al. Annual Medical Spending Attributable to Obesity: Payer- and Service-Specific Estimates. *Health Affairs*, 28(5): w822–w831, 2009. Available at: www.obesity.procon.org/sourcefiles/FinkelsteinAnnualMedicalSpending.pdf.

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- To: The Honorable Josh Green, Chair, Committee on Health The Honorable Glenn Wakai, Vice Chair, Committee on Health Members, Senate Committee on Health
- From: Malachi Keohuloa, Nanakuli Intermediate School student 8th grade

Hrg: Senate Committee on Health;

Re: Strong Support for SB 1256, Relating to Obesity Prevention

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This bill will save lives and help our keiki to be healthier. I respectfully ask you to pass this bill.

Mahalo,

Malachi Keohuloa

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- To: The Honorable Josh Green, Chair, Committee on Health The Honorable Glenn Wakai, Vice Chair, Committee on Health Members, Senate Committee on Health
- From: Mariah Manadis-Kapu, Nanakuli Intermediate School student 8th grade

Hrg: Senate Committee on Health;

Re: Strong Support for SB 1256, Relating to Obesity Prevention

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This bill will save lives and help our keiki to be healthier. I respectfully ask you to pass this bill.

Mahalo,

Mariah Manandis-Kapu

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To: The Honorable Josh Green, Chair, Committee on Health The Honorable Glenn Wakai, Vice Chair, Committee on Health Members, Senate Committee on Health

From: Michelle Quensell

Date: February 11, 2015

Hrg: Senate Committee on Health;

Re: Strong Support for SB 1256, Relating to Obesity Prevention

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This bill will save lives and help our keiki to be healthier. I respectfully ask you to pass this bill.

Mahalo,

Michelle Quensell MQ@hawaii.edu

¹⁰ Finkelstein EA, Trogdon JG, Cohen JW, et al. Annual Medical Spending Attributable to Obesity: Payer- and Service-Specific Estimates. *Health Affairs*, 28(5): w822–w831, 2009. Available at: *www.obesity.procon.org/sourcefiles/FinkelsteinAnnualMedicalSpending.pdf*.

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- To: The Honorable Josh Green, Chair, Committee on Health The Honorable Glenn Wakai, Vice Chair, Committee on Health Members, Senate Committee on Health
- From: Sammy Kea, Nanakuli Elementary School student 6th grade

Hrg: Senate Committee on Health;

Re: Strong Support for SB 1256, Relating to Obesity Prevention

Thank you for the opportunity to submit testimony in support of SB 1256. I strongly support establishing a fee on sugar-sweetened beverages sold in the State to designate the funds to be used for obesity prevention programs coordinated by the Department of Health.

Obesity is a growing problem with about one-third of U.S. adults (35.7 percent)¹ and approximately 17 percent (12.5 million) of children and adolescents aged 2 to 19 years old are obese². In Hawaii, 57% of adults in Hawaii are overweight or obese and approximately 1 out of 4 children entering Kindergarten are overweight or obese³.

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⁵ Serdula MK, Ivery D, Coates RJ, et al. "Do Obese Children Become Obese Adults? A Review of the Literature." American Journal of Preventive Medicine, 22(2): 167–177, 1993.

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⁸ Harvard School of Public Health Nutrition Source. *The Nutrition Source: Time to Focus on Healthier Drinks*. Boston: Harvard School of Public Health. Available at: <u>www.hsph.harvard.edu/nutritionsource/healthy-drinks/focus</u>.

⁹ Obesity, 2012; Am J Public Health 2007; Physical Behavior 2010

A fee of 1 cent per ounce on sugar-sweetened beverages is expected to reduce consumption by 8-10 percent¹² and will raise approximately \$38 million in new revenue in 2015-2016 for obesity prevention programs¹³. This added revenue would establish an obesity prevention fund within the Department of Health for communities. Funds could help to ensure that all schools have Certified Physical Education teachers and adequate and accessible water fountains are available in all schools and parks.

This bill will save lives and help our keiki to be healthier. I respectfully ask you to pass this bill.

Mahalo,

Sammy Kea

¹⁰ Finkelstein EA, Trogdon JG, Cohen JW, et al. Annual Medical Spending Attributable to Obesity: Payer- and Service-Specific Estimates. *Health Affairs*, 28(5): w822–w831, 2009. Available at: www.obesity.procon.org/sourcefiles/FinkelsteinAnnualMedicalSpending.pdf.

¹¹ Obesity, 2012; 20(1): 214-220

¹² Andreyeva T, Long MW, and Brownell KD. The Impact of Food Prices on Consumption: A Systematic Review of Research on the Price Elasticity of Demand for Food. American Journal of Public Health, 100(2): 216–222, 2010. Available at: www.yaleruddcenter.org/resources/upload/docs/what/economics/FoodPricesElasticity_AJPH_2.10.pdf.

¹³ Obesity (Silver Spring). 2012 Jan;20(1):214-20. doi: 10.1038/oby.2011.169. Epub 2011 Jun 16.

- To: The Honorable Josh Green, Chair, Committee on Health The Honorable Glenn Wakai, Vice Chair, Committee on Health Members, Senate Committee on Health
- From: Sarina K Proctor, Nanakuli Intermediate School student

Hrg: Senate Committee on Health;

Re: Strong Support for SB 1256, Relating to Obesity Prevention

Thank you for the opportunity to submit testimony in support of SB 1256. I strongly support establishing a fee on sugar-sweetened beverages sold in the State to designate the funds to be used for obesity prevention programs coordinated by the Department of Health.

Obesity is a growing problem with about one-third of U.S. adults (35.7 percent)¹ and approximately 17 percent (12.5 million) of children and adolescents aged 2 to 19 years old are obese². In Hawaii, 57% of adults in Hawaii are overweight or obese and approximately 1 out of 4 children entering Kindergarten are overweight or obese³.

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⁸ Harvard School of Public Health Nutrition Source. *The Nutrition Source: Time to Focus on Healthier Drinks*. Boston: Harvard School of Public Health. Available at: <u>www.hsph.harvard.edu/nutritionsource/healthy-drinks/focus</u>.

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This bill will save lives and help our keiki to be healthier. I respectfully ask you to pass this bill.

Mahalo,

Sarina K Proctor

¹⁰ Finkelstein EA, Trogdon JG, Cohen JW, et al. Annual Medical Spending Attributable to Obesity: Payer- and Service-Specific Estimates. *Health Affairs*, 28(5): w822–w831, 2009. Available at: www.obesity.procon.org/sourcefiles/FinkelsteinAnnualMedicalSpending.pdf.

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¹³ Obesity (Silver Spring). 2012 Jan;20(1):214-20. doi: 10.1038/oby.2011.169. Epub 2011 Jun 16.

- To: The Honorable Josh Green, Chair, Committee on Health The Honorable Glenn Wakai, Vice Chair, Committee on Health Members, Senate Committee on Health
- From: Shaiann Ala-Peahi, Nanakuli Intermediate School student 8th grade

Hrg: Senate Committee on Health;

Re: Strong Support for SB 1256, Relating to Obesity Prevention

Thank you for the opportunity to submit testimony in support of SB 1256. I strongly support establishing a fee on sugar-sweetened beverages sold in the State to designate the funds to be used for obesity prevention programs coordinated by the Department of Health.

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⁸ Harvard School of Public Health Nutrition Source. *The Nutrition Source: Time to Focus on Healthier Drinks*. Boston: Harvard School of Public Health. Available at: <u>www.hsph.harvard.edu/nutritionsource/healthy-drinks/focus</u>.

⁹ Obesity, 2012; Am J Public Health 2007; Physical Behavior 2010

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This bill will save lives and help our keiki to be healthier. I respectfully ask you to pass this bill.

Mahalo,

Shaiann Ala-Peahi

¹⁰ Finkelstein EA, Trogdon JG, Cohen JW, et al. Annual Medical Spending Attributable to Obesity: Payer- and Service-Specific Estimates. *Health Affairs*, 28(5): w822–w831, 2009. Available at: www.obesity.procon.org/sourcefiles/FinkelsteinAnnualMedicalSpending.pdf.

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¹³ Obesity (Silver Spring). 2012 Jan;20(1):214-20. doi: 10.1038/oby.2011.169. Epub 2011 Jun 16.

- To: The Honorable Josh Green, Chair, Committee on Health The Honorable Glenn Wakai, Vice Chair, Committee on Health Members, Senate Committee on Health
- From: Shayann Hoohuli, Nanakuli Intermediate School student

Hrg: Senate Committee on Health;

Re: Strong Support for SB 1256, Relating to Obesity Prevention

Thank you for the opportunity to submit testimony in support of SB 1256. I strongly support establishing a fee on sugar-sweetened beverages sold in the State to designate the funds to be used for obesity prevention programs coordinated by the Department of Health.

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⁸ Harvard School of Public Health Nutrition Source. *The Nutrition Source: Time to Focus on Healthier Drinks*. Boston: Harvard School of Public Health. Available at: <u>www.hsph.harvard.edu/nutritionsource/healthy-drinks/focus</u>.

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This bill will save lives and help our keiki to be healthier. I respectfully ask you to pass this bill.

Mahalo,

Shayann Hoohuli

¹⁰ Finkelstein EA, Trogdon JG, Cohen JW, et al. Annual Medical Spending Attributable to Obesity: Payer- and Service-Specific Estimates. *Health Affairs*, 28(5): w822–w831, 2009. Available at: www.obesity.procon.org/sourcefiles/FinkelsteinAnnualMedicalSpending.pdf.

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To: The Honorable Josh Green, Chair, Committee on Health The Honorable Glenn Wakai, Vice Chair, Committee on Health Members, Senate Committee on Health

From: Travis Vierra, Nanakuli High School student 10th grade

Date: February 11, 2015

Hrg: Senate Committee on Health;

Re: Strong Support for SB 1256, Relating to Obesity Prevention

Thank you for the opportunity to submit testimony in support of SB 1256. I strongly support establishing a fee on sugar-sweetened beverages sold in the State to designate the funds to be used for obesity prevention programs coordinated by the Department of Health.

Obesity is a growing problem with about one-third of U.S. adults (35.7 percent)¹ and approximately 17 percent (12.5 million) of children and adolescents aged 2 to 19 years old are obese². In Hawaii, 57% of adults in Hawaii are overweight or obese and approximately 1 out of 4 children entering Kindergarten are overweight or obese³.

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³ Behavioral Risk Factor Surveillance Study, Hawaii State Department of Health 2011

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This bill will save lives and help our keiki to be healthier. I respectfully ask you to pass this bill.

Mahalo,

Travis Vierra

¹⁰ Finkelstein EA, Trogdon JG, Cohen JW, et al. Annual Medical Spending Attributable to Obesity: Payer- and Service-Specific Estimates. *Health Affairs*, 28(5): w822–w831, 2009. Available at: www.obesity.procon.org/sourcefiles/FinkelsteinAnnualMedicalSpending.pdf.

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- To: The Honorable Josh Green, Chair, Committee on Health The Honorable Glenn Wakai, Vice Chair, Committee on Health Members, Senate Committee on Health
- From: Violet Garcia-Gonsalves, Nanakuli Intermediate School student 7th grade

Hrg: Senate Committee on Health;

Re: Strong Support for SB 1256, Relating to Obesity Prevention

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This bill will save lives and help our keiki to be healthier. I respectfully ask you to pass this bill.

Mahalo,

Violet Garcia Gonsalves

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- To: The Honorable Josh Green, Chair, Committee on Health The Honorable Glenn Wakai, Vice Chair, Committee on Health Members, Senate Committee on Health
- From: Aaliyah Manandis-Kapu, Nanakuli Intermediate School student 7th grade

Hrg: Senate Committee on Health;

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Mahalo,

Aaliyah Manandis-Kapu

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