

**Testimony of the Center for Science in the Public Interest
Sara Ribakove, Senior Policy Associate
Senate Finance Committee Hearing, Maryland
SB0263: Health - Food Service Facilities - Beverage Options with Children's Meals
February 3, 2022**

The Center for Science in the Public Interest (CSPI) supports SB0263. The bill will support the health of Maryland children. If passed, Maryland will become the fifth state in the nation to have passed legislation that ensures healthier beverages for children. SB0263 specifically guarantees that healthier beverages like water, unsweetened milk, and 100% juice are the default, or automatic, option with restaurant kids' meals, but does not limit a parent or caregiver's ability to choose for their family.

Sugary drinks are often automatically included with children's meals, adding unnecessary calories with little or no nutritional benefit.¹ Sugary drinks are also the dominant source of added sugars in the U.S. diet.² Consequently, leading health authorities in the U.S. recommend limiting sugary drink intake, particularly for children, to reduce the risk for chronic diseases.^{3,4,5,6,7,8}

When children eat out, they typically consume more calories, added sugars, and sugary drinks and fewer fruits, vegetables, and whole grains than when they eat at home.⁹ Since restaurants are a significant source of daily calories for children,¹⁰ improving the nutritional quality of beverages offered to children is critical in ensuring these beverages support, not harm, child health and nutrition.

Designating particular foods and beverages as children's menu items or bundling them together as children's meals are powerful forms of marketing. This marketing helps to establish norms for children, affecting their preferences and lifelong eating patterns.¹¹

According to the most recent report of the Dietary Guidelines for Americans (DGA) advisory committee, consistent scientific evidence demonstrates that diets higher in vegetables, fruits, whole grains and lean meats, and lower in sugar-sweetened drinks, are associated with beneficial outcomes for obesity and associated chronic diseases, including heart disease, type 2 diabetes, and some cancers.¹² It is critical to optimize diet quality during childhood while children are still forming dietary habits because diet quality tends to decrease with age.¹³

Other states and localities have also turned to public policy to improve restaurant children's meals in their communities. The states of California, Delaware, Hawaii, and Illinois and localities, including those within the state of Maryland such as the city of Baltimore and Prince George's County, have passed bills that make healthier beverages the automatic option with kids' meals.

In 2018, Baltimore passed the first healthy default beverage bill on the east coast.¹⁴ In 2020, Prince George's County Council became the first locality in the country to pass legislation that comprehensively addresses restaurant kids' meals.¹⁵ The Montgomery County Council is currently considering a bill that would similarly address the default beverages with kids' meals, as well as the

nutritional value of one meal combination.¹⁶ These actions across the state indicate the interest local communities have in supporting and advocating for healthy options for children and their families when they eat out.

CSPI urges the Maryland General Assembly to join this growing movement by passing the bill out of committee and voting in support of SB0263.

Healthier children's meals can reduce sugary drink consumption, encourage children to form healthy eating habits, and support parents' efforts to feed their children well. Thank you in advance for your support of this legislation that will support Maryland's families.

¹ Harris JL, et al. *Fast Food FACTS 2013: Measuring Progress in Nutrition and Marketing to Children and Teens*. Yale Rudd Center for Food Policy & Obesity, 2013. fastfoodmarketing.org/media/FastFoodFACTS_Report.pdf

² U.S. Department of Agriculture and U.S. Department of Health and Human Services. *Dietary Guidelines for Americans, 2020-2025*. 9th Edition. December 2020.

³ American Academy of Pediatric Dentistry. *Policy on Dietary Recommendations for Infants, Children, and Adolescents*. The Reference Manual of Pediatric Dentistry. 2017;40(6):65-67.

https://www.aapd.org/globalassets/media/policies_guidelines/p_recdietary.pdf.

⁴ National Heart Lung and Blood Institute. *Integrated Guidelines for Cardiovascular Health and Risk Reduction in Children and Adolescents*. U.S. Department of Health and Human Services, National Institutes of Health. 2013: 53.

<https://www.nhlbi.nih.gov/health-topics/integrated-guidelines-for-cardiovascular-health-and-risk-reduction-in-children-and-adolescents>

⁵ Committee on Prevention of Obesity in Children and Youth, Food and Nutrition Board, Institute of Medicine. *Preventing Childhood Obesity: Health in the Balance*. National Academies Press. 2005. ncbi.nlm.nih.gov/books/NBK83825/pdf/Bookshelf_NBK83825.pdf.

⁶ Centers for Disease Control and Prevention. *Get the Facts: Sugar-Sweetened Beverages and Consumption*. February 27, 2017. <https://www.cdc.gov/nutrition/data-statistics/sugar-sweetened-beverages-intake.html>.

⁷ Lott M, et al. *Healthy Beverage Consumption in Early Childhood: Recommendations from Key National Health and Nutrition Organizations*. Technical Scientific Report. Healthy Eating Research. 2019.

⁸ Vos MB, et al. *Added Sugars and Cardiovascular Disease Risk in Children: A Scientific Statement From the American Heart Association*. *Circulation*. 2017;135(19):e1017-e1034.

⁹ Powell LM, Nguyen BT. *Fast-food and Full-service Restaurant Consumption among Children and Adolescents*. *Arch Pediatr Adolesc Med*. 2012;167(1):14-20.

¹⁰ Liu J, et al. *Trends in Food Sources and Diet Quality Among US Children and Adults, 2003-2018*. *JAMA Net Open*. 2021;4(4):e215262

¹¹ Kraak V, Gootman J, McGinnis JM. *Food Marketing to Children and Youth: Threat or Opportunity?* Institute of Medicine. 2006. https://zodml.org/sites/default/files/Food_Marketing_to_Children_and_Youth_Threat_or_Opportunity.pdf.

¹² Dietary Guidelines Advisory Committee 2020. *Scientific Report of the 2020 Dietary Guidelines Advisory Committee: Advisory Report to the Secretary of Agriculture and the Secretary of Health and Human Services*. U.S. Department of Agriculture, Agricultural Research Service, Washington, DC.

¹³ Dietary Guidelines Advisory Committee 2020. *Scientific Report of the 2020 Dietary Guidelines Advisory Committee: Advisory Report to the Secretary of Agriculture and the Secretary of Health and Human Services*. U.S. Department of Agriculture, Agricultural Research Service, Washington, DC.

¹⁴ Baltimore City Council. *Council Bill 17-0152*. 2018.

<https://baltimore.legistar.com/LegislationDetail.aspx?ID=3189924&GUID=CCAEF3F3-04A5-483C-A34E-DCEEF25A41E6>

¹⁵ The Legislative Branch of Prince George's County, Maryland County Council. *CB-071-2020*. 2020.

<https://princegeorgescountymd.legistar.com/LegislationDetail.aspx?ID=4646902&GUID=155CA373-0DE9-4C7A-9C3A-9DF2CB10E954&Options=ID|Text|&Search=CB-071>

¹⁶ Montgomery County Council. *Bill 1-22*. 2022.

https://www.montgomerycountymd.gov/council/Resources/Files/agenda/col/2022/20220111/20220111_10A.pdf