

Public health lessons from the French 2012 soda tax and insights on the modifications enacted in 2018

Yann Le Bodo, Fabrice Etilé, Chantal Julia, Marine Friant-Perrot, Eric Breton, Sébastien Lecocq, Christine Boizot-Szantai, Céline Bergeran, Françoise Jabot

▶ To cite this version:

Yann Le Bodo, Fabrice Etilé, Chantal Julia, Marine Friant-Perrot, Eric Breton, et al.. Public health lessons from the French 2012 soda tax and insights on the modifications enacted in 2018. Health Policy, 2022, 126 (7), pp.585-591. 10.1016/j.healthpol.2022.04.012. halshs-03673111

HAL Id: halshs-03673111 https://shs.hal.science/halshs-03673111

Submitted on 16 Jun 2022

HAL is a multi-disciplinary open access archive for the deposit and dissemination of scientific research documents, whether they are published or not. The documents may come from teaching and research institutions in France or abroad, or from public or private research centers. L'archive ouverte pluridisciplinaire **HAL**, est destinée au dépôt et à la diffusion de documents scientifiques de niveau recherche, publiés ou non, émanant des établissements d'enseignement et de recherche français ou étrangers, des laboratoires publics ou privés.



FISEVIER

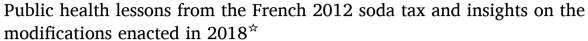
Contents lists available at ScienceDirect

Health policy

journal homepage: www.elsevier.com/locate/healthpol



Health Reform Monitor





- a Univ Rennes, EHESP, CNRS, ARENES UMR 6051, F-35000 Rennes, France
- ^b Paris School of Economics and INRAE, UMR 1393 PiSE, 48 Boulevard Jourdan, F-75014 Paris, France
- ^c University Sorbonne Paris Nord, Hôpitaux Paris-Seine-Saint-Denis (AP-HP), Nutritional Epidemiology Research Team (EREN), UMR U1153 Inserm/U1125 Inra/Cnam/Univ Paris 13, Centre de Recherche en Epidémiologie et Statistiques Université de Paris (CRESS), SMBH Paris 13, 74 rue Marcel Cachin, F-93017 Bobigny, France
- ^d Nantes Université, CNRS, Droit et changement social, F-44000 Nantes, France
- e Univ Rennes, EHESP, CNRS, Inserm, Arènes UMR 6051, RSMS U 1309, F-35000 Rennes, France
- f Université Paris-Saclay, INRAE, AgroParisTech, PSAE, F-78850 Thiverval-Grignon, France
- g EHESP, F-35000 Rennes, France

ARTICLE INFO

Keywords: Sugar-sweetened beverages Nutrition Tax Policy Public health Prevention

ABSTRACT

Sébastien Lecocq^f, Christine Boizot-Szantai^f, Céline Bergeran^g, Françoise Jabot^a

In 2016, the World Health Organization officially recommended sugar-sweetened beverage (SSB) taxation as a strategy to reduce purchases, stimulate product reformulation and generate revenues for health-related programmes. Four years before, France had been one of the first countries to tax SSBs. However, the design of this tax was not considered optimal: its rate was flat, low, identical for SSBs and artificially-sweetened drinks containing no added sugars, and its initial public health justification was set aside in favour of budgetary concerns. In 2018, a new taxation scheme was enacted. Integrated in the Social Security Finance Bill, the tax on SSBs is now linearly indexed to the quantity of added sugars in the drink. In this article, we summarize the lessons learnt from the 2012 soda tax and offer insights on the potential public health benefits of the new tax enacted in 2018. A multidimensional framework aimed at gathering evidence about SSB taxation for public health drove our rational so that we address: (1) the soda tax policy-change process; (2) its impact on price and purchases; (3) the consumer receptiveness to the tax and; (4) its legal framework. We also discuss the potential application of the tax to other foods/nutrients.

1. Introduction

In a context of increasing life expectancy and changing lifestyles, non-communicable diseases have become the leading causes of mortality and disability [1]. International public health authorities have repeatedly stressed the urgency of investing more in prevention given the nature of such diseases [2]. Food environments and dietary behaviours are one of the main drivers of non-communicable diseases [3].

Consumption of sugar-sweetened beverages (SSBs) is of particular concern and has been associated with a number of health problems such as tooth decay, weight gain, type 2 diabetes, cardiovascular diseases and cancer [4–8]. While the WHO recommends limiting daily energy intake from free sugars to less than 10% with additional health benefits to reducing it further below 5% [9], a daily consumption of one to two SSB portions may be enough to exceed this limit [10].

In order to promote a healthy diet, better results are achieved when

https://doi.org/10.1016/j.healthpol.2022.04.012

Received 2 March 2021; Received in revised form 25 August 2021; Accepted 25 April 2022 Available online 27 April 2022

0168-8510/© 2022 The Authors. Published by Elsevier B.V. This is an open access article under the CC BY license (http://creativecommons.org/licenses/by/4.0/).



^{*} This article has been made Open Access through funding by the European Observatory on Health Systems and Policies as part of its Health Systems and Policy Monitor (www.hspm.org), an innovative platform that provides a detailed description of health systems and provides up to date information on reforms and changes that are particularly policy relevant.

^{*} Corresponding author at: EHESP School of Public Health, Département des Sciences humaines et sociales (SHS), Bâtiment Germaine Tillion, Bureau 311, 15, avenue du Professeur-Léon-Bernard, CS 74312, F-35043 Rennes Cedex.

E-mail addresses: yann.lebodo@ehesp.fr (Y. Le Bodo), fabrice.etile@psemail.eu (F. Etilé), c.julia@eren.smbh.univ-paris13.fr (C. Julia), Marine.Friant-Perrot@univ-nantes.fr (M. Friant-Perrot), eric.breton@ehesp.fr (E. Breton), sebastien.lecocq@inrae.fr (S. Lecocq), christine.boizot-szantai@inrae.fr (C. Boizot-Szantai), celine.bergeran@ehesp.fr (C. Bergeran), francoise.jabot@ehesp.fr (F. Jabot).

combining interventions targeting individual behaviour with actions modifying consumer environments [11]. France has been quite proactive in this regard. The institutionalisation of the National programme for nutrition and health (PNNS), the ban on food and beverages vending machines in schools, compulsory health messages on food advertisements, improved food labelling through the Nutri-Score... are some of the "flagships" of nutrition policies implemented over the last 20 years [12,13]. In 2012, France also became one of the first countries to tax sodas. Since then, and despite the controversies surrounding the appropriateness of soda taxes for public health, this measure has come into force in more than fifty national, state or municipal jurisdictions [14] (see Fig. 1).

SSB taxation is now officially recommended by the WHO as a way of reducing purchases and generating revenue for health-related programmes [15]. Based on the literature and expert consultations, the WHO suggests that volumetric excise taxes, set according to the volume of a drink or the amount of an ingredient, are likely to be more effective than *ad valorem* taxes, in particular to avoid a shift to cheaper and eventually less healthy drinks [16]. Beverages generally targeted are characterised by the presence of added sugars. A minimum rate of 20% is recommended to influence consumer's behaviour and, when possible, variable rates according to the sugar content of the drink are likely to encourage manufacturers to modify their recipes [15,16].

In this regard, the soda tax enacted in France in 2012 was not optimal (see Table 1): its rate was flat and low and its scope was not based solely on a nutritional criterion (it also covered artificially-sweetened drinks). Moreover, its initial public health justification was set aside to respond to some budget-related considerations and a significant share of its proceeds was directed to the general budget [14]. However, the taxation scheme enacted in 2018 is better aligned with its public health objective (see table 1). The tax, fully part of the Social Security Finance Bill, is now linearly indexed to the quantity of added sugars in the beverage [17].

In this article, we summarize the lessons learnt from the first soda tax implemented in France and offer insights on the potential public health benefits of the new tax as well as the questions it raises. Our rational follows the interdisciplinary perspective of the SODA-TAX research consortium (2019-2023) on: (1) the policy process leading to the soda tax; (2) its impact on price and purchases; (3) the consumer receptiveness to the tax; (4) its legal framework. This outlook is driven by a

multidimensional approach aimed at gathering evidence about SSB taxation for public health [10], previous works of the authors and an updated review of the French and international literatures on the subject.

2. Socio-political processes underpinning the elaboration of soda taxation in France

An analysis of the policy process leading to the adoption of the 2012 soda tax highlighted a combination of contributing factors [14]. First, the on-going economic crisis forced the government to find new revenues without generating undue impact on consumers and economic operators. Second, the soft drinks industry, a prosperous industrial sector not perceived to be particularly anchored in the French territory (unlike e.g. the wine sector), may have been seen as a relevant target (among others), especially since soda taxation had already been contemplated (but to no avail) by past administrations. Third, the tax was championed by the Minister of budget who believed in the efficacy of food taxation to fight obesity. Fourth, since a majority of MPs primarily saw the soda tax as a revenue-generating instrument, the tax was extended to artificially-sweetened drinks and its proceeds partly earmarked for the farming sector to help producers facing high labour costs to compete with neighbouring countries.

Similar explanatory factors were reported in other jurisdictions. The congruence of health and budgetary problems also led to the justification of new food taxation e.g. in Denmark or the Pacific Islands [19,20]. *Policy entrepreneurs* [21] such as the French minister of budget were reported elsewhere e.g. in Mexico or Philadelphia [22,23], and so was the importance of a broad political consensus [18]. Over the last decade, results of the first real-world evaluations of soda taxes (e.g. in Mexico) helped in transitioning this policy instrument from a controversial and rarely adopted one to a WHO recommended strategy [16]. Today the challenge is no longer simply to get a soda tax passed, but to design it in such a way that it significantly impacts consumers' habits while nudging the industry towards reformulated recipes for their sodas, e.g. through tiered tax mechanisms like those in the United Kingdom or Portugal [24, 251].

However, as more countries are likely to adopt a soda tax or improve its design, many questions remain unanswered, such as the role played



Fig. 1. Map of health-related taxes on non-alcoholic beverages adopted around the world (end of 2020)*.

^{*} The soft drink taxes in Denmark and Cook County (Illinois, US) are not represented on the map as these taxes were respectively abolished in 2014 and repealed in 2017. **Source**: adapted and updated from [14].

Table 1 characteristics of soda taxes, as recommended internationally vs. enacted in France in 2012 and 2018.

Scope	International recommendations ^a Behavioural effects most convincing for taxes on drinks with added sugars Relevance of including milk-based drinks, artificially-sweetened non-caloric drinks and 100% pure juices still uncertain and left for discussion	French soda tax – 2012 ^b		French soda tax -2018 ^c	
		Beverages containing added sugars (carbonated beverages, fruit juices, fruit drinks and flavoured milks)	Artificially- sweetened beverages containing no added sugars	Beverages containing added sugars (carbonated beverages, fruit juices, fruit drinks and flavoured milks)	Artificially- sweetened beverages containing no added sugars
Rate	Eq. to a 10-20% price hike for behavioural effects on consumers If possible, rate based on specific nutrients of the product (e.g. on the sugar content for drinks with added sugars)	Flat rate: ϵ 0.07 =>eq. $\approx \epsilon$ 0.03	-,	Based on added sugars content: from 0.03 /litre (if 5-15 g of added sugars / litre) to 0.24 /litre (if 145-155 g of added sugars / litre) => eq. ≈ 0.05 / can of typical cola	Flat rate: $ (0.03/\text{litre} = > \text{eq.} \approx (0.01/\text{can} $ of typical diet cola
Type Revenues earmarked for	Volumetric excise tax Health care systems, the promotion of healthier diets and physical activity, the reduction of inequities (pre-affectation recommended)	Volumetric exc Social security budget * (50%), general budget (50%)	ise tax General budget	Volumetric excise tax Social security budget *	

a adapted from WHO and WCRF [16,18].

by policy learning and transnational policy transfer processes [26,27]. In France, the elaboration of the new tax voted in 2017 recalls some of the circumstances of 2011, such as the legislative context (Social Security Finance Bill, voted on a yearly basis), the intervention of a policy entrepreneur (here the Social Affairs Committee of the National Assembly), a supportive government, and a much institution-centred public debate [28]. However, this new tax stands out for its strong policy framing towards youth health (no mention of generating new revenue for the State), its sophisticated design (rate indexed to the added sugar content in the drink) and the targeting of industry practices (rather than consumer behaviour) [29]. Indeed, an exploratory review of institutional documents since 2012 indicates that food taxes have continued to attract parliamentary interest, with the explicit aim of promoting public health (see, for example, reports submitted to the Senate in 2014 [30] and to the National Assembly in 2016 [31]). At the same time, the financial and health burden related to obesity and unhealthy eating in France has been highlighted by different institutions [30,32,33]. In 2016, the revised sugar guidelines published by the French National Agency for Food Safety also underlined the importance of limiting sugar intake based on scientific evidence associating sugar consumption (especially SSBs) with weight gain and its comorbidities [34]. Following the 2017 presidential election, the new general reporter of the Social Affairs Committee at the National Assembly (followed by the government and most political groups) mentioned these issues as a motivation for changing the soda tax. Several stakeholders also referred to WHO guidelines on the subject and to similar soda taxes adopted around the world to encourage product reformulation (e.g. in the UK) [35-37]. The beverage industry also appears to have been consulted on the issue and has shown some degree of openness to this change [35,38]. Further examination of this multi-year policy process in France would provide a valuable case study from which other jurisdictions could draw lessons to improve the implementation of this policy. It may also contribute to bolster the capacity of stakeholders in countering actions aimed to block its adoption or neutralize its impact on population health.

3. Impact of the French soda tax on prices, consumption and consumers' welfare

A large body of literature has documented the impacts of soft-drink taxation on prices and purchase behaviours. Ex-post evaluation studies find tax transmission rates at prices ranging from less than 50% for SSB taxes implemented in local US jurisdictions to more than 100% for taxes implemented in Chile, Denmark, Mexico or Portugal [39–48]. This

variability is explained by differences in tax design and market structures, and by heterogeneity in data, price measurement, and econometric designs. Such methodological differences explain that the three studies on the 2012 soda tax in France yielded transmission rates ranging from 40% to more than 100% [49–51].

Ex-post evaluations also show generally significant but small impacts on the consumption of beverages targeted by the tax [42,52–57]. For France, the 2012 tax reduced the consumption of SSBs by less than 5% on average [49,58]. Few ex-post studies have analysed in details the substitution behaviours that limit the effects of the tax on sugar intakes and thus its benefits for public health [57]. Consumer substitutions between product range, beverage categories and stores also complicate the definition of a valid control group for the quasi-experimental evaluation of national-level taxes. Some simulation studies show the importance of accounting for consumer substitutions towards untaxed sugary beverages such as pure fruit juices in France [58,59], or alcohols and sugary snacks in the UK [60,61].

On the supply side, companies, bottlers and distributors are strategically adapting to soda taxes. Work on British, Chilean and Portuguese cases has shown that a multi-rate tax indexed to the sugar content of beverages can encourage a reduction in the sugar content of new products, and the reformulation of certain varieties [62]. Nevertheless, the resulting impact on total sugar intake has yet to be evaluated in detail [63,64]. Reformulation efforts are likely to vary across firms depending on constraints of production cost and consumer attachment to beverage taste, but also on their brand portfolios, their competitive positions and their relations with distributors and bottlers [65]. Moreover, in the absence of consensus on the long-term effects of artificial sweeteners, the interest of reformulations replacing added sugars by artificial sugars remains debated.

Opponents of soft-drink taxes point out their regressivity, since they tend to generate higher welfare losses for low-income households. However, these households will also receive more of the corrective benefits of the tax if they consume more SSBs and if high-SSB consumers are relatively price-elastic [66,67]. The case of the French 2012 soda tax shows that the decline in consumption has been twice as large among low-income households as among high-income ones [58]. Income-related variations in welfare losses were small and were partly explained by residential selection, as modest households are more likely to be located in less competitive markets with higher pass-through rates [51]. In addition, these redistributive effects can be offset by transfers of tax revenues through, for instance, the funding of targeted health and prevention programmes.

b adapted from [14].

c adapted from [17].

^{*} including public financing of health care and services.

Y. Le Bodo et al. Health policy 126 (2022) 585-591

As mentioned above, the 2018 redesign of the soda tax was thought out with the aim of encouraging companies to reduce the sugar content of their products. Recent analyses of the Soft Drink Industry Levy in the UK, a three-tiered tax, show that the 2016 announcement of its implementation in 2018 has prompted producers to reformulate their products, and is ultimately associated with lower sugar consumption from soft drinks [62,68,69]. However, unlike the three-tiered UK tax, the French one has sixteen tiers. This may either encourage gradual reformulations gently modifying consumer tastes or inhibit any effort by firms in the absence of clear target thresholds. When the 2018 reform was implemented, the business medias highlighted the heterogeneity of producers' strategies. Some producers had already started to focus on reformulations of their existing products, while others were more inclined to develop a portfolio of beverages perceived as 'healthy' (e.g. iced teas). Yet, some firms declared that they preferred to continue betting on the association between sugar and pleasure [70,71]. On the political side, government officials have claimed without substantial empirical evidence that the 2018 reform had a causal impact on the sugar content of products [72]. In this context, it would be worth documenting more completely the effects of the 2018 tax on the nutritional quality of the supply, and more specifically to disentangle the pre-existing trends in reformulation and innovations from the ex-post effect of the reform. It would also be important to identify the effects of these changes in the quality of supply on consumer prices, welfare and purchase behaviour, e.g. by replicating the methodology already used in an evaluation of the 2012 tax [51].

4. Receptiveness of French consumers to soda taxation

While support from independent health organizations [16,18] or even governmental bodies for the introduction of taxation on SSBs has increased over time, the opportunity of adopting such measures largely depends on their perceived acceptance by the general public. Surveys conducted in developed countries suggest that taxation is less accepted than other forms of regulation, such as front-of-pack labelling or marketing restrictions [73,74]. However, public perception and acceptance vary depending on the framing of the proposed taxation, and tend to increase when: 1) taxation of less healthy foods is proposed along with subsidies for healthier foods (e.g. fruits and vegetables), 2) when the revenue from the tax is targeted towards public health policies, or 3) when the taxation system is framed as a way to reduce obesity [73,75,

Also public acceptance and support for SSB taxation varies according to socio-economic status. A survey conducted in France among participants in the NutriNet-Santé cohort study investigated in depth perceptions around SSB taxation in 2012, a year after its implementation. It showed that overall support for the taxation of SSBs was on average at 48.5%, with higher rates of support being found when taxation was associated with a reduction in price of healthier foods or when revenue was stated as designed for the healthcare system (support increasing to 71.5% and 72.7%, respectively) [76]. One of the main determinants of SSB taxation acceptance appeared to be the educational level, with respondents with lower levels of education being less supportive of a taxation and more concerned on the injustice to the poor of such a policy [76].

Since its inception in 2012, awareness and acceptance of SSB taxation in France may have changed over time due to the continuous discussion on food taxation in the media or the framing of the new version of the tax. However, external factors may influence consumers' perceptions, in particular in the light of the current economic crisis. Finally, the interest for taxation of foodstuff having increased in recent years, the calls to include other types of foods, may concern consumers. Therefore, it appears worthwhile to investigate in depth the awareness, acceptance and perception of the soda tax, its changes over time and the potential of including other foods in a similar taxation scheme.

5. Legal framework of soda taxation in France

The adoption of an SSB tax – like any other fiscal measure pursuing public health objectives - must comply with international trade and European Union (EU) law rules [77-79]. If States retain a broad margin of discretion as to how they may tax goods, their freedom is subject to the principle of non-discrimination, which is enshrined in those rules. The law of the World Trade Organization (WTO) requires that the taxes imposed on imported products cannot exceed the taxes imposed on similar domestic products or products in competition [80]. The case law involving alcoholic drinks highlights the legal risks at stake: for example, the WTO Appellate Body decided that the measure that the Philippines had adopted on distilled beverages was discriminatory on the basis that it favoured domestic ingredients (cane sugar, coconut...) over imported ingredients while these ingredients were considered competitive or substitutable [81]. In the absence of common EU rules on the taxation of SSBs, taxes cannot directly or indirectly discriminate against imported products and exceed those applicable to similar domestic goods or goods in competition. Internal taxation must not be protectionist and has to be origin-neutral [82]. It is also necessary to ensure that the taxes directly or indirectly applicable to imported goods are not classified as State aids (e.g. Danish fat tax and meat and dairy

The parliamentary debates that led to the adoption of the French 2012 soda tax specifically mentioned the relationship between economic freedoms and public health imperatives. However, in sharp contrast to what tends to happen in relation to the taxation of alcoholic beverages whose impact on the national wine industry gives rise to tensions [84], the adoption of the soda tax did not lead to a careful scrutiny of the potential discriminatory effects it could have between domestic and imported goods. In this respect, it is likely that food taxation measures based on nutrient profiling would have fewer risks of being discriminatory or protectionist, even though they apply to different food categories. Rather, in 2012, the legislature was more worried about the possibility that its soda tax legislation may be challenged as incompatible with the French Constitution. It is indeed essential to determine what is the real objective and justification of the tax to ensure that its payment is fair. In 2018, the public health objective of the soda tax is very clearly established as the price effect is such as to deter consumers from buying SSBs and therefore incentivise manufacturers to reformulate their products. In this respect, the 2018 soda tax based on sugar content is more clearly oriented toward public health objectives.

However, one of the arguments often put forward in favour of SSB taxes is absent from the French regulatory framework: namely, the objective to compensate for the collective costs resulting from the harmful consumption of free sugars. The specific earmarking of the soda tax revenue for the sickness branch of the Farmers' Social Security Scheme indicates that this new tax rather aims at filling a budget hole than covering the expenses related to the consumption of the SSBs in the general population. Another criticism relates to the complexity of its collection system (which combines several taxes on beverages) and the fact that its calculation relies exclusively on the taxpayer (here, the manufacturer or importer). A legal examination of these potential shortcomings would help better understand implementation challenges related to health-related food taxes.

6. Conclusions

This overview of the literature related to the French soda taxes highlights the interdependence of political, economic, health and legal issues in the making of this instrument (see table 2). On the one hand, the policy process leading to the adoption of the tax in 2012 was based on a weak public health rational and tax design, and generated modest effects on SSB consumption. On the other hand, the tax was ground breaking as it offered an opportunity to measure its impact on

Table 2 summary of lessons drawn from the 2012 soda tax and insights on the modifications enacted in 2018

French soda tax - lessons from 2012

- The tax was primarily designed and adopted as a revenue-generating instrument in a context of public deficit rather than as a public health measure.
- The legislature made sure that the soda tax would not be challenged as incompatible with the Constitution but its rate was flat, low and identical for SSBs and artificially-sweetened drinks containing no added sugars.
- The soda tax transmission rates onto prices ranged from 40% to more than 100% depending on the studies. The tax reduced the consumption of SSBs by less than 5% on average, with a decline in consumption twice as large among low-income households as among high-income ones.
- 48.5% of the population globally supported the measure one year after its implementation, with higher rates of support when taxation was associated with a reduction in price of healthier foods or when its proceeds were stated as earmarked for the healthcare system.

French soda tax - insights from 2018

- The French public health context as well as international recommendations and experiences were mentioned as a motivation for changing the soda tax: it was primarily designed to make manufacturers reduce the sugar content in beverages and to promote youth health
- Taxes based on nutrient profiling are less likely to be deemed discriminatory or protectionist: the new soda tax, linearly indexed to the quantity of added sugars in the drink, is more clearly oriented toward a public health objective.
- In 2018, the medias highlighted the heterogeneity of producers' strategies: some had already started reformulations; others were more inclined to develop a portfolio of 'healthy' beverages; others declared that they preferred to continue betting on the association between sugar and pleasure.
- The acceptance of the soda tax may have changed over time due to the continuous discussion on food taxation or the framing of the new tax; recent external factors (e.g. economic crisis) may also influence consumers' perceptions.

consumption and its performance in terms of equity and social acceptability. In addition, and similarly to other European countries, its legal viability was not called into question. From there, an exploration of the policy process having led to the modification of the soda tax in 2018 suggests a progressive political turn to make it an explicit public health measure aimed at fostering a reduction in the sugar content of SSBs by the industry. Among other factors, this change builds on French and international evidence and guidelines about sugar consumption as well as on tax designs experimented in other countries. Despite preliminary positive effects detected on the French SSB market, the impact of the new tax on consumer behaviours and industry practices remains to be precisely evaluated. Such analysis could shed light on the relevance of the tax, contribute to the monitoring of its effects and eventually suggest adjustments, as the evaluation of the French soda tax is actually part of the 56 measures included in the fourth National programme for nutrition and health (PNNS 2019-2023).

As more and more soda taxes are being adopted around the world and their design is being refined in several jurisdictions [85], assessing under what conditions the soda tax could be extended to other foods/nutrients also appears necessary. Recently in France, parliamentary initiatives have proposed to extend the "soda tax model" to other foods based on sanitary, social and ecological considerations, and to earmark the tax proceeds for favouring access to healthier foods, e.g. fruits and vegetables [86-88]. Such proposals still face resistance, partially due to concerns regarding their feasibility and acceptability [89]. As suggested by the WHO [16], a nutrient profile model for designing and implementing fiscal policies may help overcome this challenge. In France, several institutions have suggested to work on this option building on the national Nutri-Score labelling system displayed by manufacturers on their products on a voluntary basis [33,86,90]. Nevertheless, an extension of the tax to other foods/nutrients would necessarily have to take into account the difficulties to collect the tax, the litigation risks as well as concerns for their acceptability. Indeed, a few years after the first health-related food taxes, in a context economically tense, marked by unforeseen sanitary threats (e.g. COVID-19) and raising ecological

concerns (e.g. climate change), it would be worth clarifying whether and under what conditions behavioural taxation remains an instrument gaining traction. Such a survey would provide important insights into the determinants of soda taxation acceptance and the potential for the inclusion of other foodstuff in future nutrition policies in France and elsewhere, with a specific focus on more vulnerable populations.

Declarations of Competing Interest

None.

Acknowledgements

The Soda-Tax project is co-funded by the French League against cancer (Convention n° RI/Fj/02) through the 2018 General Grant Cycle of the prevention and health promotion section of the Institute for Public Health Research (IReSP) (LI-JABOT-AAP18-PREV-006). The sponsors had no role in the study design, data collection, analysis and interpretation, manuscript writing, revision or approval.

References

- [1] Vos T, Lim SS, Abbafati C, Abbas KM, Abbasi M, Abbasifard M, et al. Global burden of 369 diseases and injuries in 204 countries and territories, 1990–2019: a systematic analysis for the Global Burden of Disease Study 2019. Lancet North Am Ed 2020;396:1204–22. https://doi.org/10.1016/S0140-6736(20)30925-9.
- [2] World Health Organization (WHO). Global status report on noncommunicable diseases 2014: attaining the nine global noncommunicable diseases targets; a shared responsibility. Geneva: World Health Organization; 2014.
- [3] Forouzanfar MH, Afshin A, Alexander LT, Anderson HR, Bhutta ZA, Biryukov S, et al. Global, regional, and national comparative risk assessment of 79 behavioural, environmental and occupational, and metabolic risks or clusters of risks, 1990–2015: a systematic analysis for the Global Burden of Disease Study 2015. Lancet North Am Ed 2016;388:1659–724. https://doi.org/10.1016/S0140-6736 (16)31679-8.
- [4] Debras C, Chazelas E, Srour B, Kesse-Guyot E, Julia C, Zelek L, et al. Total and added sugar intakes, sugar types, and cancer risk: results from the prospective NutriNet-Santé cohort. Am J Clin Nutr 2020;112:1267–79. https://doi.org/ 10.1093/ajcn/ngaa246.
- [5] Imamura F, O'Connor L, Ye Z, Mursu J, Hayashino Y, Bhupathiraju SN, et al. Consumption of sugar sweetened beverages, artificially sweetened beverages, and fruit juice and incidence of type 2 diabetes: systematic review, meta-analysis, and estimation of population attributable fraction. BMJ 2015;351:h3576.
- [6] Luger M, Lafontan M, Bes-Rastrollo M, Winzer E, Yumuk V, Farpour-Lambert N. Sugar-sweetened beverages and weight gain in children and adults: a systematic review from 2013 to 2015 and a comparison with previous studies. Obes Facts 2017;10:674–93. https://doi.org/10.1159/000484566.
- [7] Malik VS, Hu FB. Sugar-sweetened beverages and cardiometabolic health: an update of the evidence. Nutrients 2019;11. https://doi.org/10.3390/nu11081840.
- [8] Valenzuela MJ, Waterhouse B, Aggarwal VR, Bloor K, Doran T. Effect of sugarsweetened beverages on oral health: a systematic review and meta-analysis. Eur J Public Health 2020. https://doi.org/10.1093/eurpub/ckaa147.
- [9] World Health Organization (WHO). Guideline: sugars intake for adults and children. Geneva, Switzerland: 2015.
- [10] Le Bodo Y, Paquette MC, De Wals P. Taxing soda for public health: a Canadian Perspective. Berlin, Heidelberg, New York, NY: Springer; 2016.
- [11] Mozaffarian D, Angell SY, Lang T, Rivera JA. Role of government policy in nutrition—barriers to and opportunities for healthier eating. BMJ 2018:k2426. https://doi.org/10.1136/bmj.k2426.
- [12] Hercberg S, Chat-Yung S, Chauliac M. The French national nutrition and health program: 2001–2006–2010. Int J Public Health 2008;53:68–77. https://doi.org/ 10.1007/s00038-008-7016-2.
- [13] Julia C, Charpak Y, Rusch E, Lecomte F, Lombrail P, Hercberg S. Promoting public health in nutrition: Nutri-Score and the tug of war between public health and the food industry. Eur J Public Health 2018;28:396–7. https://doi.org/10.1093/ eurpub/cky037.
- [14] Le Bodo Y, Etilé F, Gagnon F, De Wals P. Conditions influencing the adoption of a soda tax for public health: analysis of the French case (2005–2012). Food Policy 2019:88:101765. https://doi.org/10.1016/j.foodpol.2019.101765.
- [15] World Health Organization (WHO). Taxes on sugary drinks: Why do it? 2016.
- [16] World Health Organization (WHO). Fiscal policies for diet and prevention of noncommunicable diseases: technical meeting report, 5-6 May 2015, Geneva, Switzerland. 2016.
- [17] Ministère de l'action et des comptes publics, Direction de l'information légale et administrative. Contributions sur les boissons et préparations liquides pour boissons sucrées et édulcorées. Contributions indirectes. 2018. https://www.servi ce-public.fr/professionnels-entreprises/vosdroits/F32101 (accessed November 30, 2020).

Y. Le Bodo et al. Health policy 126 (2022) 585-591

- [18] World Cancer Research Fund International. Lessons on implementing a robust sugar sweetened beverage tax 2018. https://www.wcrf.org/int/policy/our-publi cations/lessons-implementing-sugar-sweetened-beverage-tax (accessed December 16, 2020).
- [19] Thow AM, Snowdon W, Schultz JT, Leeder S, Vivili P, Swinburn BA. The role of policy in improving diets: experiences from the Pacific Obesity Prevention in Communities food policy project. Obes Rev 2011;12:68–74. https://doi.org/ 10.1111/j.1467-789X.2011.00910.x.
- [20] Vallgårda S, Holm L, Jensen JD. The Danish tax on saturated fat: why it did not survive. Eur J Clin Nutr 2015;69:223–6. https://doi.org/10.1038/ejcn.2014.224.
- [21] Kingdon JW. Agendas, alternatives, and public policies. Updated 2nd ed. Boston: Longman; 2011.
- [22] Purtle J, Langellier B, Lê-Scherban F. A Case Study of the Philadelphia Sugar-Sweetened Beverage Tax Policymaking Process: Implications for Policy Development and Advocacy. J Public Health Manag Pract 2017. https://doi.org/ 10.1097/PHH.0000000000000563.
- [23] James E, Lajous M, Reich MR. The Politics of Taxes for Health: An Analysis of the Passage of the Sugar-Sweetened Beverage Tax in Mexico. Health Syst Reform 2020; 6:e1669122. https://doi.org/10.1080/23288604.2019.1669122.
- [24] Roache SA, Gostin LO. The untapped power of soda taxes: incentivizing consumers, generating revenue, and altering corporate behavior. Int J Health Policy Manag 2017;6:489–93. https://doi.org/10.15171/ijhpm.2017.69.
- [25] Hagenaars LL, Jeurissen PP, Klazinga NS. Sugar-sweetened beverage taxation in 2017: a commentary on the reasons behind their quick spread in the EU compared with the USA. Public Health Nutr 2019;22:186–9. https://doi.org/10.1017/ \$1368980018002008
- [26] Jenkins-Smith H, Nohrstedt D, Weible CM, Ingold K. Advocacy coalition framework: an overview of the research program. In: Weible CM, Sabatier PA, editors. Theories of the policy process. 4th Ed. New York NY: Westview Press; 2018.
- [27] Clavier C. Les causes locales de la convergence. La réception des transferts transnationnaux en santé publique. Gouvernement et action publique 2013;2: 395-413
- [28] Commission des affaires sociales de l'Assemblée Nationale. Compte rendu de réunion n° 4, Session ordinaire de 2017-2018 2017.
- [29] Nedelec G. La nouvelle mouture de la taxe soda votée. Les Échos; 2017.
- [30] Daudigny Y, Deroche C. Rapport d'information fait au nom de la mission d'évaluation et de contrôle de la sécurité sociale de la commission des affaires sociales sur la fiscalité comportementale. Sénat 2014.
- [31] Louwagie V, Hammadi R. Rapport d'information déposé en application de l'article 145 du règlement par la Commission des Finances, de l'Économie générale et du contrôle budgétaire, en conclusion des travaux d'une mission d'information sur la taxation des produits agroalimentaires. Assemblée Nationale; 2016.
- [32] Caby D. Obésité: quelles conséquences pour l'économie et comment les limiter? Ministère de l'Economie et des Finances: 2016.
- [33] Cour des comptes. Prévention et prise en charge obésité. Communication à la Commission des affaires sociales de l'Assemblée nationale: 2019.
- [34] Agence nationale de sécurité sanitaire de l'alimentation, de l'environnement et du travail. Actualisation des repères du PNNS: établissement de recommandations d'apport de sucres. ANSES; 2016.
- [35] Assemblée nationale. Session ordinaire de 2017-2018. Compte rendu intégral. Première séance du mardi 28 novembre 2017. Projet de loi de financement de la Sécurité sociale pour 2018: 2017.
- [36] Commission des affaires sociales de l'Assemblée Nationale. Compte rendu de réunion n° 6 - Suite de l'examen des articles du projet de loi de financement de la sécurité sociale pour 2018 (n° 269) 2017.
- [37] Véran O. Amendement n° 1210 PLFSS POUR 2018 1ère lecture (1ère assemblée saisie) - n° 269 - au nom de la commission des affaires sociales 2017.
- [38] Bienvault P. La « taxe soda » est-elle vraiment efficace ? 2017. https://www.la-croix.com/France/taxe-soda-est-elle-vraiment-efficace-2017-10-27-1200887737 (accessed July 14, 2021).
- [39] Cuadrado C, Dunstan J, Silva-Illanes N, Mirelman AJ, Nakamura R, Suhrcke M. Effects of a sugar-sweetened beverage tax on prices and affordability of soft drinks in Chile: A time series analysis. Soc Sci Med 2020;245:112708. https://doi.org/ 10.1016/j.socscimed.2019.112708.
- [40] Colchero MA, Salgado JC, Unar-Munguía M, Molina M, Ng S, Rivera-Dommarco JA. Changes in prices after an excise tax to sweetened sugar beverages was implemented in Mexico: evidence from urban areas. PLoS One 2015;10: e0144408. https://doi.org/10.1371/journal.pone.0144408.
- [41] Cawley J, Frisvold D, Jones D, Lensing C. The Pass-Through of a Tax on Sugar-Sweetened Beverages in Boulder, Colorado. Am J Agricult Econ 2021. https://doi. org/10.1111/ajae.12191. ajae.12191.
- [42] Cawley J, Frisvold D, Hill A, Jones D. Oakland's sugar-sweetened beverage tax: Impacts on prices, purchases and consumption by adults and children. Econ Human Biol 2020;37:100865. https://doi.org/10.1016/j.ehb.2020.100865.
- [43] Cawley J, Frisvold DE. The Pass-Through of Taxes on Sugar-Sweetened Beverages to Retail Prices: The Case of Berkeley, California. J Policy Anal Manage 2017;36: 303–26. https://doi.org/10.1002/pam.21960.
- [44] Falbe J, Rojas N, Grummon AH, Madsen KA. Higher retail prices of sugar-sweetened beverages 3 months after implementation of an excise tax in Berkeley, California. Am J Public Health 2015;105:2194–201. https://doi.org/10.2105/AJPH.2015.302881.
- [45] Falbe J, Lee MM, Kaplan S, Rojas NA, Ortega Hinojosa AM, Madsen KA. Higher sugar-sweetened beverage retail prices after excise taxes in Oakland and San Francisco. Am J Public Health 2020;110:1017–23. https://doi.org/10.2105/ AJPH.2020.305602.

[46] Gonçalves J, Pereira dos Santos J. Brown sugar, how come you taste so good? The impact of a soda tax on prices and consumption. Soc Sci Med 2020;264:113332. https://doi.org/10.1016/j.socscimed.2020.113332.

- [47] Leider J, Li Y, Powell LM. Pass-through of the Oakland, California, sugar-sweetened beverage tax in food stores two years post-implementation: A difference-in-differences study. PLoS One 2021;16:e0244884. https://doi.org/10.1371/journal.pone.0244884.
- [48] Schmacker R, Smed S. Do prices and purchases respond similarly to soft drink tax increases and cuts? Econ Human Biol 2020;37:100864. https://doi.org/10.1016/j. ehb.2020.100864.
- [49] Capacci S, Allais O, Bonnet C, Mazzocchi M. The impact of the French soda tax on prices and purchases. An ex post evaluation. PLoS One 2019;14:e0223196. https://doi.org/10.1371/journal.pone.0223196.
- [50] Berardi N, Sevestre P, Tépaut M, Vigneron A. The impact of a 'soda tax' on prices: evidence from French micro data. Null 2016;48:3976–94. https://doi.org/ 10.1080/00036846.2016.1150946.
- [51] Etilé F, Lecocq S, Boizot-Szantai C. Market heterogeneity and the distributional incidence of soft-drink taxes: Evidence from France. Eur Rev Agricult Econ 2021;48 (4):915–39. https://doi.org/10.1093/erae/jbaa025.
- [52] Colchero MA, Molina M, Guerrero-López CM. After mexico implemented a tax, purchases of sugar-sweetened beverages decreased and water increased: difference by place of residence, household composition, and income level. J Nutr 2017;147: 1552–7. https://doi.org/10.3945/jn.117.251892.
- [53] Cawley J, Frisvold D, Jones D. The impact of sugar-sweetened beverage taxes on purchases: Evidence from four city-level taxes in the United States. Health Econ 2020;29:1289–306. https://doi.org/10.1002/hec.4141.
- [54] Cawley J, Frisvold D, Hill A, Jones D. The impact of the Philadelphia beverage tax on purchases and consumption by adults and children. J Health Econ 2019;67: 102225. https://doi.org/10.1016/j.jhealeco.2019.102225.
- [55] Falbe J, Thompson HR, Becker CM, Rojas N, McCulloch CE, Madsen KA. Impact of the Berkeley Excise Tax on Sugar-Sweetened Beverage Consumption. Am J Public Health 2016;106:1865–71. https://doi.org/10.2105/AJPH.2016.303362.
- [56] Nakamura R, Mirelman AJ, Cuadrado C, Silva-Illanes N, Dunstan J, Suhrcke M. Evaluating the 2014 sugar-sweetened beverage tax in Chile: An observational study in urban areas. PLoS Med 2018;15:e1002596. https://doi.org/10.1371/journal. pmed.1002596.
- [57] Pell D, Penney TL, Mytton O, Briggs A, Cummins S, Rayner M, et al. Anticipatory changes in British household purchases of soft drinks associated with the announcement of the Soft Drinks Industry Levy: A controlled interrupted time series analysis. PLoS Med 2020;17:e1003269. https://doi.org/10.1371/journal. pmed.1003269.
- [58] Etilé F, Lecocq S, Boizot-Szantai C. The Incidence of Soft-Drink Taxes on Consumer Prices and Welfare: Evidence from the French "Soda Tax". PSE Working Papers N° 2018- 24 2018 2018.
- [59] Bonnet C, Réquillart V. Tax incidence with strategic firms in the soft drink market. J Public Econ 2013;106:77–88. https://doi.org/10.1016/j.jpubeco.2013.06.010.
- [60] Quirmbach D, Cornelsen L, Jebb SA, Marteau T, Smith R. Effect of increasing the price of sugar-sweetened beverages on alcoholic beverage purchases: an economic analysis of sales data. J Epidemiol Community Health 2018;72:324–30. https:// doi.org/10.1136/jecb-2017-200791
- [61] Dubois P, Griffith R, O'Connell M. How Well Targeted Are Soda Taxes? Am Econ Rev 2020:110:3661–704. https://doi.org/10.1257/aer.20171898.
- [62] Scarborough P, Adhikari V, Harrington RA, Elhussein A, Briggs A, Rayner M, et al. Impact of the announcement and implementation of the UK Soft Drinks Industry Levy on sugar content, price, product size and number of available soft drinks in the UK, 2015-19: A controlled interrupted time series analysis. PLoS Med 2020;17: e1003025. https://doi.org/10.1371/journal.pmed.1003025.
- [63] Scrinis G, Monteiro CA. Ultra-processed foods and the limits of product reformulation. Public Health Nutr 2018;21:247–52. https://doi.org/10.1017/ \$1368080017001302
- [64] Hashem KM, He FJ, MacGregor GA. Effects of product reformulation on sugar intake and health—a systematic review and meta-analysis. Nutr Rev 2019;77: 181–96. https://doi.org/10.1093/nutrit/nuy015.
- [65] Lacy-Nichols J, Scrinis G, Carey R. The evolution of Coca-Cola Australia's soft drink reformulation strategy 2003–2017: a thematic analysis of corporate documents. Food Policy 2020;90:101793. https://doi.org/10.1016/j. foodpol.2019.101793.
- [66] Etilé F, Sharma A. Do high consumers of sugar-sweetened beverages respond differently to price changes? A finite mixture IV-tobit approach. Health Econ 2015; 24:1147–63. https://doi.org/10.1002/hec.3157.
- [67] Allcott H, Lockwood BB, Taubinsky D. Should we tax sugar-sweetened beverages? An overview of theory and evidence. J Econ Perspect 2019;33:202–27. https://doi.org/10.1257/jep.33.3.202.
- [68] Bandy LK, Scarborough P, Harrington RA, Rayner M, Jebb SA. Reductions in sugar sales from soft drinks in the UK from 2015 to 2018. BMC Medicine 2020;18:20. https://doi.org/10.1186/s12916-019-1477-4.
- [69] Hashem KM, He FJ, MacGregor GA. Cross-sectional surveys of the amount of sugar, energy and caffeine in sugar-sweetened drinks marketed and consumed as energy drinks in the UK between 2015 and 2017: monitoring reformulation progress. BMJ Open 2018;7:e018136. https://doi.org/10.1136/bmjopen-2017-018136.
- [70] Chauvel A. Ces nouveautés qui échappent à la taxe soda. LSA; 2018.
- [71] Leboulenger S. Boissons rafraîchissantes sans alcool: la chasse au sucre est ouverte!. LSA; 2018.
- [72] Assemblée nationale. Session ordinaire de 2018-2019. Séance du jeudi 25 octobre 2018. Projet de loi de financement de la sécurité sociale pour 2019. 2018.

- [73] Jürkenbeck K, Zühlsdorf A, Spiller A. Nutrition Policy and Individual Struggle to Eat Healthily: The Question of Public Support. Nutrients 2020;12:516. https://doi. org/10.3390/nu12020516.
- [74] Petrescu DC, Hollands GJ, Couturier D-L, Ng Y-L, Marteau TM. Public Acceptability in the UK and USA of Nudging to Reduce Obesity: The Example of Reducing Sugar-Sweetened Beverages Consumption. PLoS One 2016;11:e0155995. https://doi.org/ 10.1371/journal.pone.0155995.
- [75] Moretto N, Kendall E, Whitty J, Byrnes J, Hills A, Gordon L, et al. Yes, the government should tax soft drinks: findings from a citizens' jury in Australia. JJERPH 2014;11:2456–71. https://doi.org/10.3390/ijerph110302456.
- [76] Julia C, Méjean C, Vicari F, Péneau S, Hercberg S. Public perception and characteristics related to acceptance of the sugar-sweetened beverage taxation launched in France in 2012. Public Health Nutr 2015;18:2679–88. https://doi.org/ 10.1017/S1368980014003231.
- [77] Garde A. EU law and obesity prevention. Alphen Aan Den Rijn: Kluwer Law Internat; 2010 [u.a.].
- [78] McGrady B. Trade and public health: the WTO, tobacco, alcohol, and diet. Cambridge: Cambridge Univ. Press; 2011.
- [79] Sassi F, Belloni A, Capobianco C, Alemanno A. Taxation and economic incentives. In: Alemanno A, Garde A, editors. Regulating Lifestyle Risks. Cambridge: Cambridge University Press; 2014. p. 94–119. https://doi.org/10.1017/ CB09781107478114.008.
- [80] GATT, Article III.2. n.d.
- [81] Philippines Taxes on distilled spirits AB-2011-6 Reports of the Appellate Body, 21/12/2011, WT/DS396/AB/R; WT/DS403/AB/R. n.d.

- [82] Article 110 TFEU. Example of goods in competition: CJEU, 8 April 2008, Commission of the European Communities v Kingdom of Sweden (C-167/05). n.d.
- [83] Bødker M, Pisinger C, Toft U, Jørgensen T. The rise and fall of the world's first fat tax. Health Policy 2015;119:737–42. https://doi.org/10.1016/j. healthpol.2015.03.003.
- [84] Touraine M. La place du lobbying dans l'élaboration et l'évolution de la loi, in 1991-2021: les 30 ans de la loi dite « Evin » (Loi n°91-32 du 10 janvier 1991 relative à la lutte contre le tabagisme et l'alcoolisme). J de Droit de La Santé et de l'Assurance Maladie 2021:12-4.
- [85] Popkin BM, Ng SW. Sugar-sweetened beverage taxes: Lessons to date and the future of taxation. PLoS Med 2021;18:e1003412. https://doi.org/10.1371/journal. pmed.1003412.
- [86] Cartron F, Fichet JL. Vers une alimentation durable: Un enjeu sanitaire, social, territorial et environnemental majeur pour la France. Senat 2020.
- [87] Racapé A. La députée de Côte-d'Or Yolaine de Courson veut faire valoir notre droit à bien manger. FranceBleu; 2021. https://www.francebleu.fr/infos/environne ment/la-deputee-de-cote-d-or-yolaine-de-courson-veut-faire-valoir-notre-droit-abien-manger-1614151962 (accessed July 14, 2021).
- [88] Vaillant G. Lobbying, opposition d'Agnès Buzyn... Comment la taxe visant le jambon aux nitrites a été retoquée. Le Journal Du Dimanche; 2019. https://www.le jdd.fr/Politique/lobbying-opposition-dagnes-buzyn-comment-la-taxe-visant-le-jam bon-aux-nitrites-a-ete-retoquee-3927548 (accessed July 14, 2021).
- [89] Assemblée nationale. Compte rendu intégral de la première séance du jeudi 24 octobre 2019. Projet de loi de financement de la sécurité sociale pour 2020. 2019.
- [90] Haut Conseil de la Santé Publique (HCSP). Pour une Politique nationale nutrition santé en France, PNNS 2017-2021. 2017.