

LETTERS

The need for Canada to tax sugar-sweetened beverages

In their analysis about taxation on sugar-sweetened beverages, Riediger and Bombak correctly point out that we must consider the potential effects of such a tax on weight stigma, Indigenous populations and health inequities.¹ They also call to our attention the lessons learned from tobacco taxation. It would be a mistake, however, for readers to conclude that Canada should not implement a levy on sugar-sweetened beverages.

Sugar-sweetened beverages are strongly linked with obesity and the associated chronic diseases,² and consumption of these beverages is an independent risk factor for type 2 diabetes³ and heart disease,⁴ regardless of body mass index. Targeted taxation of sugar-sweetened beverages raises their price and results in decreased consumption.⁵ The beverage industry is aware of this link and has spent more than \$100 million over the last eight years fighting taxation of sugar-sweetened beverages.⁶

Weight stigma exists because excess weight gain is often misattributed to gluttony and sloth rather than to the modern obesogenic environment, which promotes excess caloric intake. Manufacturers of sugar-sweetened beverages reinforce this misconception by stressing the role of inactivity in weight gain,⁷ deflecting responsibility from their product and implicitly labelling the obese as lazy. Placing a levy on sugar-sweetened beverages lays blame where it belongs.

Indigenous people in Canada are being ravaged by excessive sugar consumption, and, as a result, about 85% of First Nations women will go on to develop type 2 diabetes.⁸ Free, safe and reliable drinking water must be available to all Canadians, and the lack of water security on some First Nations reserves is a national shame that needs to be addressed

urgently. Water, not sugar-sweetened beverages, should be the first choice for hydration, and it must always be cheaper and more readily available than sugar-sweetened beverages. As was done in Mexico, a portion of the proceeds of a levy on sugar-sweetened beverages can be used to facilitate this goal.

The authors acknowledge that a tax on sugar-sweetened beverages results in decreased consumption; however, they reject this intervention largely on the grounds that it would be of lesser benefit to Canadians of lower socioeconomic status, thereby increasing health inequities. This assertion is questionable, as both tobacco taxation and sugary drink taxes seem to bring about the greatest reductions in consumption among the less well-off.^{9,10}

It is true that many interventions, from coronary artery bypass surgery for heart disease,¹¹ to penicillin for pneumonia,¹² have lower success rates in impoverished populations. Health care inequities due to poverty provide a powerful rationale to urgently address poverty as well as food and water insecurity. These steps are more likely to result in equality of benefit. This is a far more reasonable approach than withholding an intervention to promote equality of harm.

Most Canadians recognize the health risks associated with consumption of sugar-sweetened beverages and the benefits of taxing this product. The majority of Canadians support a tax on sugar-sweetened beverages if the proceeds are used for health promotion, and support is strongest among Canadians in the lowest socioeconomic strata.¹³ It is time for health care practitioners to join the majority of Canadians in calling for a federal excise tax on sugar-sweetened beverages.

Tom Warshawski MD

Pediatrician and chair, Childhood Obesity Foundation, Vancouver, BC

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