

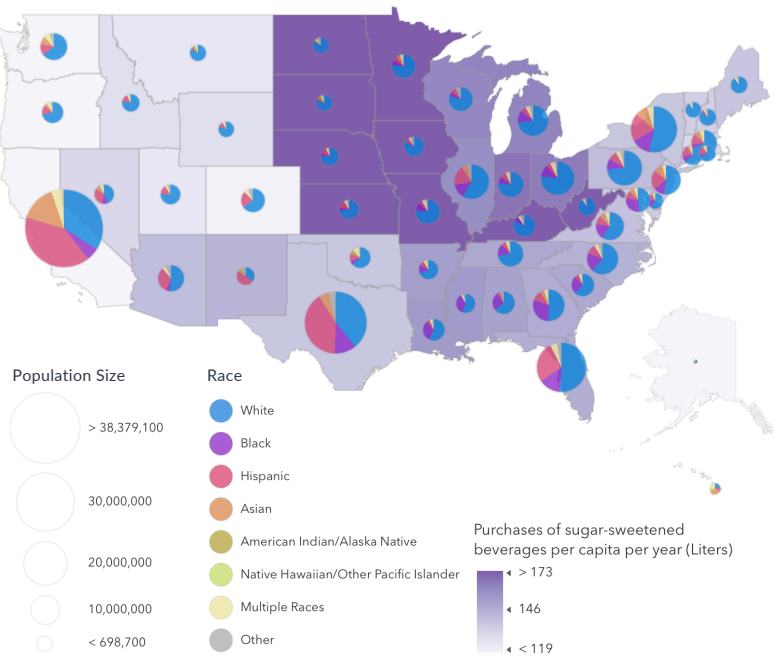


AN EXPLORATION ON THE RELATIONSHIP BETWEEN SUGAR-SWEETENED BEVERAGES AND DISEASES IN THE UNITED STATES

Kylie Yuet Ning Poon and Cathy Tung Yee Tsang

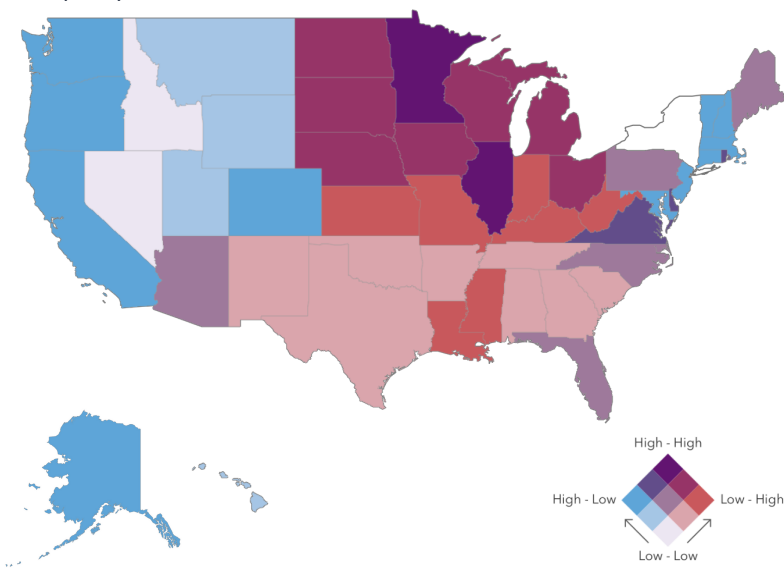
THE INFLUENCE OF DEMOGRAPHIC FACTORS ON THE PURCHASE OF SUGAR-SWEETENED BEVERAGES IN THE UNITED STATES

Population Size, Distribution of Race, and Purchases of sugar-sweetened beverages per capita per year (Liters)



- Purchases of sugar-sweetened beverages per capita per year are the highest in Midwestern states due to their poorer socioeconomic status; and the lowest in Western and Northeastern states due to a better socioeconomic status and the implementation of soda taxes in Seattle, Boulder, 4 Californian Cities, the District of Columbia, and Philadelphia (Urban Institute, 2019).

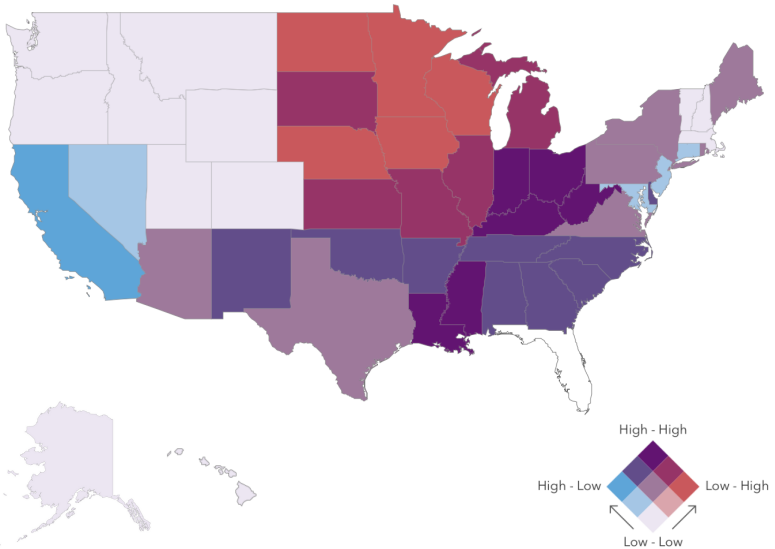
Income per capita (US\$) versus Purchases of sugar-sweetened beverages per capita per year (Liters)



- According to George Washington University's School of Public Health (2022), low-income families are twice as likely to consume sugar-sweetened beverages compared to high-income families, as these beverages are highly affordable and low-income families tend to have a negative perception on tap water.
- A "Low Income - High Purchase trend" can be observed in Midwestern, Southwestern, Southeastern states (e.g., US\$30,195 and 177.1 Liters in West Virginia), while a "High Income - Low Purchase trend" can be observed in Western and Northeastern states (e.g., US\$44,617 and 120.5 Liters in Colorado).

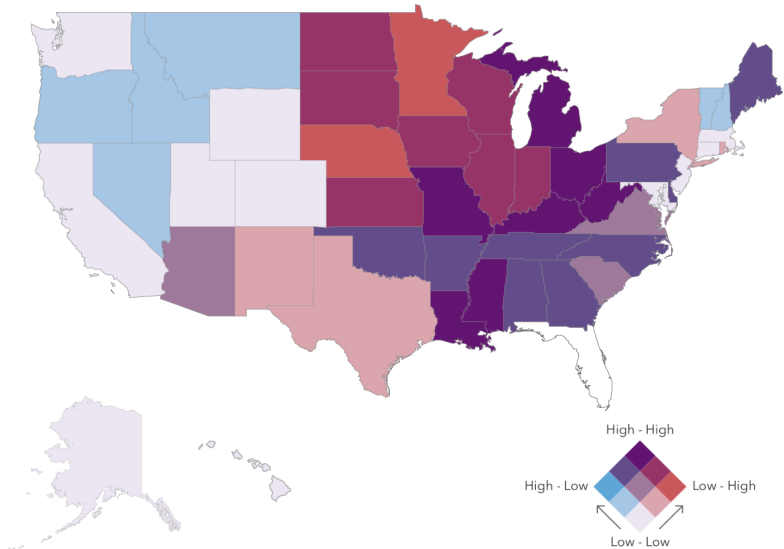
RELATIONSHIP BETWEEN THE PURCHASE OF SUGAR-SWEETENED BEVERAGES AND DISEASES IN THE UNITED STATES

Population diagnosed with **Diabetes** (%) versus Purchases of sugar-sweetened beverages per capita per year (Liters)



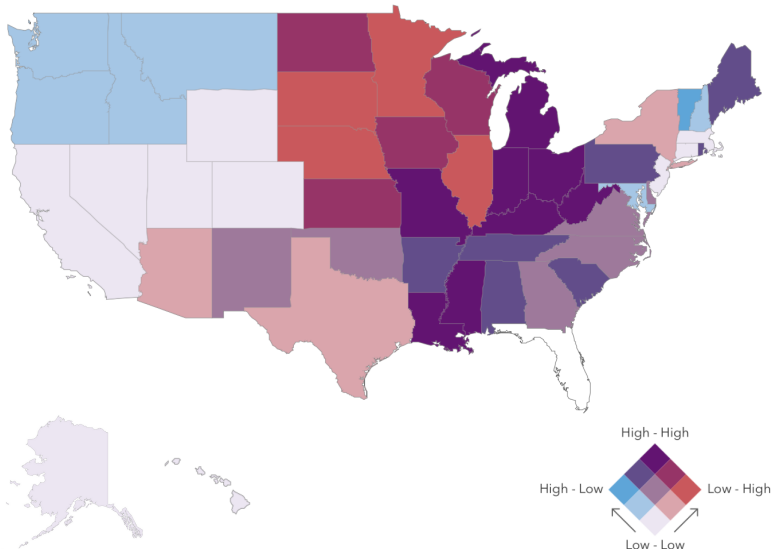
- According to The InterAct Consortium (2013), drinking one can of sugar-sweetened beverage everyday may increase the risk of developing type 2 diabetes by 22%, as blood glucose levels increase.
- A "High-High trend" in diabetes and purchase of sugar-sweetened beverages can be observed in Midwestern, Southeastern, and Southwestern states (e.g., 12.1% and 167 Liters in Indiana), while a "Low-Low trend" tended to be observed in Western states (e.g., 9.6% and 90.8 Liters in Oregon).

Population diagnosed with **Cardiovascular Diseases** (%) versus Purchases of sugar-sweetened beverages per capita per year (Liters)



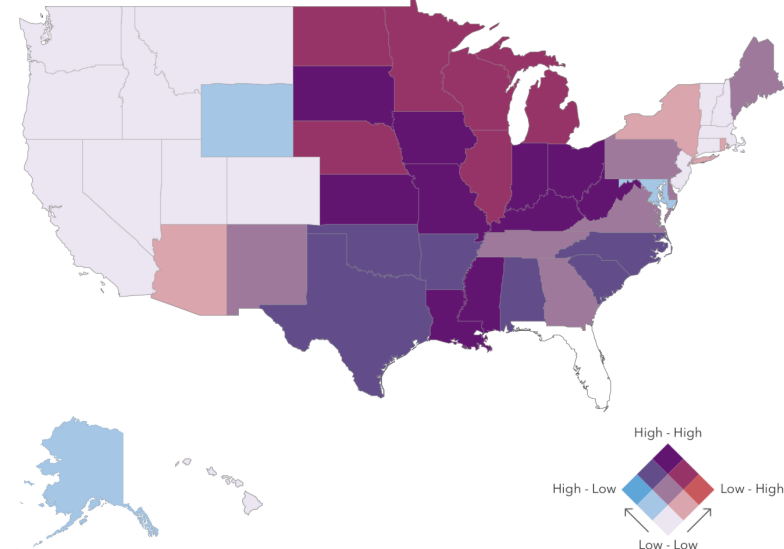
- According to Pacheco et al. (2020), consuming fruit drinks and soda drinks on a daily basis increase the likelihood of experiencing cardiovascular diseases by 42% and 23% respectively, as these beverages lead to high blood pressure, high cholesterol and triglyceride levels, and chronic inflammation, all of which worsens heart conditions.
- A "High-High trend" in cardiovascular diseases and purchase of sugar-sweetened beverages can be observed in Midwestern, Southeastern, and certain Northeastern states (e.g., 12.4% and 155.6 Liters in Mississippi), while a "Low-Low trend" can be observed in Western states (e.g., 6.4% and 92.4 Liters in California).

Population diagnosed with **Arthritis** (%) versus Purchases of sugar-sweetened beverages per capita per year (Liters)



- A study on 186,900 women found that those who drank at least one soda drink per day were found to be 60% more likely to get rheumatoid arthritis compared to those who drank less than one per month. This is because sugar-sweetened beverages release pro-inflammatory proteins named cytokines, leading to pain, swelling, and stiffness in the joints (Hu et al., 2014).
- A "High-High trend" in arthritis and purchase of sugar-sweetened beverages can be observed in Midwestern, Southeastern, and certain Northeastern states (e.g., 29.5% and 155.1 Liters in Louisiana), while a "Low-Low trend" can be observed in Western states (e.g., 20.9% and 125.1 Liters in Utah).

Population with a body mass index of 30 or over (**Obesity**) (%) versus Purchases of sugar-sweetened beverages per capita per year (Liters)



- A 20-year study on 120,000 adults found that those who increased their consumption of sugar-sweetened beverages by one 12-ounce serving per day gained an extra pound every 4 years on average, compared to people who did not change their intake. This is because sugar-sweetened beverages contributes to added sugar content, low satiety, and incomplete compensation for total energy, which increase people's appetite (Mozaffarian et al., 2011).
- A "High-High trend" in obesity and purchase of sugar-sweetened beverages can be observed in Midwestern, Southeastern, and certain Southwestern states (e.g., 36.4% and 194.9 Liters in Iowa), while a "Low-Low trend" can be observed in Western states (e.g., 28.8% and 89.7 Liters in Washington).

Reference List

Secondary Data

- Andreyeva, T. (2021). Large State Variation in Sugar-Sweetened Beverage Purchases: What We Learn from the Beverage Industry Data. *Current Developments in Nutrition*, 5(12), 1-3.
- Kaiser Family Foundation. (2023, February 11). *Population Distribution by Race/Ethnicity – Timeframe: 2021*. Retrieved from <https://www.kff.org/other/state-indicator/distribution-by-raceethnicity/?currentTimeframe=0&sortModel=%7B%22colId%22:%22Location%22,%22sort%22:%22asc%22%7D>
- United Health Foundation. (2022). *America's Health Rankings - 2022 Annual Report – Report Data (All States)*. Minnetonka, MN: United Health Foundation.

Content

- Boehm, R., Stowers, K.C., Schneider, G.E. & Schwartz, M.B. (2021). Race, Ethnicity, and Neighborhood Food Environment Are Associated with Adolescent Sugary Drink Consumption During a 5-Year Community Campaign. *Journal of Racial and Ethnic Health Disparities*, 9(1), 1335-1346.
- Centers for Disease Control and Prevention. (2022, April 11). Get the Facts: Sugar-Sweetened Beverages and Consumption. Retrieved from <https://www.cdc.gov/nutrition/data-statistics/sugar-sweetened-beverages-intake.html>
- George Washington University School of Public Health. (2022, September 22). *Tools and Education Can Reduce Sugary Drink Consumption For Low-Income Latino Families*. Retrieved from <https://publichealth.gwu.edu/content/tools-and-education-can-reduce-sugary-drink-consumption-low-income-latino-families>
- Harvard T.H. Chan School of Public Health. (2013, October 30). *Sugary Drinks*. Retrieved from <https://www.hsph.harvard.edu/nutritionsource/healthy-drinks/sugary-drinks/>
- Hu, Y., Costenbader, K.H., Gao, X., Al-Daabil, M., Sparks, J.A., Solomon, D.H., Hu, F.B., Karlson E.W., and Lu, B. (2014). Sugar-sweetened soda consumption and risk of developing rheumatoid arthritis in women. *The American Journal of Clinical Nutrition*, 100(3), 959-967.
- Mozaffarian, D., Hao, T., Rimm, E.B., Willett, W.C. & Hu, F.B. (2011). Changes in diet and lifestyle and long-term weight gain in women and men. *New England Journal of Medicine*, 364(25), 2392-2404.
- Pacheco, L.S., Lacey Jr, J.V., Martinez, M.E., Lemus, H., Araneta, M.R.G., Sears, D.D., Talavera, G.A. & Anderson, C.A.M. (2020). Sugar-Sweetened Beverage Intake and Cardiovascular Disease Risk in the California Teachers Study. *Journal of the American Heart Association*, 9(1), 1-11.
- The InterAct Consortium. (2013). Consumption of sweet beverages and type 2 diabetes incidence in European adults: results from EPIC-InterAct. *Diabetologia* 56(1), 1520-1530.
- Urban Institute (2019, August 17). *State and Local Backgrounders - Soda Taxes*. Retrieved from <https://www.urban.org/policy-centers/cross-center-initiatives/state-and-local-finance-initiative/state-and-local-backgrounders/soda-taxes>