Exploring Views of a Tax on Sugar-sweetened Beverages

Dr Hannah Timpson
METHODOLOGY

- Research aimed to specifically explore attitudes, behaviours and perceptions of people who would mostly likely be affected by a tax on sugary drinks

- Qualitative focus
  - Family interviews
  - Paired interviews
  - Focus groups
  - 1-1 interviews
  - Supplemented by surveys
Sampling

- Study design reflected the key determinants of sugary drink consumption
  - areas where sugary drink consumption was likely to be higher (areas with high deprivation and high levels of obesity)
  - from people who were most likely to consume and/or be affected by a tax (children, adolescents, young adults, families)
## Area Selection

<table>
<thead>
<tr>
<th>County</th>
<th>Area</th>
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<tbody>
<tr>
<td>Cheshire</td>
<td>Halton</td>
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<td>Cumbria</td>
<td>Barrow-in-Furness, <em>Copeland, Carlisle</em></td>
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<td>Lancashire</td>
<td>Blackpool, <em>Blackburn w/Darwen, Burnley</em></td>
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<td>Greater Manchester</td>
<td>Manchester</td>
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<td>Merseyside</td>
<td>Knowsley</td>
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Source: Health Profile 2012 Data
Sample Characteristics

Total insight gathered n = 293
In-depth interviews n = 125
Surveys n = 168
**Sample Characteristics**

<table>
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<tr>
<th>Total:</th>
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<td>Health and social workers</td>
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Sample Characteristics (Surveys)

Females: 67.3% (113/168)
Males: 32.7% (55/168)
Findings: Consumption

Our study findings reflect existing evidence regarding levels of consumption, with the majority of our participants reporting consuming sugary drinks.

76.2% of survey respondents reported drinking sugary drinks.

Evidence shows that children and young people are the biggest consumers of sugary drinks (Ng et al., 2011; Rugg-Gunn et al., 2007).
Overview of Key Qualitative Findings

Research findings add to existing knowledge and understandings of drivers of consumption.

Provides additional evidence and context:

- Habit
- Awareness and understanding
- Social and environmental determinants
- Acceptability of a tax
- Perceived impact of a tax
Most adults who drank sugary drinks described drinking them out of habit.
Although not explicitly mentioned, the behaviours that children and young people described suggested that they also drank them out of habit.

**I:** How often do you drink them?
*Usually every day* (Male, aged 8, B)

**B4:** Once an hour
**I:** Once an hour?
**B4:** All day
(Mixed focus group, aged 16-17)

**G1:** Everyday
**B1:** All the time
(Mixed focus group, aged 6-11, B)

**B2:** About once a day...every time I’m thirsty
(Mixed focus group, aged 16-17)
Evidence shows that consumption patterns develop in childhood and persist over time (Butland, et al., 2007)

Our findings have demonstrated how this is also true of adults who described drinking sugary drinks as a treat.

Linked to their attitudes and behaviours towards sugary drinks as a child; their adult behaviours were based upon their childhood experiences.

‘Pop’ to me when I was growing up was a treat, and that’s what I see it as for the girls. (Mother of 2 young girls aged 8 & 4 years, H)

My parents used to buy it, and I was a child of the seventies, so I grew up in the 80’s getting Cream Soda pop and Iron Bru, and it was the drink of choice to a child that grew up in the 80’s. (Parent of a 9 mth old, H)
Previous studies have suggested that levels of food literacy and health knowledge can impact on the consumption of unhealthy options (Kalavana, et al., 2010)

An inability to recognise the energy density of food means that people do not compensate appropriately to maintain energy balance (Viskaal, et al., 2009)

- Many participants (regardless of age) did not recognise all the drinks that are classed as sugary drinks
- Participants viewed sugary drinks as source of energy, very few linked to weight gain or high calories
- The majority knew of the negative effect on dental health
Awareness and Understanding: Relative Contribution to Health

- Asking people to consider reasons for drinking sugary drinks generated discussions about the relative contribution of sugary drinks to health, particularly amongst adolescents and adults.
- Defended their behaviour choices by describing their perceptions about alternative options to sugary drinks.

**Drinking lemonade is better than not drinking anything**
(Young Mother, M1)

**G4: Isn’t though like diet coke and that though a lot worse than full fat?**
(Mixed focus group, aged 16-17 Kb)

**G2: Don’t them diet ones have something weird in them, like Aspartame? My mum always goes on about it so she says not to drink it**

**G3: So just because something’s not got sugar in it, it could have a sugar substitute in it, which is worse**

**G1: What’s an Aspartame?**

**G2: I don’t know, it’s just something that replaces sugar that’s like bad for ya**
(Mixed focus group, aged 16-17 Ka)
Social and Environmental Determinants

- Research has recognised the influential role of obesogenic environments.
- Interactions between personal, social, political, economic and physical elements of the environment have all been identified as important influencers of health behaviour (Stokols, 1992, 1996, 2000).
- Study findings support previous research which highlights the ease at which people can make unhealthy behaviour choices to consume sugary drinks.
- Heavy advertising and availability of unhealthy items in retail outlets (Burns & Inglis, 2007; Pearce, et al., 2007).
Social and Environmental Determinants

• Previous research has found that sugary drink consumption occurs in the home environment, followed by food service establishments and schools (for children) (Wang, Bleich & Gortmaker, 2008; Ezendam, Evans, Stigler, Brug, & Oenema, 2010; Pomeranz, 2012; Gibson & Shirreff, 2013)

• Our findings show that adults are more likely to bulk buy sugary drinks and have them in the home, where they and their children will consume them

• Evidence has shown the strong impact of parental influence and knowledge on family behaviours, and the level of control that parents have over their children’s diet (Butland et al., 2007)
However, less is known about social influences on sugary drink consumption.

Our research found that young people are more likely to buy one sugary drink to consume when they are out with friends, or walking home from school, and would be less likely to buy more than one.

B3: *I drink them in the streets usually... after school*

B2: *After school... or when you are walking to school (Mixed focus group, aged 7-10, H)*

‘On their way to school; a lot of them are having it as breakfast.’ (Community Health Improvement worker)
Price

- Price is a key determinant of consumption (Epstein, Dearing, Handley, Roemmich & Paluch, 2006; Epstein, Dearing, Paluch, Roemmich & Cho, 2007)

- According to evidence, price frames the context in which consumer responses are made, and our research suggests this is true to an extent

- Our research suggests these influences are different depending on age

- For adults, many described the influence of price as affecting decisions about sugary drink consumption, buying sugary drinks when there is a supermarket offer on, or when it is part of a meal deal
Price

You go into the Co-op and you get a meal deal for a couple of quid. So your bottle of coke might be £1.15 but you get your butty, your packet of crisps, and your bottle of coke for three quid. So you split it down and you think; I’m going to get the drink included with it anyway. You get the bottle of coke because it would have been more expensive without it. (Parent of a 9 mth old, H)

Where would you say you buy these drinks?
P2: Cheapest as possible (laughs); Home and Bargain or something, if they have a special deal.
P4: They always have deals on coke, buy one get one free, they’re everywhere!
P1: Yeah you can’t buy one bottle can you; you have to buy two or three (Parent and carer focus group, H).

P: He gets a crate of cans of Coca-Cola, from Costco, and if we do like a Domino’s pizza order you get a litre bottle with the order.
For children and young people, many described that they bought a sugary drink if they wanted one, and had the money to pay for it, regardless of price.

Children and young people had less concept of budget and ‘meal deals’.

Many children and young people described being given money from their parents (either to buy something from the shop, or as dinner money) and using this to buy sugary drinks.

Some young people described how they were happy to pay relatively large sums (such as £4) to buy a sugary drink.

This issue links to the passive overconsumption associated with obesogenic environments, and that young people appear to drink sugary drinks for taste but also convenience and because they are available.
What do people think about a tax? Acceptability

Lack of evidence regarding acceptable levels of taxation (Mytton, et al., 2012)

Our study found that people generally find the notion of a tax on sugary drinks acceptable, but felt that 20% would not be enough to impact on consumption.

Yeah I think it’s perfectly acceptable, I think it will work for a small minority of people, I don’t think it will cure the problem (Parent of a 9 mth old, H)

I think it’s acceptable, but I am not sure what the impact would be (Residential Manager Looked After Children)

G1: I don’t really have an opinion. I don’t think we’d really notice, if it wasn’t ridiculous amounts of money
G2: There’s different prices for it everywhere anyway (Mixed focus group, aged 16-17, Ka)
What do people think about a tax?  
Acceptability

You need to be doing education……And I think more education for families when they have young children, so through places like children’s centres, to…I know they do the healthy start…but it will mention fizzy drinks but it doesn’t concentrate on it too much. (Parent of a 9 mth old)

If they were going to do it, they should put it in worthwhile projects in the community, cos that’s where it starts from is the community, it doesn’t start in Westminster (Adult male, LWMS attendee, BI)

...the money should be spent on educating young people and poorer families about healthy eating (Mother of 2 young girls aged 8&4 years)

You should make the bad stuff dearer and the good stuff cheaper (Mixed focus group, aged 8-10, H)
Many of the participants felt that a price increase of 20% would not be enough to make a difference.

B5: I don't think such a small increase would affect it…
G3: I think if it was a large increase it would.
G4: Yeah unless it went up from a pound to two pound
B3: Yeah you wouldn’t bother then.

P: It’s such a small increase in price, what difference would 20p, what 23p make? None, if people want to buy it then they still will do.
(Young mother, H)

I don’t think from a young person’s perspective 18p would make a difference.
(Home Manager, LAC)

Some participants suggested that people may change their behaviour if they could not afford to buy sugary drinks, and that they would buy a cheaper alternative instead.
Impact of a Tax

Lower income parents could be influenced to change consumption behaviour by a tax on sugary drinks

*I mean, maybe families on a budget might re-think, so like if they have a set amount each week for their weekly shopping then maybe* (Young Mother, H)

This would impact on the availability of sugary drinks to young people in the home, but would not impact on sugary drink consumption outside of the home, if a young person could afford it

This could be influenced by how much money a young person carries/is given by their parents, suggesting that those from lower income households who could have less personal spends may be more sensitive to a price increase (Smed, Jensen & Denver, 2007; Powell & Chriqui, 2011)
Behaviour Change

Behavioural approaches to tackling obesity have had limited success because

“people struggle against environments which increasingly promote a high energy intake and sedentary behaviours” (Swinburn, et al., 1999, p.563)

Behaviour change theories have been criticised for expecting the individual to motivate themselves to change their behaviour, without considering external economic and social processes.

Given the associations between availability, convenience and advertising on sugary drink consumption, the impact of a tax would also be dependent on environmental factors.
Evidence suggests that creating an environment which supports and facilitates behaviour at these levels creates a passive intervention which will be effective and sustainable in the longer-term (Stokols, 1996)

Advertising and education would be important considerations, in terms of highlighting the health implications of sugary drinks, beyond dental health, and dispelling myths about the health implications of alternative options.
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Lisa Hughes, Research Assistant, CPH

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## Sampling Details

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<th>County</th>
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<th>Obese adults&lt;sup&gt;b&lt;/sup&gt; (%)</th>
<th>Obese children&lt;sup&gt;c&lt;/sup&gt; (%)</th>
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