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for the

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on behalf of

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INTRODUCTION

Good morning. My name is Triada Stampas and I am the Director of Government Relations and Public Education at the Food Bank For New York City. The Food Bank appreciates the opportunity to present testimony today to the State Senate Health Committee regarding how food policy changes can affect public health in New York, and thanks you for your attention to this critical and timely issue.

Food Bank For New York City works to end hunger and food poverty by increasing access to nutrition, education and financial empowerment. We distribute food and provide support services to approximately 1,000 emergency and community food programs citywide; manage nutrition education programs for schools and community-based organizations; operate benefits access programs including food stamp outreach & enrollment assistance and the largest Earned Income Tax Credit (EITC) program in the country; and conduct research to inform community and government efforts to end hunger in New York City.

As low-income New Yorkers suffer disproportionately from diet-related disease as well as lack of geographic and financial access to fresh, healthy food, examining food policy issues through the lens of food poverty allows us to expose the structural flaws in our food system that create

and allow these conditions to persist, and points to potential food policy remedies that can ameliorate both the health and the financial well-being of New Yorkers living at or near poverty. Of the three policy interventions identified for discussion at today's hearing, my testimony will focus on the proposed tax on sugar-sweetened beverages.

SUGAR-SWEETENED BEVERAGES HAVE NO NUTRITIONAL VALUE

Through our CookShop program, the Food Bank For New York City provides nutrition education to over 14,500 low-income children, teens and adults by training and equipping approximately 1,000 educators to implement a hands-on curriculum that provides exposure to and teaches the benefits of healthy, affordable, minimally processed food. CookShop is being taught in elementary schools, high schools and after-school programs throughout the city.

At every level, one of the key lessons of CookShop is about added sugar. Our curricula teach that added sugar contributes to unhealthy weight gain, Type 2 diabetes and other diet-related diseases, and they stress the importance of choosing 100 percent fruit juice, water or skim or low-fat milk over soda, fruit drinks and other sweetened beverages. We empower students by teaching them how to make simple, tasty alternatives to sugar-sweetened beverages like "Fruit Fizzies," which contain only 100 percent juice and seltzer water. And if our observations are any indication, these lessons are taking hold: an astute second-grader at PS 307 in Brooklyn told a member of our staff this week that grape soda is "really sugary water" even though "they put a picture of a grape on it to make it look healthy."

In EATWISE, the CookShop for Teens peer education program, our trained youth leaders teach their fellow students how to identify and compare the amounts of sugar found in soda and other popular sweetened drinks. Teens are shocked to learn that one 20-ounce bottle of soda contains 16 teaspoons of sugar (65 grams). EATWISE also teaches media literacy. After examining the labels, our youth participants are often surprised to discover that popular sports drinks, marketed as healthy beverages that replenish needed nutrients, instead amount to little more than flavored sugar-water.

Our CookShop for Adults curriculum teaches adults to become informed label readers so they can make lower sugar choices for themselves and their families. Adults learn the various names for sugar frequently found on food labels, like corn syrup, high-fructose corn syrup, fruit juice concentrate, dextrose and sucrose. In workshops they explore making healthy food substitutions that follow recommended portion sizes to help keep sugar intake to a minimum.

This year, CookShop will also reach approximately 100,000 low-income teens through a social marketing campaign that promotes healthy food choices through the simple message, "Change One Thing." The social marketing campaign, launching in public high schools, as well as in bodegas and on street furniture in the vicinity of targeted schools, offers examples of healthy alternatives to junk food that are appealing, affordable and commonly available in low-income communities. One of the series of "Change One Thing" ads encourages drinking water rather than high-sugar energy drinks for sustained energy and refreshment.

These examples illustrate not only our understanding of the health risks associated with over-consumption of added sugar, but through significant investment in nutrition education, our commitment to combating the scourge of obesity and diet-related disease in low-income communities. To generalize, poor people receive poor nutrition everywhere in the world; here, its manifestation is obesity and disease.

UNDERSTANDING DIET-RELATED DISEASE AS A FOOD POVERTY ISSUE

Examining the issue from the perspective of food poverty, one can see that lack of financial and geographic access to healthy food combine to create an environment where obesity and diet-related diseases flourish, and this is precisely the case in New York City.

Research conducted in November 2009 by the Food Bank and Marist College Institute for Public Opinion shows that 40 percent of New York City residents, or 3.3 million, experience difficulty affording food, an increase of 60 percent from 2 million (25 percent) in 2003.¹

This is no surprise when one considers that, in that time, the cost of groceries and housing in New York City each rose 24 percent, fuel and utilities rose an astounding 45 percent, and medical care and transportation increased by 20 and 14 percent, respectively.² In the case of groceries, housing and fuel and utilities, these increases outpaced the rate of inflation nationally.

Consistent with these findings, research by the Community Service Society finds more than 40 percent of low-income New Yorkers (having household incomes up to 200 percent of the federal poverty level, or approximately \$36,000 for a household of three), are experiencing multiple hardships, including the loss of a job, skipping meals for lack of food, and falling behind on rent or mortgage payments this year.³

Even as New York City food stamp enrollment rates increased to incorporate higher numbers of eligible families and individuals falling on hard times, low-income New Yorkers struggled. As of December 2009, more than 1.6 million city residents are enrolled in the Food Stamp Program, marking a one-year increase of 22 percent.⁴ Yet previous research by the Food Bank has found that for many recipients, monthly food stamp benefits are inadequate to meet monthly household food needs.⁵ Indeed, despite high levels of food stamp enrollment this past year, reliance on emergency food increased. Almost all (93 percent) emergency food sites in the city (food pantries and soup kitchens) witnessed an increase in the number of first-time visitors — and more than one-half saw an increase of more than 25 percent.⁶

Access to healthy food is effectively lost when meeting monthly expenses on limited budgets means skipping meals to make the rent or keep the electricity on. Unfortunately, many low-income New Yorkers face the added barrier of geographic access. A number of recent studies have shown that access to food is not uniformly distributed across New York City neighborhoods; areas with lower concentrations of supermarkets and fresh food retailers tend also to be areas of low income and of high incidence of obesity, diabetes and other diet-related diseases.⁷ This is no accident or coincidence: food environment profoundly impacts a person's ability to maintain healthful dietary practices, especially within the tightly constrained budgets of low-income households. A joint analysis by three New York City government agencies found

¹ *NYC Hunger Experience 2009*. Food Bank For New York City.

² U.S. Department of Labor, Bureau of Labor Statistics (current as of January 2009).

³ "The Unheard Third 2009: Job Loss, Economic Insecurity, and a Decline in Job Quality." (October 2009). Community Service Society (New York, NY).

⁴ "Facts: December 2009." New York City Human Resources Administration.

⁵ *NYC Hunger Safety Net 2007: A Food Poverty Focus*. Food Bank For New York City.

⁶ *NYC Hunger Experience 2009*. Food Bank For New York City.

⁷ See "Going to Market: New York City's Neighborhood Grocery Store and Supermarket Shortage." (2008) New York City Department of City Planning, New York City Department of Health and Mental Hygiene and New York City Economic Development Corporation; and *The Need for More Supermarkets in New York*. (2008). The Food Trust (Philadelphia, PA).

three million New Yorkers live in areas of high need for a neighborhood grocery store or supermarket.⁸

Millions of New York City residents live in neighborhoods where bodegas, fast food restaurants and cheap convenience foods are plentiful, but opportunities to buy fresh, healthy food at an affordable price are scarce. Is it any wonder that obesity and diet-related diseases have flourished in such environments?

DOES TAXING SUGAR-SWEETENED BEVERAGES SOLVE THE PROBLEM?

Obesity, diabetes and other diet-related diseases certainly extract a steep cost – not only from the people they afflict, but from all our communities. Recognizing that millions of New Yorkers live in an environment that makes it difficult – sometimes prohibitively so – to maintain healthy dietary practices, it is worth noting that a tax on sugar-sweetened beverages, as proposed in the Governor’s executive budget, addresses neither the financial nor the geographic access barriers that curtail the ability of low-income New Yorkers to make healthier food choices – *i.e.*, it makes healthy food neither more affordable nor more available to low-income New Yorkers. Indeed, if anything, it leaves low-income individuals *less* able to afford food and other necessities, as all regressive taxes do.

As a policy intervention, it also has the distressing effect of extracting an additional toll from the very people who are suffering from the impacts of a food system that manufactures cheap, processed food laden with added sugar and fat and creates obesity and disease among those who cannot afford better. This adds insult to an already grievous injury.

Reducing the risk of diet-related disease among low-income individuals and fostering healthy eating habits requires public policy that addresses the barriers of financial and geographic access head-on. I would like to offer as model food policy initiatives two recent examples: the Food Retail Expansion to Support Health (FRESH) initiative, and the Food Stamps in Farmers Markets project.

The Food Bank was a convening member of the New York Supermarket Commission, whose work was the catalyst for the FRESH initiative. FRESH offers a combination of land use and financial incentives for supermarkets and grocery stores to site or expand in high-need neighborhoods. In order to ensure that these food stores would be accessible to low-income residents, stores that accept the financial incentives are required to redeem food stamp, EBT and WIC benefits. Thus, FRESH brings healthy food into neighborhoods that don’t currently have it, and as a condition of financing, works to ensure affordability.

The Food Stamps in Farmers Markets represents a successful public-private partnership that has expanded the use of food stamps in farmers markets *one hundredfold* between 2005 and 2009.⁹ Three key elements of this project worked together to ensure its success:

1. Funding was secured to equip a greater number of farmers markets to accept EBT as payment;
2. The use of food stamps at farmers markets was heavily promoted in target communities and in multiple languages; and

⁸ “Going to Market: New York City’s Neighborhood Grocery Store and Supermarket Shortage.” (2008) New York City Department of City Planning, New York City Department of Health and Mental Hygiene and New York City Economic Development Corporation

⁹ “Food Stamps in Farmers Markets Project Progress Report.” Council on the Environment of New York City.

3. The HealthBucks program offered food stamp recipients \$2 coupons for every \$5 in EBT purchases.

By expanding the use of EBT, promoting its availability and offering financial incentives for purchases, the Food Stamps in Farmers Markets project creates the right conditions for low-income consumers to make healthy food choices that might otherwise remain out of reach. And there is compelling evidence that the food choices they make are good: 92 percent of EBT/food stamp purchases at farmers markets are for produce or fruit.¹⁰

Unlike a regressive consumption tax that reduces consumer choice for people whose choices are already limited, these policy initiatives address the critical public health issue of diet-related disease by expanding choice and empowering individuals – this should be the approach of all food policy.

SUMMARY

The Food Bank For New York City is committed to increasing access to fresh, affordable food for low-income New Yorkers. As the city's main provider of emergency food, we have distributed over 10 million pounds of fresh food annually to nearly 1,000 emergency and community food organizations throughout the city – many of them located in areas with little access to quality, fresh, nutritious food from retail vendors. We fully support the goals of reducing consumption of sugar-sweetened beverages and improving the health of those at greatest risk of diet-related disease, and are willing to work with the Health Committee and other stakeholders to achieve these goals. We cannot, however, support a tax on sugar-sweetened beverages: it extracts the limited resources of low-income people, eliminates choice and disempowers them without addressing any of the barriers they face to access healthy food. From a food poverty standpoint, it is the wrong policy intervention.

¹⁰ *Ibid.*