

# Addressing American Obesity: A Policy Proposal

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# Abstract

Obesity is defined by the CDC as a BMI over 30, which is a weight that is higher than what is considered healthy, meaning excess fat that is causing or increasing the risk of health issues. In 2017, 42% of adults were considered clinically obese, putting them at significantly higher risk for numerous conditions including osteoarthritis, breathing problems, mental illness, body pain, and difficulty with physical function. In the last century, life expectancy has steadily increased in the United States, but rising obesity rates may cause this metric to fall. Obesity is caused by environmental and behavioral factors, namely an individual's dietary choices and physical inactivity. The burden of disease, though, is unequally borne by society. Socioeconomic status plays a large role in an individual's susceptibility to obesity as the poor face higher rates of disease. This literature sets forth a policy proposal to combat obesity in the United States that focuses on imposing taxes on unhealthy foods and making healthy food more accessible.

Keywords: Obesity, Soda Tax, Food Subsidies

#### 1. Introduction

According to the CDC, the leading causes of death in 2019 were heart disease, cancer, accidents, lower chronic respiratory disease, Alzheimer's and diabetes.<sup>5-13</sup> Obesity's various complications are all leading causes of death, aside from one — accidental death. Solving the obesity epidemic from a dietary standpoint is theoretically simple: eat fewer processed foods. The USDA recommends that people eat more fruits and vegetables, whole grains, beans, and nuts, while keeping dairy, lean meat, and eggs in moderation.<sup>14</sup> However, making this simple dietary change is not feasible for most people due to socioeconomic With that in mind, the current barriers. government subsidies focused on corn, soybeans, rice, sorghum dairy, and livestock have saturated grocery store and bodega shelves with inexpensive,

processed snack foods, fast food, soda, and corn and soybean fed meat.<sup>15</sup> Many of these products are artificially reduced in price by their use of cornderived sweeteners, soybean-derived oils, and fatty meats. There is a positive association between the proportion of someone's diet containing these subsidized foods and obesity.<sup>16</sup> In effect, the government subsidizes unhealthy food and does subsidize healthy food. To increase accessibility to healthier alternatives, government should subsidize fruits and vegetables.

### 2. Policy: Subsidize fruit and vegetable growers

In many grocery stores, the most energy-dense foods are often the least expensive. Farm subsidies have traditionally existed as a government tool of business and economics. Originally understood to provide economic stability to small farmers, they are now a tool of large agricultural conglomerates that can be leveraged to improve public health.<sup>17</sup> As detailed by Monsivais and Drewnowski, retail prices in Seattle Washington were found to be "\$18.16/1,000 kcal for foods in the bottom quintile of energy density" and only "\$1.76/1,000 kcal for foods in the top quintile."<sup>18</sup> This finding elucidates the formidable barrier to eating a healthy diet for those with limited financial means.<sup>19</sup>

Previous studies have shown that price reduction affects individual choices. In the Healthy Incentives Pilot, SNAP (Supplemental Nutrition Assistance Program) recipients were provided a 30% rebate on fruits and vegetables. They found behavioral change proportional to the change in the price. According to Mozaffarian, the 30% incentive of the program would prevent "8,782 cardiovascular disease events, gain 18,928 quality-adjusted life years (QALYs), and save \$1.21 billion in healthcare costs" if continued for 5 years. 20

This policy is a feasible one for disincentivizing consumption in which public health directly collides with corporate bottom lines. Additionally, the mechanism of traditional farm subsidies is already in place, which allows for the leverage of existing networks and processes to generate new types of farm subsidies.

Increasing the amounts of fruit and vegetables consumed is beneficial to one's health, but the consumption of high-calorie nutrient-poor foods must also be reduced to improve weight management. This type of price comparison (of lowering the cost of healthy food and increasing the cost of unhealthy food) makes healthier food a more cost-effective choice for consumers. As such, a two-pronged approach decreases the cost of healthy food while increasing the cost of "junk" food.

# 3. Policy: Tax soft drinks and fast foods

Soft drinks largely contribute to obesity rates due to their minimal nutritional content and maximum energy density. Taxing soft drinks would make people less inclined to buy them.<sup>21</sup> In Mexico, a 10% tax added to soft drinks along with an advertising campaign was found to be effective in reducing soda consumption. A decrease in the purchase of these taxed drinks and an increase in the purchase of drinks without the additional tax, like water, followed.<sup>22, 23, 24</sup> Additionally, as the burden of obesity is found to be greater in lowerincome groups, the decrease in consumption was found to be greater among households of lesser status.<sup>25</sup> Chile; socioeconomic Berkeley, California, and Philadelphia, Pennsylvania have followed suit with similar taxes on sugarsweetened beverages. After the implementation of the tax on soft drinks, Berkley saw a 21% decline in the consumption of soft drinks and an increase in water consumption while Philadelphia saw a 51% decline. 26 27 28 Chile, which had a smaller tax increase of 5%, also saw a decrease of around 4% in soft drinks.<sup>29</sup>

While this policy has proved successful across the country, these proposals have also been met with harsh backlash from corporate interests. Washington DC's proposed 1.5 cents per ounce excise tax was withdrawn after backlash from the affected soda and sugar industries, while proposed rules blocking SNAP recipients from using their benefits on soda drew significant lobbying opposition from the same industry. 30,31,32

Low nutrition, high calorie foods are easily accessible in the USA. Every city has a plethora of fast-food restaurants, bodegas, and gas stations stocked with junk food. Fast food and snack foods are cheap, convenient and addictively tasty, but they often fail to provide adequate nutrients and they include excessive doses of calories and fat that contribute to obesity and its related health consequences. 33,34 It is therefore unsurprising that there is an association between the frequency of fast food consumption and increased BMI. Previous studies have shown that there are significant associations between the price of food

and the choices consumers make.<sup>36</sup> These types of taxes on unhealthy foods have shown promise in the European context with a Danish tax on fatty foods shown to decrease consumption and increase consumption of fruit and vegetables.<sup>37,38</sup>

An excise tax of this type would likely receive backlash from vested interests. A main criticism is that these taxes are regressive and will be felt most heavily by the poor due to both consumption habits and availability. As such, this combined approach, increasing access to healthier foods and decreasing availability of unhealthy foods. With obesity undermining successes in public health, a tax on these consumables that contribute so heavily to the obesity epidemic and the designation of money collected to health-related spending could be an important step in improving the health of Americans. Cigarettes were formerly one of the largest killers of Americans and taxing them has been effective in curbing rates of cigarette consumption.<sup>39, 40</sup> Obesity is now one of the greatest health threats to Americans and must be addressed in the public health sector.

#### 4. Conclusion

A combination of incentives for healthy food and taxation of unhealthy food have the potential to help address America's obesity crisis. This dual pronged approach should be done in tandem with other strategies such as education initiatives and campaigns to increase physical activity. An individual policy's actions will never cause a complete shift in the obesity landscape, but in conjunction with educational and structural changes, adjusting food prices to reflect nutritional value is a necessary component for success.

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