



## Sugary Drink Portion Cap Rule Fact vs. Fiction

| FICTION   | FACT  |
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| <p><b>The rule “bans” sugary drinks.</b></p>  | <p>The rule does not ban sugary drinks or limit the number of sugary drinks a customer can buy. It sets a cap on size of the containers in which food service establishments can serve sugary drinks. According to the rule, food service establishments cannot sell, offer or provide sugary drinks in cups or containers that hold more than 16 ounces.</p>   |
| <p><b>The rule is arbitrary because it only covers food service establishments licensed by the Health Department.</b></p> | <p>The rule applies to all food service establishments — from large chains to mom and pops — equally. Since these establishments are licensed by the New York City Health Department, the Board of Health can regulate them in the interest of the health of New Yorkers. Because other retailers, like convenience stores and grocery stores, are not regulated by the Health Department, they are not covered by the rule.</p>  |
| <p><b>The New York City Board of Health is overreaching its authority.</b></p>  | <p>The New York City Board of Health has a long history of putting rules into place that protect the health of the population it serves. From addressing yellow fever in 1805, to passing rules about lead paint in 1959, to banning trans fat in 2006, the Board of Health has served as New York City’s most important body protecting the health of all New Yorkers. That’s why it was created, and its authority to take these actions is outlined in the City Charter.</p> <p>With the twin epidemics of obesity and diabetes now leading causes of premature death, the Board is obligated to act in the interests of New Yorkers.</p>  |
| <p><b>There’s no rationale for the rule not covering dairy drinks or alcoholic beverages.</b></p>                         | <p>Unlike sugary drinks, which have no nutritional value, milk and milk products contain important nutrients, including calcium, vitamin D and potassium (i). The rule also does not cover alcoholic beverages because the New York State Liquor Authority regulates how alcohol is served.</p>   |
| <p><b>Limiting the size of sugary drinks will not impact the health of New Yorkers.</b></p>                               | <p>Serving size matters; studies show that people tend to consume food in the quantities they are given. By reducing a portion of one sugary drink every two weeks from 20 ounces to 16 ounces, New Yorkers could collectively prevent 2.3 million pounds gained over one year.</p> <p>Many scientific studies show the link between sugary drink consumption and weight gain, obesity and diabetes (ii, iii, iv, v, vi, vii, viii, ix, x, xi). Leading national researchers and nutrition experts support the beverage portion rule and predict that it will have a positive impact on the health of New Yorkers.</p>  |
| <p><b>New York City is relying on this single rule to address the obesity epidemic.</b></p>                               | <p>New York City is dedicated to fighting the obesity epidemic through multiple channels and addressing the complex issues surrounding food and physical activity. The rule is an important part of a comprehensive strategy to reduce obesity, which includes promoting healthy eating and physical activity, educating consumers about calorie consumption and increasing access to healthy foods.</p>  |
| <p><b>New York City’s beverage portion rule takes away consumers’ choices.</b></p>  | <p>Under the rule, consumers would still have the choice to purchase and consume as much as they want. The portion rule will actually return choice to consumers by making smaller portion sizes available. Today in many chain restaurants, beverage portion size is at least 20 ounces, and many movie theaters offer nothing smaller than 32 ounces.</p>   |
| <p><b>The beverage portion rule will hurt small businesses.</b></p>   | <p>The rule applies to all food service establishments that require a Health Department permit. The rule may have the greatest impact on chain restaurants that tend to sell large sugary drinks. Many independent restaurants don’t offer drinks larger than 16 ounces so they would not be affected by the rule.</p> <p>The restaurant industry warned that restaurants would suffer irreparable harm when New York City passed the 2002 Smoke Free Air Act, the restriction on trans fats in 2006 and calorie posting requirements in 2008. None of these changes hurt the restaurant business. Today, the New York City restaurant industry is booming and these policies are popular and spreading nationally.</p> |

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| <p><b>The beverage portion rule discriminates against minorities and the poor.</b></p>  | <p>No one dies from not getting enough sugary drinks, but people are dying from obesity and diabetes. New York City neighborhoods with the highest rates of poverty are far more likely to suffer from high rates of obesity, diabetes and other chronic health problems. If the rule reduces consumption of sugary drinks and helps stem the tide of obesity and diabetes, the poor will disproportionately benefit.</p>   |
| <p><b>Sugary drinks aren't the problem. They make up a small fraction of the average American diet and added sugar from soda is wwon the decline.</b></p> | <p>Minimizing the role of sugary drinks in the average American diet and its contribution to obesity does a disservice to the health and wellness of New Yorkers.</p> <p>People are consuming about 150 calories per day from sugary drinks (xii). That is enough additional calories to potentially cause a weight gain of 15 pounds over a year. This isn't just a theoretical risk – various studies have demonstrated a relationship between sugary drink consumption and weight gain in both adults and children (xiii, xiv, xv, xvi, xvii, xviii). Sugary drink consumption remains far higher today than it was in the 1970s, when the obesity epidemic began.</p> |

<sup>i</sup> USDA. *Dietary Guidelines for Americans*, 2010.

<sup>ii</sup> Malik VS, Schulze MB, Hu FB. Intake of sugar-sweetened beverages and weight gain: A systematic review. *Am J Clin Nutr*. 2006;84(2):274-88.

<sup>iii</sup> Mozaffarian D, Hao T, Rimm EB, et al. Changes in diet and lifestyle and long-term weight gain in women and men. *New Engl J Med*. 2011;364:2392-404.

<sup>iv</sup> Malik VS, Popkin BM, Bray GA, et al. Sugar-sweetened beverages, obesity, type 2 diabetes mellitus, and cardiovascular disease risk. *Circulation*. 2010;121(11):1356-64.

<sup>v</sup> Schulze MB, Manson JE, Ludwig DS, et al. Sugar-sweetened beverages, weight gain, and incidence of type 2 diabetes in young and middle-aged women. *JAMA*. 2004;292(8):927-34.

<sup>vi</sup> Woodward-Lopez G, Kao J, Ritchie L. To what extent have sweetened beverages contributed to the obesity epidemic? *Public Health Nutr*. 2010;14(3):499-509.

<sup>vii</sup> Chen L, Appel LJ, Loria C, et al. Reduction in consumption of sugar-sweetened beverages is associated with weight loss: the PREMIER trial. *Am J Clin Nutr*. 2009;89(5):1299-306.

<sup>viii</sup> Tate DF, Turner-McGrievy G, Lyons E, et al. Replacing caloric beverages with water or diet beverages for weight loss in adults: Main results of the choose healthy options consciously everyday (CHOICE) randomized clinical trial. *Am J Clin Nutr*. 2012;95(3):555-63.

<sup>ix</sup> Ebbeling CB, Feldman HA, Osganian SK, et al. Effects of decreasing sugar-sweetened beverage consumption on body weight in adolescents: a randomized, controlled pilot study. *Pediatrics*. 2006;117:673-80.

<sup>x</sup> Ebbeling CB, Feldman HA, Chomitz VR, Antonelli TA, Gortmaker SL, Osganian SK, Ludwig DS. A Randomized Trial of Sugar-Sweetened Beverages and Adolescent Body Weight. *New England Journal of Medicine* 2012; DOI: 10.1056/NEJMoa1203388.

<sup>xi</sup> de Ruyter JC, Olthof MR, Seidell JC, Katan MB. A trial of sugar-free or sugar-sweetened beverages and body weight in children. *New England Journal of Medicine* 2012; DOI: 10.1056/NEJMoa1203034.

<sup>xii</sup> Kit BK, Fakhouri TH, Park S, Nielsen SJ, Ogden CL. Trends in sugar-sweetened beverage consumption among youth and adults in the United States: 1999-2010. *Am J Clin Nutr*. 2013 May 15. [Epub ahead of print]

<sup>xiii</sup> Malik VS, Schulze MB, Hu FB. Intake of sugar-sweetened beverages and weight gain: A systematic review. *American Journal of Clinical Nutrition* 2006;84(2):274-88.

<sup>xiv</sup> Mozaffarian D, Hao T, Rimm EB, Willett WC, Hu FB. Changes in diet and lifestyle and long-term weight gain in women and men. *New England Journal of Medicine* 2011;364:2392-404.

<sup>xv</sup> Malik VS, Popkin BM, Bray GA, Despres J-P, Hu FB. Sugar-sweetened beverages, obesity, type 2 diabetes mellitus, and cardiovascular disease risk. *Circulation* 2010;121(11):1356-64.

<sup>xvi</sup> Schulze MB, Manson JE, Ludwig DS, Colditz GA, Stampfer MJ, Willett WC, Hu FB. Sugar-sweetened beverages, weight gain, and incidence of type 2 diabetes in young and middle-aged women. *Journal of the American Medical Association* 2004;292(8):927-34.

<sup>xvii</sup> Ebbeling CB, Feldman HA, Chomitz VR, Antonelli TA, Gortmaker SL, Osganian SK, Ludwig DS. A Randomized Trial of Sugar-Sweetened Beverages and Adolescent Body Weight. *New England Journal of Medicine* 2012; DOI: 10.1056/NEJMoa1203388.

<sup>xviii</sup> de Ruyter JC, Olthof MR, Seidell JC, Katan MB. A trial of sugar-free or sugar-sweetened beverages and body weight in children. *New England Journal of Medicine* 2012; DOI: 10.1056/NEJMoa1203034.