



Mission: To improve public health in Maryland through education and advocacy

Vision: Healthy Marylanders living in Healthy Communities

**HB996: Alcoholic Beverages – Class A Licenses – Retail Grocery Establishments
(Healthy Food Accountability Act of 2021)**

Hearing Date: February 19, 2021

Committee: Economic Matters

Position: OPPOSE

Co-signatory: Baltimore Good Neighbors Coalition

On behalf of the Maryland Public Health Association's (MdPHA) Alcohol & Tobacco Network, we would like to thank you all for your work to establish alcohol regulations that will keep our youth and communities safe. We are opposed to HB996, which would expand alcohol sales exponentially across the state for the purpose of curbing the obesity epidemic.

MdPHA is deeply disappointed and more than a little confused on how expanding access to alcohol can be promoted as a solution to the obesity epidemic. Many of our members have worked on numerous bills and/or community projects to both address food deserts and reduce obesity over the years, legislation and interventions stemming from scientific study and evaluation. We feel the frustration, inequity, and pain stemming from these incredibly difficult issues. Much of the research can be seen coming from our own experts at academic centers such as University of Maryland, Towson, and Johns Hopkins or from community advocacy organizations working to increase urban farms; strengthen nutrition standards in public schools; or require only milk, water, or 100% juice instead of soda in kids' meals. And although the preamble of this legislation is framed around the obesity epidemic, the rest of the bill is targeted only to expanding alcohol sales and deliveries.

What this bill does is further strip local jurisdictions of their authority and ability to regulate the alcohol environment locally. It creates yet another license at the state level that leads to additional burdens on liquor board staff and enforcement officers for administration, enforcement, education, and adjudication, but provides no resources with which to undertake these activities. Liquor boards already frequently struggle with limited resources, and adding an estimated 1,300 new licensed outlets to the existing 1,800 outlets would completely overwhelm the capacity of our system.

Increasing off-premise alcohol outlets from 1,800 to 3,100 through this legislation would massively increase the density of alcohol availability in these target areas. Increased alcohol outlet density, especially for off-premise outlets, is associated with an increase in a number of harms, including violence, criminal activity, domestic violence, and child maltreatment. It is also very costly; a recent study in Baltimore City demonstrated that alcohol-related harms cost \$582 million each year, almost 40% of which the government is responsible for. Alcohol consumption has been steadily rising nationally, especially for women and minorities; as consumption rises, so do alcohol-related harms.

The "priority funding areas" (Figure 1 below) that are the target areas for these establishments cover a significantly large area of the state and do not appear to be related to areas with higher rates of obesity in children and/or adults or areas that are categorized as food deserts. This legislation also does not ensure that a new entity applying for this license would establish itself in an area with the highest needs for access to healthy foods; in fact, it is highly doubtful that they would, given the economics that guide decisions on where to locate grocery establishments. We have included a map from the Johns Hopkins

University Center for a Livable Future of areas with limited supermarket access (Figure 2 below) to demonstrate the lack of overlay of areas of need and areas targeted with this legislation.

The size parameters of this bill also are concerning. Part (c)(2)(1)(2)(B) (page 4 line 7) allows for a minimum of 6,000 sq ft, with only 5% dedicated to the sale of the listed food items--this seems to allow for a Costco-sized alcohol superstore with a few shelves at the front for food sales. This area of the bill needs further explanation. Additional explanation of what a "convenience and food product delivery company" is also requested.

There are numerous well-researched interventions to address childhood nutrition, adult and youth obesity rates, and availability of healthy foods that do not involve a $\frac{2}{3}$ increase in the number of alcohol outlets at the same time and the inevitable harms of expanded access and consumption. We are happy to work with this committee and bill sponsors to connect them with the expertise present here in Maryland.

Further, MD Code, Alcoholic Beverages, Section 1-308 (effective January 1, 2021) states that "The [Alcohol and Tobacco] Commission shall develop best practices for: (8) the development of a public health impact statement for all changes to the State alcoholic beverages laws.

Given the substantial changes to the manner in which alcohol can be sold and distributed and the potential, serious health and safety harms that could result from expansion of license privileges without adequate enforcement/compliance, no further action on HB996 should be taken without a public health impact statement.

We urge an unfavorable report on HB996.

Fig 1. Priority funding area map, State of Maryland, 2021

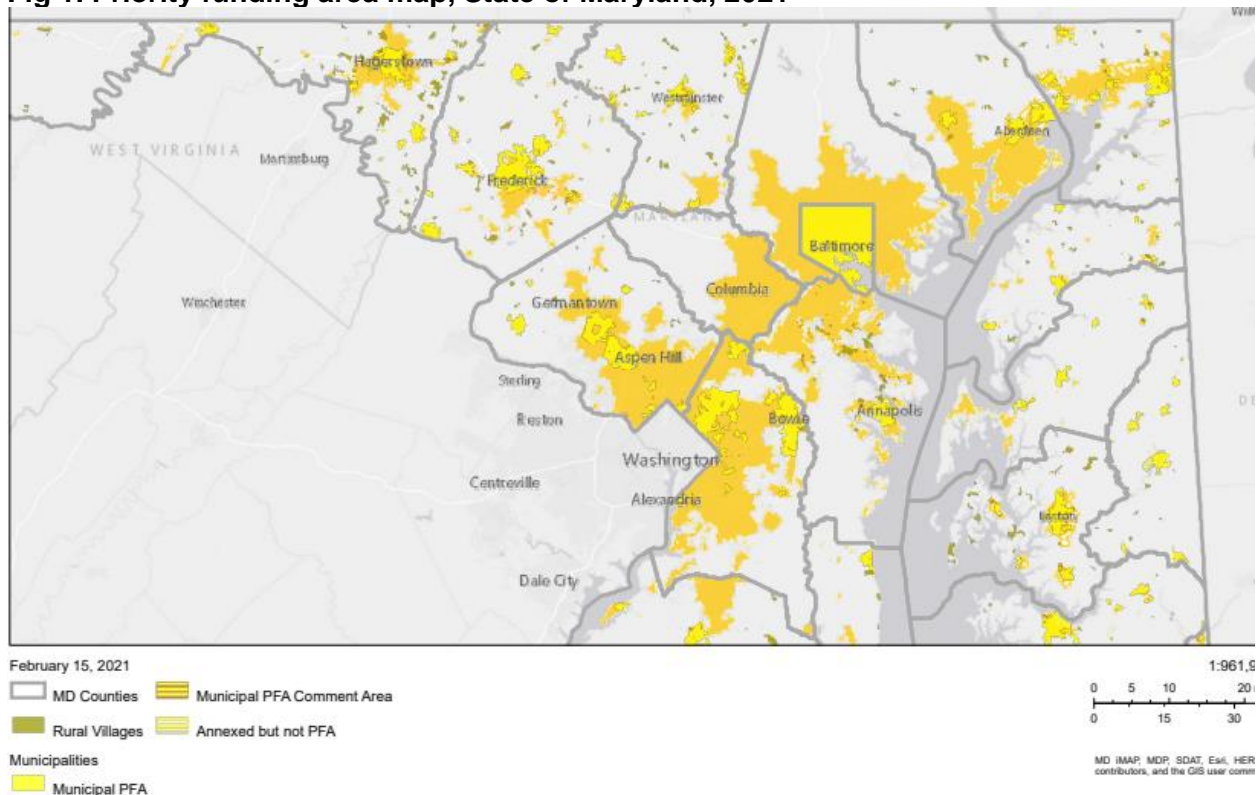
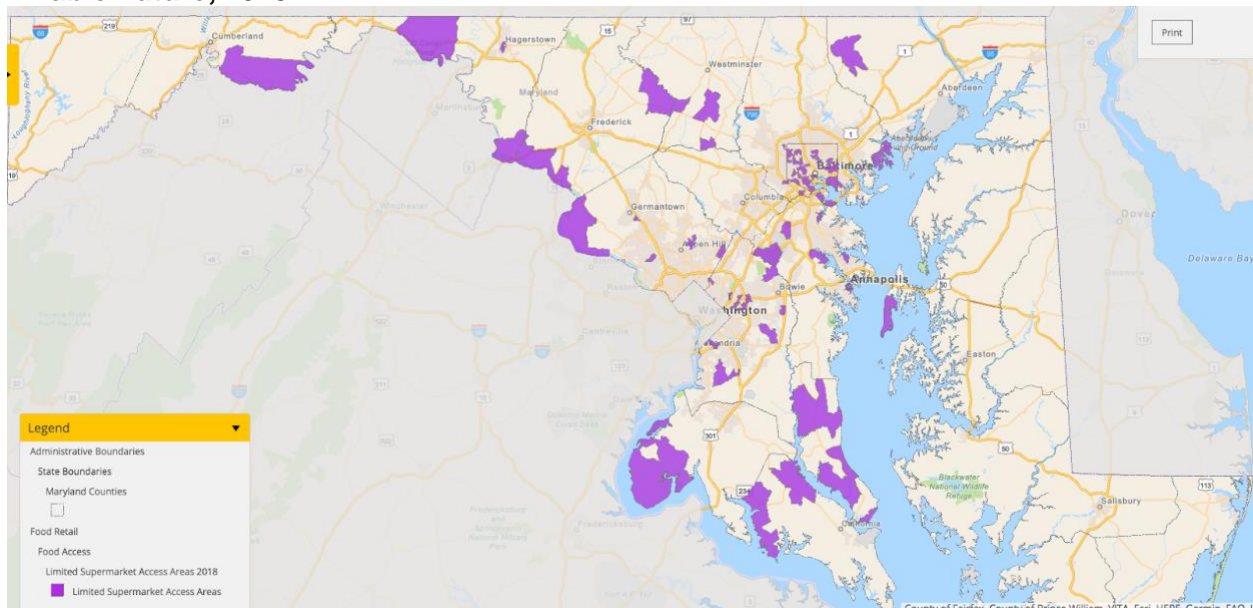


Figure 2. Limited supermarket access areas, Johns Hopkins University Center for a Livable Future, 2018



MdPHA is a nonprofit, statewide organization of public health professionals dedicated to improving the lives of all Marylanders through education efforts and advocacy of public policies consistent with our vision of healthy Marylanders living in healthy communities. MdPHA is the state affiliate of the American Public Health Association, a nearly 150-year-old professional organization dedicated to improving population health and reducing the health disparities that plague our nation.