



# San Francisco Department of Public Health

Dr. Grant Colfax  
Director of Health

City and County of San Francisco  
London N. Breed  
Mayor

## Sugary Drinks Distributor Tax Advisory Committee

### MINUTES

September 15, 2021 - 5:00 pm

Join Online Via Zoom

<https://sfdph.zoom.us/j/96022088914?pwd=b21rRjF0aU1GLzl0VknKNVdkZnlXZz09>

Meeting ID: 960 2208 8914 Passcode: 680056

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\* Please note that public comment will be held after every agenda item. If a member of the public would like to comment on a topic that is *not* on the agenda, they may do so during general public comment at the start of the meeting. Please see the *Notes* section of this document for additional information about public comment.

\*\* Times provided for agenda items are estimates

#### Order of Business:

1. Call to Order / Roll Call – 5 minutes - Meeting called or Order at: 5:10pm

Present: Larry McClendon, Linda Barnard, Saeeda Hafiz, Abby Cabrera, Marna Armstead, Maureen Guerrero, Jennifer Lebarre, Christina Goette., Angelica Cabande, Meghan Wallace, Alyssa Daulat, Ruby Turalba, Tony Kelly, Prasanthi Patel, Kiana Keshavarz, Anthony Khalil, Lea Troeh, Veronica Shepard, Diana Lau, Irene Hilton, Mylene (Magic ToothBus)

- a. Approval of Excused Absences [Action] excused: Vanessa Bohm and Dianna Cavagnaro

Saeeda motions to approve excused absences. Linda seconded excused absences. Excused absences are approved.

2. Approval of Minutes for Previous (July) Meeting [Action] – 3 minutes

Page 6, section 8 change to 2021 – 2022 school year; approved on budget for 2021 – 2022; offering free meal this school year.

Larry motions to approve minutes with edits. Maureen seconds. Motion is approved.

3. Review and Consideration of Regular Agenda [Action] – 2 minutes

Linda motions to approve agenda. Larry seconds. Motion is approved.

4. General Public Comment – 10 minutes

No Public Comment

5. DPH Staff Report [Discussion and Possible Action] 5 minutes
  - a. SDDTAC Legislation Amendments



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Staff reminds SDDTAC that given the information received regarding making changes to the ordinance would need to go through a vote from the public and it would need to be on a ballot. SDDTAC are asked to go back to their constituencies to share what the SDDTAC has learned about the process and whether there is interest to going through with that process and what changes does the constituency want to have if they would like to pursue the process to make the changes to the SDDTAC legislation.

Member asked when looking at youth commission group, adding youth seat that means that Kiana, Jennifer, Saeeda to go back to SFUSD and youth commission and asking them to put on the ballot? Staff responded that it would be ideal to find a supervisor to put on the ballot, but it is about the content and recognizing that it is a big process. Additionally, if it is decided to pursue this process, staff would not be able to support with the work, as it should be done exclusively by the SDDTAC. Member noted that it would be the SDDTAC and those impacted would come together to speak with other groups and brought back to a supervisor to sponsor to put on a ballot. Staff responded yes; it would include all changes that were previously discussed with SDDTAC. Member asked this would be brought to the Board of Supervisors, are they able to make changes to the legislation as well? Staff responded yes it would.

Member shared if adding youth seats to SDDTAC would require going to the ballot, but specifically for seats 1-3, is there was an underlying assumption represent underrepresented communities, in the sense that it is clarification of the language for the Board of Supervisors who were making recommendations for the seats and does that require going to the ballot. Staff respond that the city attorney shared that designating seats by ethnic group/race would be a challenge and that it would be difficult to write language that would pass legal muster. The supervisors' aides that staff had spoken to were informed that there had been precedence as to what populations were being represented in those seats, in concept, ensuring that they were aware of it, we thought the supervisors' aides with whom we spoke were aware of that but not sure if that information was communicated with the supervisor, unsure of what happened. Having the various health parity groups reach out to the Board of Supervisors may be helpful so that they are reminded from more than one point of their information seeking.

Member noted that it seemed to be an unwritten language that most knew about but not a problem until this time around. Staff responds that the aides of the Supervisors who reached out to staff, were informed, and spoke in context that seats 1-3 were members of the specific ethnic/racial groups, we are unaware of what was transpired after the discussions. Member shared that if this is a matter of communication rather than substance or change in context of what we have been doing, it may confuse the community, if we need to strike a balance in the future then it may be a matter of communication, questioning the necessity of putting it on the ballot which may open up additional issues. Unfortunate that it happened this way with seats 1-3.

Member shares whether the change be made without adding additional issues that might be brought up, though more than likely probably not.

### 6. SDDT Grantee Presentations – [Discussion and Possible Action] – 35 minutes

- a. South of Market Community Action Network (SOMCAN) - Angelica Cabande, Alyssa Daulat, Ruby Turalba – Kalusugan ng Bayan – Our Health, Our Community

Angelica Cabande, SOMCAN Executive Director introduced Kalusugan ng Bayan "Our Health, Our



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Community” initiative to address chronic disease within the Filipino community. The goal is to increase the Filipino community’s knowledge, attitude, and behavior of chronic disease prevention at all levels of the socio-economic model. Ruby provides data overview of the chronic disease within the Filipino community from national data sets. Public health research within the Filipino community is still limited and this work helps to support the research. She provided an overview of the program objectives. Alyssa provided the outcomes of the program such as 9 community health ambassadors to administer a community needs assessment, online physical activity classes, online health education webinars on health topics and cooking class. For year 3 they intend to conduct policy and environmental strategies with key stakeholders via public hearings and community meetings and dissemination of translated educational materials. Ruby shared that this project includes a partnership of many organizations that serve the Filipino community.

Member asked if any of the activities are bilingual knowing that there are various dialects? Angelica responds that many Filipinos are limited English proficient, and materials are translated and focused on the Tagalog dialect, every video and materials is both in English and Tagalog. Ruby adds that Filipinos are the 3<sup>rd</sup> monolingual community in SF with 50,000 Filipinos in San Francisco. Another member asked what is the make-up of the multigenerational make-up of the program activities? Angelica responded that community ambassadors consisted of high schoolers through seniors.

### b. Bayview Hunter’s Point Advocates – Tony Kelly

Tony Kelly introduces Bayview Hunter’s Point Advocates (BVHPA), is planning the establishment of a community owned co-op grocery store in the Bayview Hunter’s Point neighborhood. District 10 is a food desert and residents suffer from disproportionate burden of chronic disease related to food insecurity. The co-op will fill a critical gap, by providing healthy and affordable food, other services will also be provided. There has been a history of co-ops throughout the years in the neighborhood and following a tradition of co-ops in the neighborhood. BVHPA has been receiving SDDT funds in the 3 year grant in 2019, in addition to \$20K in 2020 to support emergency food distribution due to the COVID pandemic. The SDDT funds are used to fund a large broad effort to build food sovereignty in a neighborhood that has rarely had that. The impact of the SDDT funding has had a deeper and broader research into neighborhood food habits and buying patterns and supply and distribution chains. Additionally providing a platform for several channels of free and affordable food distribution and sales adding farm to table hunger relief. BVHPA brought food from the Wholesale Food Market by providing free food distribution during the pandemic and purchasing PPE from UCSF for distribution at neighborhood corner stores and the community. Direct public health outreach with support from OEWD and partnered with Mother Brown’s kitchen to deliver prepared meals 5 days per week. SDDT is supporting free food distribution to 130 unhoused and insecure households a week. Next month BVHPA is launching an affordable CSA sales program retail boxes to support households for a week, priced at \$29 for produce and discounted for \$19 showing with eligibility. Additionally BVHPA will work with the Food Pharmacy program to provide weekly produce for 12 weeks. All this work has started with the SDDT funding, and the work is necessary to reach food sovereignty in the neighborhood with partners and allies.

Member asked what is the timeline for the co-op? Tony responded that usually co-ops are a long process, average creation process is between 7-10 years, BVHPA believes that they can beat that timeline and will need to also identify a location, possibly within 2-4 years.



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Member asked about services. Tony responded about unhoused services – they have grown from city support and UCSF to do direct outreach to district 10 unhoused RVs, tent encampments, trying to reach hundreds per week. Trying to do what they can.

Member added that HSH has strategically wanted to partner with CBOs who based in certain neighborhoods to be points for folks as they do outreach in vehicles, tents, etc and serve as a pilot program to look at experienced non-profits who have better relationships with the community. BVHPA has taken the lead for supporting that area.

### c. SisterWeb

Veronica introduces Marna to present the work of SisterWeb. SisterWeb provides doula services, workforce development, dismantles racist systems and improves community resilience. SisterWeb's Program Model is the only home visiting/wellness doula model in San Francisco. SisterWeb has 3 Doula programs that serve Latinx, Black/African-American and Pacific Islander communities. These ethnic groups experience the highest morbidity and mortality rates.

The SDDT funding was SisterWeb's first multi-year funding which allowed to support exponential growth.

Doula work is mostly high touch work and due to the COVID pandemic, SisterWeb had to pivot to do the work remotely and the funds allowed the funds to hire independent contractors as employees and doing more one on one work with their clients. Staff are working with clients to do trauma informed work, one on one nutrition counseling. SisterWeb provides new doula training and continuing education and mentorship so that doulas have someone they work with when they are working with their clients. Mentors are midwives and were able to support the doulas with their clients through various situations such as food insecurity, cooking, nutrition education, couch surfing, etc. SisterWeb also does advocacy work to support doulas by dismantling racist systems. SisterWeb partners with many organizations to support their work and gearing up to begin in person services with their clients to do healthy eating and active living activities.

Member asked if Marna can say more about the impact of the intersection between developing a workforce and supporting other moms? Marna responds that Black and Brown doulas have had problems with sustaining their work, typically what is found is that doula work get more private, wider, affluent and expensive and so access within the Black and Brown community doula work is free to those communities from SisterWeb. SisterWeb trains Black and Brown doulas, as SisterWeb creates these workforce opportunities, it is giving pathway into midwifery, nursing, and other areas of reproductive justice, etc. Black and brown people are now considering this type of career path for themselves.

7. Community Check In [Discussion and Possible Action] – No Community Check in Announcements
8. Subcommittee Update [Discussion and Possible Action] – 10 minutes
  - a. Co-Chair Update

Co-chair shares that discussion during the data and evidence subcommittee to reinstate the SDDTAC quarterly updates and identify if there is any member who has time to support staff who are still activated to support COVID efforts. Maureen offered to support a few times and recommended that the Mills College Policy Program has interns and could provide stipends to interns. Member adds the historical context the SDDTAC has not continued its marketing campaign and to inform the



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Board of Supervisors, Mayor, and others of what has been happening with the SDDT. Marna adds that it is a form to inform others to highlight what is happening with the soda tax revenue and that the content is negotiable.

### b. Infrastructure Update

Linda shares that the infrastructure subcommittee discussed the SDDT budget timeline and draft will be shared to review at the subcommittees. Discussions about definitions, training for SDDTAC to understand budget process. Subcommittee will discuss further the letter of support process.

### c. Community Input Update

Maysha shares that the subcommittee welcomed a new co-chair: Kiana. Kiana shared that the subcommittee discussed the process of SDDT CBOs and finding ways to gain more concrete data and their impact. Development with proposed legislation changes. Veronica adds that discussions around SDDT grantees, it would be nice to see how grantees work is connected to Community Health Needs Assessment (CHNA). Subcommittee would like to see how the work is being done and shift the data with the CHNA and see how they both are aligning. Being able to highlight SDDT grantees and tie in how it is impacting healthy eating and active living activities.

- d. Data and Evidence Update - Abby shared that the last meeting was held in August; No quorum for September meeting; August discussions: to revive newsletter and formatting to tell the stories of what is already in evaluation plan; to have presentations from organizations who have pipeline programs. Saeeda adds to review the work plan often to ensure they are in alignment, and it is still relevant and what gaps are there and making sure team is updated to date and on track.

### 9. Committee Member Proposed Future Agenda Items [Discussion and Possible Action] – 5 minutes

- Content and timeline for SDDTAC newsletter (subcommittees to contribute content)
- Review of Draft SDDT Budget Timeline Process
- SFUSD presentation

### 10. Announcements [Discussion and Possible Action] – 5 minutes

Abby – started a UCSF team for the American Heart Association Heart Walk/Bay Area Thursday, 9/24/21 virtual event; reach out to Abby if interested

### 11. Adjournment [Action]

Abby motions to adjourn meeting. Linda seconds. Meeting is adjourned at 6:49pm.

## Notes



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- Briefly responding to statements made or questions posed by members of the public, or
- Requesting staff to report back on a matter at a subsequent meeting, or
- Directing staff to place the item on a future agenda. (Government Code Section 54954.2(a).) 10.

Each action item will hold public comment before a vote is made.

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City Hall – Room 244 1 Dr. Carlton B. Goodlett Place, San Francisco, CA 94102-4683  
415-554-7724 (Opisina); 415-554-7854 (Fax), E-mail: [SOTF@sfgov.org](mailto:SOTF@sfgov.org)

Ang mga kopya ng Sunshine Ordinance ay makukuha sa Clerk ng Sunshine Task Force, sa pampublikong aklatan ng San Francisco at sa website ng Lungsod sa [www.sfgov.org](http://www.sfgov.org). Mga kopya at mga dokumentong na nagpapaliwanag sa Ordinance ay makukuha online sa <http://www.sfbos.org/sunshine> o sa kahilingan sa Commission Secretary, sa address sa itaas o sa numero ng telepono.

### PAG-ACCESS SA WIKA

Ayon sa Language Access Ordinance (Chapter 91 ng San Francisco Administrative Code), maaaring mag-request ng mga



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tagapagsalin sa wikang Tsino, Espanyol, at/o Filipino (Tagalog). Kapag hiniling, ang mga kaganapan ng miting ay maaring isalin sa ibang wika matapos ito ay aprobahan ng komisyon. Maari din magkaroon ng tulong sa ibang wika. Sa mga ganitong uri ng kahilingan, mangyaring tumawag sa Minouche Kandel sa 415-252-3203, o [minouche.kandel@sfgov.org](mailto:minouche.kandel@sfgov.org), sa hindi bababa sa 48 oras bago mag miting. Kung maari, ang mga late na hiling ay posibleng pagbibigyan.

## ACCESS PARA SA MAY KAPANANAN

Ang Konseho tungkol sa Karahasan sa Pamilya (Family Violence Council) ay ginaganap sa room 617 sa 400 McAllister Street sa San Francisco. Ang building ay maaring ma-access ng mga taong gumagamit ng wheelchair at iba pang gamit na tumutulong sa pagkilos .

Ang mga pagpupulong ng Task-Force ng Mayor sa Anti-Trafficking ay ginaganap sa Room 305 sa City Hall, 1 Dr. Carlton B. Goodlett Place sa San Francisco. Ang City Hall ay accessible para sa mga taong gumagamit ng wheelchair at iba pang mga gamit na tumutulong sa pagkilos. Mayroong mga rampa sa mga pasukan sa Grove, Van Ness at McAllister. Ang mga kagamitan sa pagtulong sa pandinig, mga interpreter ng American Sign Language, mga tagapagbasa, mga adyenda na malalaki ang print, at iba pang pangangailangan ay maaring hilingin. Para humingi ng tulong, tawagan si Minouche Kandel (415) 252-3203, o mag email sa [minouche.kandel@sfgov.org](mailto:minouche.kandel@sfgov.org). Kailangan mag-request ng mga pangangailangan sa hindi bababa sa 72 oras bago ng pagpupulong upang matiyak kung maaring ipaglingkod ang inyong kahilingan.

## LOBBYIST ORDINANCE

Ayon sa San Francisco Lobbyist Ordinance [SF Campaign & Governmental Conduct Code 2.100], ang mga indibidwal o mga entity na nag iimpluensiya o sumusubok na mag impluensiya sa mga lokal na pambatasan o administrative na aksyon ay maaring kailangan mag register o mag report ng aktibidad ng lobbying. Para sa karagdagan na impormasyon tungkol sa Lobbyist Ordinance, mangyaring tumawag sa San Francisco Ethics Commission at 25 Van Ness Avenue, Suite 220, San Francisco, CA 94102, (415) 252-3100, FAX (415) 252-3112, website: [sfgov.org/ethics](http://sfgov.org/ethics).

## SDDTAC Recommendations FY21-22 and 22-23

	FY21-22	FY22-23	%	Department
<b>COMMUNITY-BASED GRANTS</b>				
Health education, food security, physical activity	\$3,500,000	\$3,500,000		DPH/CHEP
CBOs working with SFUSD	\$300,000	\$300,000		DPH/CHEP
<b>TOTAL COMMUNITY BASED GRANTS</b>	<b>\$3,800,000</b>	<b>\$3,800,000</b>	<b>40%</b>	
<b>SFUSD</b>				
School Food, Nutrition Ed	\$1,000,000	\$1,000,000		SFUSD via DCYF
Student Led Action	\$500,000	\$500,000		SFUSD via DCYF
College Scholarships in Health Field for Priority Populations		\$150,000		
<b>TOTAL SFUSD</b>	<b>\$1,500,000</b>	<b>\$1,650,000</b>	<b>15.79%</b>	
<b>FOOD ACCESS</b>				
Healthy Food Purchasing Supplement	\$1,200,000	\$1,500,000		DPH/CHEP
Healthy Retail	\$150,000	\$150,000		OEWD



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<b>TOTAL FOOD ACCESS</b>	<b>\$1,350,000</b>	<b>\$1,650,000</b>	<b>14.21%</b>	
<b>ORAL HEALTH</b>				
Community task forces	\$450,000	\$450,000		DPH/MCAH
School-based sealant application	\$350,000	\$350,000		DPH/SF Health Network
School-based education and case management	\$200,000	\$200,000		SFUSD via DCYF
<b>TOTAL ORAL HEALTH</b>	<b>\$1,000,000</b>	<b>\$1,000,000</b>	<b>10.53%</b>	
<b>INFRASTRUCTURE</b>				
<b>TOTAL INFRASTRUCTURE</b>	<b>\$800,000</b>	<b>\$450,000</b>	<b>8.42%</b>	DPH/CHPEP
<b>WATER ACCESS</b>				
Water Access - SFUSD		\$400,000		PUC via RPD/DPW?
Water Access - Public Spaces	\$95,000			PUC via RPD
<b>TOTAL WATER ACCESS</b>	<b>\$95,000</b>	<b>\$400,000</b>	<b>1%</b>	
<b>SF RECREATION &amp; PARKS</b>				
Peace Parks		\$650,000		RPD
SVIP Funding – Peace Parks Transportation		\$225,000		RPD
Requity: Outreach, Scholarships, Equity in Recreation		\$900,000		RPD
<b>TOTAL SF RECREATION &amp; PARKS</b>	<b>\$780,000</b>	<b>\$1,775,000</b>	<b>8.21%</b>	
<b>BREASTFEEDING</b>	<b>\$175,000</b>	<b>\$175,000</b>	<b>1.84%</b>	DPH/MCAH
<b>Total Proposed</b>	<b>\$9,500,000</b>	<b>\$10,900,000</b>	<b>100%</b>	



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**Budget Descriptions: SDDTAC recommends investing in strategies that support mental health and well being and workforce pathways for impacted/priority populations.**

<b>COMMUNITY-BASED GRANTS</b>	<p>City Departments should contract directly with CBOs through an RFP process managed through the Community Health Equity and Promotion (CHEP) Branch of the Department of Public Health. CBG should support community-based programs and services that address the health inequities of those most targeted by the beverage industry. Funding should go to Community Based Organizations (CBOs) and Faith Based Organizations (FBOs) for the following strategies:</p> <ol style="list-style-type: none"> <li>1. Health Education activities including, chronic disease prevention, healthy eating and active living, tap water promotion, oral/dental health</li> <li>2. Physical Activity opportunities, including: a) Dance and movement, sports, yoga, walking groups, biking, etc.; b) Efforts to influence changes to the built environment (ie sidewalks, streets, parks, buildings, etc) or safety of the built environment that facilitates increased physical activity and walking and biking for utilitarian trips, sometimes referred to as active transportation); and c) pursuit of institutional or local policies that facilitate physical activity and active transportation (such as adequate PE time and instructors, commuter benefits for active transportation, etc)</li> <li>3. Healthy Eating/Food Security*, including: a) Community-based pantries, community-based hot meals, community kitchens and community home delivery services; b) Increased financial resources (i.e. wages, income, government nutrition supplements, vouchers, etc.); c) Changes to the built environment that facilitate food security; and d) Pursuit of institutional or local policies that facilitate food security.</li> <li>4. Water Promotion, such as support for Spa Water Supplies, station maintenance/beautification, refillable water bottles to distribute to communities, water testing</li> <li>5. Community Based Participatory Research</li> </ol>
Health education, food security, physical activity	
CBOs working with SFUSD	7% of all CBO funding (eg 7% of approximately \$4.3 million) should go towards CBOs implementing programs/initiatives that take place in school settings. Funding to issue grants to CBOS should follow the guidelines above.
<b>SFUSD</b>	
School Food, Nutrition Ed	To improve the quality and appeal of school meals and support nutrition education to increase participation in school meal programs (for example: cooking and serving equipment, staff professional development, and innovative procurement and menu strategies to increase freshly prepared food). Funding will target schools with the largest populations of high-risk students that are disproportionately targeted by the sugary drinks industry.
Student Led Action	Support student led efforts to decrease consumption of sugary drinks and increase awareness of sugary drinks consumption among students, with focus on schools with the largest populations of high-risk students that are disproportionately targeted by the sugary drinks industry. SFUSD should provide to SDDTAC a proposal of how funding will be spent through student led action. Funding is provided for staff leadership, student and adult stipends and supplies.
Educational Investments	Educational investments that support and strive for professional development in health and wellness across lifespan. Scholarships and other supports in higher education in medical technology and health field careers for Priority Populations and including para professionals.
<b>FOOD ACCESS</b>	
Healthy Food Purchasing Supplement	Support programs that increase financial resources to purchase healthy food such as vouchers and food purchasing incentives. This investment is meant to support both the communities most impacted by the health consequences of sugary beverage consumption and to support the local economy including local merchants. These funds should be RFPed out to CBOs and FBOs according to the Community Based Grants guidelines.



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Healthy Retail	Supporting small business to increase healthy food access in high risk and impacted communities and neighborhoods by: 1) supporting business operations; 2) promoting community engagement; and 3) improving the retail environment.
<b>ORAL HEALTH</b>	
Community task forces	Support development of community infrastructure such as oral health community task forces that incorporate diverse stakeholders for outreach, education, and interventions to address the oral health needs of children in high risk populations.
School-based sealant application	Support school-based and school-linked preventive oral health programs within SFUSD schools serving high risk target populations. This should also support SFUSD dedicated oral health staffing.
School-based education and case management	
<b>INFRASTRUCTURE</b>	
DPH Infrastructure	<p><b>A. Personnel</b></p> <p>1) Backbone staffing to support SDDTAC a. A program manager to provide backbone staffing to the SDDTAC, including: i) Staffing full committee and 3 subcommittees in compliance with Sunshine and Brown Acts; ii) Coordinating among city agencies and funded CBOs to promote collective impact; iii) Help guide vision and strategy of SDDTAC, support aligned activities; manage SDDTAC work and timeline; and iv) Working with evaluation team to establish shared measurement practices b. As necessary, manage citywide/soda tax impact media c. Develop/Compile and Manage completion of SDDTAC Annual Report d. Manage SDDTAC biennial nominations process</p> <p>2) Staffing to support DPH SDDT implementation of community based grants a. Manage work of contractors, including: i) develop and implement CBO RFP process; ii) provide technical assistance for CBOs and merchants; iii) promote collective impact in coordination with SDDTAC backbone staff and City Agencies; and iv) work with evaluator and SDDTAC backbone staff to develop and implement evaluation plan and evaluation technical assistance.</p> <p>3) Staffing to support research and evaluation of SDDT impact, including data purchases as necessary a. At least 1.0 FTE epidemiologist; b. Support data analysis for annual report; c. Manage data purchases; d. participate in development and implementation of SDDT evaluation</p> <p><b>B. Professional services</b> including: i) technical assistance for funded CBO and FBO; ii) evaluation - to implement evaluation framework and evaluate funded city agencies, CBO and FBO, and process evaluations from applicants, and provide evaluation technical assistance; iii) city attorney to provide ongoing technical consultation</p> <p><b>C. Materials/Supplies</b> for meetings and printing costs</p> <p><b>D. Training</b> to support staff development</p> <p><b>E. Data</b> for collection (pricing), analysis (Nielsen) and purchase (IRI)</p>
<b>WATER ACCESS</b>	
Water Access - SFUSD	SFUSD water station installation. Additionally, invest in adding signage and art to 3 stations to pilot evidence-based community informed model for what designs should be. As well as water education. Allows for comparison of usage between pilot stations with artwork/education and those without.
Water Access - Public Spaces	Public water station installation. Additionally, invest in adding signage and art to 3 stations to pilot evidence-based community informed model for what designs should be. As well as water education. Allows for comparison of usage between pilot stations with artwork/education and those without.
<b>SF RECREATION &amp; PARKS</b>	



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Peace Parks	Peace Parks programming to serve Priority Populations
SVIP: Peace Parks Transportation	Transportation for Peace Parks participants
Requity	Outreach and scholarships for equity in recreation
<b>BREASTFEEDING</b>	To fund a breastfeeding coalition to organize collective efforts across San Francisco to enable increased breastfeeding among Priority Populations. This coalition will mobilize action on policy, systems, and environmental (PSE) changes to increase breastfeeding rate and duration, leveraging community strengths and tackling structural barriers to reduce inequities to breastfeeding support. This would include funding for backbone support to engage community stakeholders in a strategic planning and engagement process to develop a framework for short and long term goals embedded in principles of equity; help align breastfeeding support services in San Francisco including hospital, outpatient, and community based services to improve access to breastfeeding support; and provide technical assistance to partnering agencies (such as child care centers and businesses with less than 50 employees) to operationalize and implement breastfeeding friendly policies and practices.

\* Funding should support programs and services that increase financial resources to purchase healthy food; access to healthy fruits and vegetables while minimizing processed foods for high-risk communities; foods that are affordable and convenient; and programs that support the consumption of healthy foods including the ability to prepare and store meals and the knowledge of basic nutrition, food safety and cooking. Priority programs should incorporate a community-based food security perspective and have demonstrated increased ability of food insecure residents to purchase, access, and consume consumption of healthy, fresh, low-to-no cost and culturally appropriate foods, including but not limited to food vouchers/incentives, transportation and delivery and prepared foods.

## ONGOING ADBACKS FROM FY 2017-2018

PROGRAM	DEPARTMENT	DESCRIPTION	
Food Security – Healthy Food Purchasing Supplement	DPH	Maintain current service levels: Vouchers and education to increase consumption and access to nutritious foods by increasing the ability of low income residents to purchase fruits and vegetables at neighborhood vendors and farmers’ markets in collaboration with DPH Healthy Retail Program.	50,000
Healthy Corner Store Retail	ECN	Promoting corner stores and markets to sell healthy products as opposed to sugary beverages, etc.	60,000
Food Security – Home Delivered Meals (HDM)	HSA	Address current waitlist: Delivery of nutritious meals, a daily-safety check/friendly interaction to homebound seniors/adults with disabilities who cannot shop or prepare meals themselves. Many providers offer home assessments/nutrition education/counseling.	477,000
Food Security – Congregate Lunch Meals	HSA	Address current waitlist: Daily, hot, nutritious meals for seniors/adults with disabilities	220,000
Senior Fitness	HSA	Senior fitness programming at IT Bookman and George Davis	200,000
Congregate Meal Program	HSA	Congregate Meal Program A	75,000
Congregate Meal Program	HSA	Congregate Meal Program B	75,000
<b>TOTAL</b>			<b>1,157,000</b>

\*The Board of Supervisors made a series of adbacks in the FY 17-18 budget. When the Board of Supervisors makes changes to the Mayor’s budget, some of these changes are “adbacks” denoting the Board’s decision to add funds back for a particular service. Adbacks become part of an agency’s baseline budget.