

February 1, 2022

**2022 SESSION SUPPORT TESTIMONY
S.B. 263: Health Food Service Facilities
– Beverage Options with Children’s
Meals**

COMMITTEE: **FINANCE**
POSITION: **Testimony of Support of Senate Bill 263**

BILL: S.B. 263: Health Food Service Facilities – Beverage Options with Children’s Meals

Honorable Chair, Vice Chair, and Members of the Committee, thank you for the opportunity to submit this statement for the record in support of S.B. 263. This letter is submitted by Daphene Altema-Johnson, a food systems researcher at the Johns Hopkins Center for a Livable Future and member of the Maryland Food System Resiliency Council (MD FSRC) and Heather Bruskin, Executive Director of the Montgomery County Food Council (MCFC), Co-Chair of the MD FSRC. These comments are submitted on behalf of the Council, and do not necessarily represent the views of Johns Hopkins University, MCFC, or the State of Maryland. The Food System Resiliency Council was established by the Maryland General Assembly during the 2021 legislative session to bring together 33 appointed council members from across the state, all with different points of entry and expertise to work toward a more resilient food system and address the food insecurity crisis due to COVID-19.

One of the key mandates of this council was to develop, by Nov. 1st, 2021, equity and sustainability policy recommendations to increase the long-term resiliency of Maryland’s food system.

S.B. 263 would ensure that children and families have healthy and culturally appropriate beverage choices when dining at restaurants. Often, the default option on menus is a sugar-sweetened beverage (SSB), which provides a lot of calories and no nutrients. If access to those healthy beverage options is not available, then there’s not an opportunity for the consumer to make a healthy choice. SSBs have been linked to obesity and other health ailments such as Type 2 diabetes, heart disease, tooth decay and cavities, to name a few. In 2017-2018, the Centers for Disease and Control (CDC) reported 19.3% of children aged 2 to 19 were obese. A lot of scientific evidence shows a decreased in the prevalence of obesity when reducing the consumption of SSBⁱ. One of the many interventions that have been used in public health campaigns is providing healthier alternatives to consumers, so they are able to make informed decisions. Adding water, unsweetened whole nonfat or low-fat milk, and 100% fruit juice as default options provides the consumer with a ‘nudge’ to change their behavior pattern and hopefully make a healthier choice. Lastly, the Capability, Opportunity, and Motivation Behavior Model (COM-B) developed by Michie et alⁱⁱ, discussed how the components can work together to bring about behavior change. This bill is in part trying to use this model by creating an opportunity where one does not exist.

Importantly, this bill also requires that a non-dairy beverage equivalent to cows’ milk be included. Not only is this recommendation culturally appropriate, but it’s also necessary as approximately 36% of Americans experience lactose intoleranceⁱⁱⁱ or malabsorption. Lactose intolerance is a condition that causes bloating, diarrhea, and gas after consumption of foods and/or drinks that contain lactose.

Lactose intolerance is more prevalent for certain racial and ethnic groups. Including a non-dairy beverage provides those with this health condition an additional nutritious option outside of SSBs.

Thank you for the opportunity to share our support of S.B. 263. This bill would benefit Maryland's children by ensuring access to healthy beverages when dining out and address the ongoing issues related to the obesity epidemic.

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ⁱ Hu FB. Resolved: there is sufficient scientific evidence that decreasing sugar-sweetened beverage consumption will reduce the prevalence of obesity and obesity-related diseases. *Obesity reviews*. 2013 Aug;14(8):606-19.

ⁱⁱ Michie, S., van Stralen, M.M. & West, R. The behaviour change wheel: A new method for characterising and designing behaviour change interventions. *Implementation Sci* **6**, 42 (2011). <https://doi.org/10.1186/1748-5908-6-42>

ⁱⁱⁱ National Institute of Diabetes and Digestive and Kidney Diseases. Definitions & Facts for Lactose Intolerance. <https://www.niddk.nih.gov/health-information/digestive-diseases/lactose-intolerance/definition-facts>