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BEFORE THE COMMITTEE ON LABOR AND CIVIL SERVICES REGARDING RESOLUTION NO. 250028 OCTOBER 27, 2025 10:00AM

Good morning. My name is Christina Roberto of the University of Pennsylvania. Thank you for the opportunity to provide testimony today regarding Resolution No. 250028 introduced by Councilmember Harrity.

I am a Professor of Health Policy and Fellow at the Leonard Davis Institute who has studied people's eating habits and food and nutrition policies for 20 years. My testimony today represents my professional views and not those of the University of Pennsylvania or Penn Medicine. Over the last 8 years, I have led multiple studies of the Philadelphia sweetened beverage tax. **This research shows that the tax has improved health, particularly for the lowest income Philadelphians.** Repealing this tax would be devastating for the City and its residents. There are *many* positive benefits of the sweetened beverage tax in terms of what it funds in the City, but my brief comments will focus on the benefits I've studied directly.

Claims that the tax has caused job loss and forced grocery stores to close are not supported by science. We studied unemployment claim filings in Philadelphia compared to those in other untaxed Pennsylvania counties one year before and after the tax. We saw no change in unemployment claims overall or in industries affected by the tax, such as supermarkets and soda companies. University of Illinois researchers reached similar conclusions: Philadelphia employment counts were not lower than a comparison group two and a half years after

the tax.2

The tax has also improved residents' health. We found the tax was associated with a 35% reduction in taxed beverage sales at major chain food retailers in Philadelphia when compared to similar retailers in Baltimore.^{3,4} That drop persisted for two years, even after accounting for some people shopping outside of the city. These beverages, such as soda, are linked with type 2 diabetes, obesity, and tooth decay.

We also published a study showing that the tax reduced soda intake among adolescents.⁵ In another study, we used data from electronic dental records and found that the tax was associated with a 22% reduction in cavities among adults on Medicaid and 30% among children on Medicaid.⁶ Similarly, we observed that the tax was associated with reductions in obesity among adults⁷ though we did not observe effects among children. Studies from seven other U.S. cities with sweetened beverage taxes also find similar improvements in health, including reductions in obesity and gestational diabetes.^{8,9}

Discussions of repeal of the tax are behind the times. Our tax continues to generate revenue for higher-quality education, local employment, and more inviting community spaces. It has done this all while reducing intake of drinks that make us sick. It would be a grave mistake to support its repeal.

References

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