

CITY COUNCIL
CITY OF NEW YORK

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TRANSCRIPT OF THE MINUTES

of the

COMMITTEE ON HEALTH

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January 28, 2020
Start: 10:11 a.m.
Recess: 11:55 a.m.

HELD AT: Committee Room - City Hall

B E F O R E: Mark Levine
Chairperson

COUNCIL MEMBERS: Mark Levine
Alicka Ampry-Samuel
Inez D. Barron
Andrew Cohen
Mathieu Eugene
Robert Holden
Keith Powers

A P P E A R A N C E S (CONTINUED)

Dr. Myla Harrison
Associate Commissioner of the Bureau of
Mental Health
New York City Department of Health and
Mental Hygiene

Dr. Chanelle Coble
Pediatrician
New York City Health and Hospitals at
Bellevue and NYU Langone Hospitals

Renee Cafaro
Social Media Influencer

Emme Aronson
Ambassador
National Eating Disorder Association

Iman Hariri-Kia

Kerry Donohue
National Eating Disorders Association

Sarah Hamel-Smith

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2 KEITH POLITE: Testing one, two, one two.
3 Today is Tuesday, January 28, 2020. Today's hearing
4 is the Committee on Health, being recorded by Keith
5 Polite.

6 CHAIRPERSON LEVINE: [gavel] Good morning,
7 everyone. I am Mark Levine, chair of the City
8 Council's Health Committee, and I want to welcome you
9 all to our hearing today on the important topics of
10 body image and the harmful products known
11 euphemistically and deceptively as detox teas and
12 weight loss candies. I am pleased that we are joined
13 today by fellow members of the Health Committee,
14 Council Member Alicka Ampry-Samuel, Council Member
15 Bob Holden, and Council Member Andy Cohen. Today
16 we'll be hearing from representatives of the
17 Department of Health and Mental Hygiene, advocates,
18 and stakeholders, as I mentioned, on the topics of
19 body image and inclusivity. We will also hear
20 Introduction number 1485, legislation I'm proud to be
21 the lead sponsor of, which would restrict the sale of
22 senna- and saffron-based dietary products to minors.
23 We need to encourage everyone in this city and this
24 country to be more mindful of their health. But too
25 often, for too long, healthfulness has been confused

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2 with thinness, with disastrous consequences for young
3 people, in particular young women. The conflation of
4 thinness with health has in large part been driven by
5 decades of corporate marketing, which has perpetuated
6 only one ideal of beauty. And this problem has been
7 magnified by the sale of products which prey on those
8 misconceptions, products that include so-called detox
9 teas and weight loss candies. From companies with
10 insidiously deceptive names like Flat Tummy Co. Many
11 of these products are infused with senna, which is
12 nothing more and nothing less than a laxative. Their
13 core function is to block the absorption of nutrients
14 in the body's digestive system. There is zero
15 evidence that these products are an effective
16 strategy for real and lasting weight loss. Use of
17 these laxatives over time can create higher tolerance
18 in the digestive system, meaning that users have to
19 steadily increase their intake. And extensive
20 laxative abuse can cause ongoing permanent damage to
21 the liver, colon, and other areas of the body. These
22 products don't just block the absorption of food
23 nutrients. They also have the potential to block
24 absorption of prescription medications, which can
25 have catastrophic medical consequences. Given these

1 risks, it might be shocking to learn that a celebrity
2 would endorse such products. But in fact, to tragic
3 effect, celebrity endorsements have played a major
4 role in their proliferation. And I'm going to name
5 names. Kim Kardashian, Chloe Kardashian, Courtney
6 Kardashian, Kylie Jenner, Amber Rose, NeNe Leakes.
7 Shame on you. Shame on all of you for using the
8 trust you have established with young people to push
9 these products. To push these dangerous products.
10 Because you wanted to receive lucrative contracts,
11 reportedly as much as \$100,000 per post, portraying
12 these as an effortless route to thinness. As one
13 marker of the viral spread of this message, the
14 hashtag #teatox now has over 885,000 posts on
15 Instagram alone. This industry and their endorsers
16 has pushed the dangerous idea that healthfulness and
17 even happiness is equated to thinness. This
18 distorted view undoubtedly increases the incidence of
19 eating disorders, which according to the National
20 Association of Anorexia Nervosa and associated
21 disorders is a condition faced by at least 30 million
22 people nationally. While this condition is most
23 likely to affect adolescents, and especially young
24 women, eating disorders can in fact afflict people of
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1 any age, race, or gender identity. And there is
2 evidence that young people of color and TGNCNB
3 individuals face particular hurdles in receiving
4 treatment when they suffer from these conditions. In
5 the face of this challenge, in the face of an
6 industry backed by celebrities, which is pushing
7 harmful products on our young people, New York City
8 has an obligation to act. That is why today we are
9 hearing Intro 1485, legislation to prohibit the sale
10 of senna- and saffron-infused dietary products to
11 minors, to protect their health and to fight back
12 against our society's persistent destructive
13 obsession with thinness. I very much look forward to
14 hearing from all of you today and I thank you for
15 being present at this important hearing. I would
16 like to now ask our first panel, representatives of
17 the administration, to take the affirmation before
18 testify, and I'll cue our committee counsel, Sora
19 Liss.

21 COMMITTEE COUNSEL: And this is for
22 anyone who's gonna answer questions also. So I know
23 DCA is here. So if you could just raise your right
24 hand, all of you. Do you affirm to tell the truth,
25 the whole truth, and nothing but the truth in your

1 testimony before this committee, and to respond
2 honestly to council member questions? Thank you.

3
4 Good morning, Chair Levine and members of
5 the committee. I am Dr. Myla Harrison, assistant
6 commissioner of the Bureau of Mental Health at the
7 New York City Department of Health and Mental
8 Hygiene. I am joined by Dr. Chanelle Coble, a
9 pediatrician affiliated with New York City Health and
10 Hospitals at Bellevue and NYU Langone Hospitals. On
11 behalf of Commissioner Barbot, Thank you for the
12 opportunity to testify on the issues of body image
13 today. The health department is committed to
14 protecting and promoting the health of all New
15 Yorkers and aims to ensure that New Yorkers have
16 access to high-quality mental health care, preventive
17 and primary care, and nutritious food, regardless of
18 ZIP code. No one should face discrimination in any
19 form, especially biases and prejudice aimed at the
20 way their body looks, and no one should experience
21 societal pressure to change the way their body looks.
22 All people, regardless of their body type, should be
23 treated with respect and dignity. While the health
24 department does not collect data on rates of body
25 image challenges and eating disorders among New

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2 Yorkers, we know from academic work that people who
3 idealize thinness tend to be dissatisfied with their
4 body image and tend to experience anxiety,
5 depression, eating disturbances, and poor self-
6 esteem. Women who are exposed to images of thin
7 women experience not only decreased body image and
8 satisfaction, but also increased anxiety. Because
9 social media is nearly ubiquitous, we need to be
10 attentive to the impact of social influencers on New
11 Yorkers, including celebrities who make money based
12 on the number of people who buy the products they
13 promote online. 72% of Americans use at least one
14 social media site and for many social media is part
15 of their daily routine. Among teens over 90% report
16 being online daily and 70% report using social media
17 multiple times per day. On social media using may be
18 exposed to images from social media influencers that
19 idealize thinness and promote untested claims, excuse
20 me, untested products that claim to bring weight loss
21 and beauty. A study of users of one social media
22 site found that those who endorsed a thin-appearing
23 female body type tended to also engage in social
24 comparison and express intentions to engage in
25 extreme weight loss. Low self-esteem and depressive

1 symptoms have been directly linked with social media
2 users' internalization of thinness as the ideal body
3 form. Although academic literature on body image has
4 primarily focused on straight, cis gender women,
5 LGBTQ and gender nonconforming people also face
6 pressure to conform to standards of beauty. Among young
7 people, LGBTQ and gender nonconforming youth are
8 twice as likely than their non-LGBTQ peers to be
9 dissatisfied with their body image and four times
10 more likely to report disordered eating behaviors.
11 Individuals with body dissatisfaction are at greater
12 risk for disordered eating behaviors, such as
13 skipping meals, eliminating certain foods, or
14 engaging in extreme exercise to burn off calories.
15 Research has demonstrated that idealizing bodies and
16 engaging in social comparison on social media are
17 behaviors that are linked to disordered eating.
18 Disordered eating behavior represents one risk factor
19 for eating disorders. However, eating disorders are
20 defined by extreme preoccupations with food and
21 weight that interfere with functioning and can be
22 life-threatening. While eating disorders are caused
23 by a complex interaction of genetic, biological,
24 behavioral, psychological, and social factors,
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1 addressing social media influencers, promotion of
2 untested, unproven weight loss products may be one
3 strategy that can ameliorate one of the factors that
4 may be related to eating disorders. The City of New
5 York is working to educate New Yorkers about body
6 image issues and promote inclusivity. The Department
7 of Education provides health education on body image
8 and body confidence for middle school and high school
9 students during the Health Smart Nutrition Unit. At
10 all grade levels lesson plans include skills
11 development around media literacy and analyzing
12 information for reliability and informed decision-
13 making. At New York City Health and Hospitals
14 physicians screen patients for eating disorders as
15 part of routine primary care, and outpatient
16 treatment for eating disorders is available at
17 certain H&H locations throughout the city. If a
18 patient requires more intensive care, such as an
19 extended hospitalization or long-term care, they are
20 referred to institutions that specialize in this
21 care. If you or a loved one are seeking help with an
22 eating disorder we encourage you call NYC Well. NYC
23 Well is a phone, text, and online chat service that
24 operates 24/7, 365 days a year, and is staffed with
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English, Spanish, Cantonese, and Mandarin speakers, with additional interpretation services available in more than 200 languages. It is a confidential service staffed with crisis counselors and peers with lived mental health experience. NYC Well counselors can refer callers to over 150 providers throughout New York City who offer counseling, treatment, or support for eating disorders. We also encourage the council to contact the New York State Department of Health for more information on publicly funded resources and services for people impacted by eating disorders. The state Department of Health funds three comprehensive care centers for eating disorders, including the Metropolitan Comprehensive Care Center for Eating Disorders, which is a collaboration of New York-Presbyterian Hospital, Cohen Children's Medical Center, and the New York State Psychiatric Institute at Columbia University Medical Center. With Columbia University Department of Psychiatrists, Department of Psychiatry serving as an entry point this comprehensive care center for eating disorders offers a comprehensive range of specialized clinical services at all levels of care to patients of all ages. Regarding the legislation

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2 being heard today, Intro 1485, which would restrict
3 the sale of senna- and saffron-based products in New
4 York City, the administration appreciates Council's
5 concern in enacting protective measures for
6 consumers. However, to date we have not received any
7 complaints about these types of products and do not
8 have the expertise to assess the nutritional effects
9 of these products. We would like to investigate this
10 issue and discuss further with Council the best way
11 to address the potentially harmful effects of these
12 products. We remain committed to ensuring that all
13 New Yorkers receive the mental health care they need.
14 Thank you to the council for your focus on these
15 important topics. I'm happy to take your questions.

16 CHAIRPERSON LEVINE: OK, thank you,
17 Commissioner Harrison. I really liked the first 90%
18 of your testimony. I am, I'm perplexed at your
19 response to the legislation. The stated reason is
20 you haven't received complaints about these products.
21 So I want you to register this hearing as a complaint
22 about these products. And I want to understand your
23 analysis as a doctor of the health impact of
24 laxatives when not used as directed. Please.

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2 ASSISTANT COMMISSIONER HARRISON: So the
3 health department is committed, um, to the promoting
4 the, protecting and promoting the health of all New
5 Yorkers, and we are concerned about this issue and
6 are glad that you brought it to our attention. And,
7 um, we are concerned about, um, products that, ah,
8 may contribute to negative body image as well. And
9 we have resources available for people who do have
10 eating disorder and body image issue, and that is
11 through NYC Well and we are very concerned about
12 making sure people get access to the care, um, that
13 they need. As a child psychiatrist I'm not an expert
14 in impacts of, um, those sorts of products and I'm
15 happy to turn it over to my colleague, as she may
16 have some additional, um, input to offer to us as
17 well. And I would say as the health department we
18 don't have the expertise to assess the nutritional
19 effects of these, and we really do need to learn
20 more, and I'd be happy to continue to have that
21 conversation with you.

22 CHAIRPERSON LEVINE: Excuse me, you're
23 not ready to state that the overconsumption of
24 laxatives by people who don't need them for digestive
25

1 reasons poses any medical risk? Dr. Coble, would you
2 like to weigh in on that?

3
4 DR. COBLE: Thank you, Council Member,
5 ah, for the opportunity to discuss this issue and for
6 the question. Um, currently there isn't a tremendous
7 amount of medical literature about the, um, specific
8 ingredients in many of these weight loss or other
9 supplements that you've referred to. We do know that
10 they do contain a number of ingredients that do have
11 laxative properties that, um, in clinical experience
12 with overuse can lead to, ah, things such as
13 diarrhea, ah, excessive loss of fluids, electrolyte
14 derangements, and other health concerns if used
15 improperly. The challenge with many of these
16 materials is that we don't know all of their
17 constituents and the exact amounts at this current
18 time.

19 CHAIRPERSON LEVINE: But those fears are
20 exactly why we need to protect young people. If you
21 don't know the ingredients, if you're unsure about
22 the dangers, and if people are using these for
23 purposes for which they weren't created, there's high
24 risk. This, this blocks the absorption of nutrients.
25 It also potentially blocks the absorption of

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2 medications. Is that not accurate? Someone on
3 prescription medication might see the effect blunted
4 by the consumption of these products?

5 DR. COBLE: Thank you again for that
6 question. Although I'm not in the position to, um,
7 discuss specifically about blocking medications that
8 would vary depending on the actual agent. From what
9 we know about medications like senna, in particular
10 that are used, ah, prescribed by physicians for
11 constipation, um, with excessive use you can have
12 complications that I've mentioned before. Um, but
13 there certainly needs to be more in the way of
14 research, ah, to really understand the true impacts,
15 um, of the specific agents that you're referring to
16 and medication absorption.

17 CHAIRPERSON LEVINE: Um, Commissioner,
18 you spoke in your remarks about the problems of
19 eating disorders. Do you accept that the marketing
20 of products in a way that defines beauty in one and
21 only one way, the marketing of products that
22 conflates healthfulness to not just thinness, but
23 happiness? That could accelerate and amplify the
24 incidence of eating disorders among young people?

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2 ASSISTANT COMMISSIONER HARRISON: We know
3 that eating disorders are a group of disorders that
4 include anorexia, bulimia, and bingeing eating
5 disorders, and I, um, stated in m testimony, are
6 characterized by extreme preoccupations with food and
7 weight and have an interference then with someone's
8 ability to function. Some of the symptoms of those
9 eating disorders are using laxatives, diuretics, or
10 appetite suppressants as a symptom of this disorder
11 in order to control their weight, um, or their, um,
12 intake of food and eating disorders, you know, are
13 mental illnesses that really do cause significant
14 distress and impairment in social, occupational, and
15 other important areas of functioning. And we are
16 very concerned, um, about that and making sure that
17 people who have eating disorders are getting the care
18 that they need.

19 CHAIRPERSON LEVINE: Given the likely
20 harm of these products, given their contribution to,
21 um, incidence of eating disorders, why doesn't the
22 city ban their advertising? We ban the advertising
23 of tobacco products near schools. Why don't we do
24 that for these products?
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2 ASSISTANT COMMISSIONER HARRISON: Ah, as
3 the health department, I'm not sure I can, as, with
4 my position at the health department I'm not sure I
5 can comment on that specific, um, issue. I know that
6 we need to learn more before we can commit to this
7 suggested change in the law.

8 CHAIRPERSON LEVINE: And even, even if
9 you're not willing to go so far as to, to push a ban,
10 which I would strongly support, the city can much
11 easily, without any legal hurdles, produce its own
12 advertising on subways and buses alerting people to
13 the realities of these products, that they are, ah,
14 they are nothing more than laxatives, that they don't
15 contribute to any sustained weight loss, and that
16 they, ah, shouldn't be confused with a step towards
17 healthfulness. Why don't we put those messages out
18 there using the resources at the city's disposal?

19 ASSISTANT COMMISSIONER HARRISON: I would
20 be happy to take issue back and have conversations
21 with my colleagues, and we could get back to you on
22 that.

23 CHAIRPERSON LEVINE: You said that the,
24 ah, city can offer guidance to people who are
25 suffering from eating disorders by calling NYC Well.

2 What kind of referrals do you make in that service?

3 What kind of advice do you offer.

4 ASSISTANT COMMISSIONER HARRISON: So when
5 I mentioned, um, NYC Well, um, I was mainly referring
6 to it as an information and referral line, um, to
7 access the well over 150 resources that are on there,
8 um, the resource directory for people with eating
9 disorders.

10 CHAIRPERSON LEVINE: Does the Department
11 of Health partner in any way with our Department of
12 Education, with the public schools, to get messaging
13 about eating disorders and resources available to
14 those suffering?

15 ASSISTANT COMMISSIONER HARRISON: Ah, the
16 health department works closely with our colleagues
17 in the Department of Education and we were involved
18 in the creation of the health curriculum that the
19 Department of Education rolls out to its middle and
20 high school students, where there are, um, there are
21 topics related to nutrition and eating and physical
22 activity and mental health, and we were involved with
23 them in that.

24 CHAIRPERSON LEVINE: But are we teaching
25 in the schools about the societal messaging which

1 drives so much of these eating disorders? Are we
2 teaching in the schools about what science says
3 related to so-called detox teas and so-called weight
4 loss candies? Are kids getting any curriculum that
5 could help them use science to evaluate these
6 products?
7

8 ASSISTANT COMMISSIONER HARRISON: So when
9 we worked with the Department of Education on their
10 health curriculum there, we worked with them also on
11 topics related to social media and literacy around
12 those sorts of areas. And if you have further
13 questions related to the Department of Education
14 specifically I, I'd suggest that you bring them for
15 that.

16 CHAIRPERSON LEVINE: OK, but the school,
17 the Office of School Health, has a, ah, report
18 directly to the Department of Health, correct? So
19 this is under your agency's purview, is it not? Is
20 health education curriculum not under Department of
21 Health purview?

22 ASSISTANT COMMISSIONER HARRISON: So the
23 health curriculum, we worked with the Department of
24 Education on their health curriculum, yes.
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2 CHAIRPERSON LEVINE: What is the best
3 course of treatment for an individual suffering from
4 eating disorders?

5 ASSISTANT COMMISSIONER HARRISON: So I'm
6 not prepared to talk about treatment specifically
7 related to eating disorders. I can see if my
8 colleague from Health and Hospitals would like to
9 address that.

10 DR. COBLE: So, um, in my experience as
11 working as an adolescent pediatrician for over a
12 decade, um, eating disorders are very complex and
13 multifactorial and so is the treatment. There isn't
14 a one-size-fits-all as it relates to treatment.
15 Treatment often involves, um, the coordination of
16 care between a medical provider, psychology,
17 psychiatry, as well as nutritional counseling. Um,
18 that's really tailored toward the age of the
19 individual and their presenting, ah, ah, complaints.
20 In my clinical practice, um, it really, ah, does
21 differ patient to patient, um, but really recognition
22 and awareness and linkage to care early on can really
23 impact positively those that may be at risk or
24 afflicted with eating disorders.

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2 CHAIRPERSON LEVINE: OK. I, I want to
3 wrap up soon with all of you, but I want to zero in
4 on your objection and I'm going to read back what you
5 stated, Commissioner, which is "To date we have not
6 received any complaints about these types of products
7 and do not have the expertise to assess their
8 nutritional effects." That, that is your rationale
9 for opposing our effort to prevent access to these
10 harmful products amongst young people in New York
11 City?

12 ASSISTANT COMMISSIONER HARRISON: Thank
13 you for that. I don't think we're saying we're
14 opposing these efforts. What we are saying is that
15 we need to, um, learn more information and we would
16 be happy to have further conversations with you.

17 CHAIRPERSON LEVINE: And what information
18 can we provide you, or what information do you need?

19 ASSISTANT COMMISSIONER HARRISON: I think
20 we'd have to get back together and, and then have
21 that conversation with you.

22 CHAIRPERSON LEVINE: OK. Ah, this is not
23 a new issue. These are not new products. Some of
24 them have been available for decades. Yes. They've
25 been accelerated in recent years. Not recent weeks,

1 recent years, by social media and by celebrities
2 pushing them. But sadly this is not breaking news.
3 This is a growing problem to be sure, but we are
4 essentially in a battle between propaganda and facts
5 here, and there is an industry which has tremendous
6 resources backed by celebrities, which is pushing
7 propaganda. I invite you to spend some time perusing
8 the website of Flat Tummy Co. It is, it could be a
9 master class in propaganda. It is frightening the
10 way that they have conflated these products and the
11 ideal of thinness with health. It's actually
12 outrageous that they're able even to produce content
13 like that. So our only hope is to counter that, so
14 that we ensure that young people get the facts about
15 what is in these products. Really, what is in these
16 products? About what their impact is, about their,
17 their usefulness or frankly lack of utility for
18 healthy weight loss and to directly counter the
19 underlying philosophy behind this entire industry of
20 conflating healthfulness with thinness. And so in
21 that battle we need public health leaders who have
22 titles like doctor in front of their names or
23 commissioner in front of their names to speak up.
24 And I don't think that we can say in 2020 that we're
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1
2 not gonna act because we haven't gotten sufficient
3 complaints. I don't think we can use that as an
4 excuse for failure to act. Not when the stakes are
5 this high. Not when an estimated 30 million people
6 in the country suffer from eating disorders, a
7 disorder, by the way, that has very high rates of
8 mortality and other negative impacts. So we have to
9 act. We're doing that with the tools at our disposal
10 in the City Council, and we're not gonna stop pushing
11 this bill. And you have told you today that you're
12 gonna come back with, um, answers on many questions
13 that you weren't able to address and we, we want to
14 get those answers and we're gonna continue, ah, to
15 push this bill in our battle against these harmful
16 products. All right. Thank you and we're going to
17 move on to our next panel. Oh, forgive me, before
18 you leave, ah, I want to acknowledge, ah, our
19 colleague in the City Council Health Committee,
20 Council Member Bob Holden, for some questions.

21 COUNCIL MEMBER HOLDEN: Thank you, Chair.
22 Um, 870,000 posts on Instagram with the hashtag
23 #teatox. Um, that's alarming. Should our, we should
24 educate our parents, first of all, to notice that the
25 kids are taking this, this tea tox, or tea detox, um,

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2 in their diet. Because I didn't know about it, and,
3 you know, I've been around a while. I didn't know
4 that this was harmful. I'm hearing it for the first
5 time. It makes sense, though, that we should be
6 alarmed. When I was young, um, we had celebrities
7 hawking cigarettes, tobacco, ah, saying how great,
8 you know, the mild flavor was and so forth. And we
9 even had little cigarettes, you know, little, um,
10 bubble gum shaped as cigarettes and powdered sugar to
11 be the smoke on the cigarette, and they would sell
12 that to kids, which is ridiculous. So this we could
13 look at. We have to be ahead of the curve, not
14 behind it. If this is going on we should alert
15 parents. Our schools should alert parents. This,
16 um, this health, um, Health Smart Nutrition Unit in
17 schools, is that, is that a regular class or is that
18 just once in a while?

19 ASSISTANT COMMISSIONER HARRISON: Um, I
20 have to get back to you on the specifics of that,
21 that particular question.

22 COUNCIL MEMBER HOLDEN: Yeah, because
23 this is, this is, you know, if we're not aware of
24 this then we're losing an entire generation to this
25 and we could, you know, it could cost many lives. So

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2 it's nothing to be, we should, the health department
3 should be ahead of the curve. We should alert
4 parents to this, if this is harmful, if the kids are
5 doing this and apparently they are, on a large scale.
6 So that should not be just, oh, we're, we don't know
7 too much about this yet, well, we should find out.
8 So I agree with the chair. I think this is something
9 that as a parent I would want to see what my child
10 is, is drinking tea. I would first say, oh, tea,
11 it's a tea, but if they're binging on this stuff and
12 taking it regularly we should know about it as
13 parents and, and it's up to our schools to educate
14 not only the children, but the parents, too. So I
15 think at this point the health department should put
16 out some kind of notice, advisory, that this is going
17 on. And shame on, like the chair said, shame on
18 celebrities who, this is not doing anybody any
19 benefit and it could cost lives. So that's why we
20 need to be ahead of it. So I want to thank you,
21 Chair. Thanks for that.

22 CHAIRPERSON LEVINE: Thank you, Council
23 Member. I did just want to ask you about one
24 contradiction that's been on my mind, which is the
25 health department's stance towards CBD, which you are

1 seeking to ban as a additive in New York City to
2 things like coffee. Um, CBD, the science is not out
3 on that yet. In fact, there is already documented
4 research that establishes it as helpful for
5 conditions of people who suffer from seizures and,
6 ah, there are certainly anecdotal reports of other
7 health benefits that need to be verified for sure.
8 But your department has been aggressive in seeking to
9 ban CBD. How do you square that stance with your
10 refusal to consider a ban only for minors of detox
11 teas and weight loss candies?
12

13 ASSISTANT COMMISSIONER HARRISON: As the
14 health department, we are concerned about the health
15 of all New Yorkers. The specific your, question that
16 you're asking me is, um, most related to our position
17 that the FDA, um, has said it's not approved a food
18 additive and, um, that's what that CBD.

19 CHAIRPERSON LEVINE: But the FDA hasn't
20 approved senna as a, ah, dietary additive for weight
21 loss. Right, this is, this is off, off-label usage.

22 ASSISTANT COMMISSIONER HARRISON: So I
23 think we have to get back to you. You're asking a
24 good question and I hear your concern, and I think we
25 can get back to you on that.

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2 CHAIRPERSON LEVINE: OK, ah, I'd feel
3 safer in a city that allowed consumption of CBD by
4 adults and prohibited the purchase of weight loss
5 teas and candies by minors. I would feel less safe
6 in a city that banned the sale of CBD to adults while
7 allowing the sale of detox teas and weight loss
8 candies to minors. That is potentially the, that is,
9 not potentially, that is currently the policy stance
10 of the health department, and I don't see how that
11 contraindication is defensible. I want to thank you
12 all for testifying, and I want to call up our first
13 panel of public testimony, which includes, ah, two
14 social media influencers, but these are the virtuous
15 kind. We're going to be joined by Renee Cafaro and
16 Emme, who happens to have the credential as an
17 ambassador for the National Eating Disorder
18 Association, or NEDA. And I want to thank you both
19 for joining us today on our first public panel. I
20 also want to acknowledge that we've been joined by
21 fellow member of the Health Committee, Council Member
22 Inez Barron, and, um, if you'd like to kick us off,
23 Renee.

24 RENEE CAFARO: Thank you so much, Council
25 Member, um, for, for letting us speak. Um, this is a

1
2 very important issue. The detox teas are some of the
3 most dangerous diet scams, as they are marketed as
4 healthy in promoting overall wellness.

5 CHAIRPERSON LEVINE: Excuse me, Renee,
6 is your microphone on? I just want make sure you're
7 recorded for, ah, is the little light on?

8 RENEE CAFARO: Nope, there it is.

9 CHAIRPERSON LEVINE: There we go. Great.

10 RENEE CAFARO: Thank you.

11 CHAIRPERSON LEVINE: If you wouldn't mind
12 starting, we want to get you recorded.

13 RENEE CAFARO: Sure. Um, I want to thank
14 you for allowing us to speak today on this very
15 important issue concerning detox teas and weight loss
16 scams that are being marked falsely as a track to
17 wellness. Um, additives like senna are laxatives.
18 You know, we've heard a lot from, from you about this
19 and I understand, um, unfortunately I'm disheartened,
20 but I understand the position of those who spoke
21 before us, because it just proves that why we need to
22 be here for this, this hearing, that there is still a
23 systemic issue where people do not know how to
24 uncouple the weight loss industry from wellness and
25 health. And we are turning a blind eye on what it is

1
2 doing to our children and what it is doing to society
3 as a whole. Um, in order to keep this somewhat
4 brief, if you'll just indulge me, I think I'll skip
5 directly into, um, being the anecdotal evidence
6 perhaps some of the people in this room need. Um,
7 some of you know me as my, ah, prior life in city and
8 state government. But I've spent the past five years
9 dedicating my passion for social justice towards body
10 image, ah, eating disorders, um, the recovery, and
11 plus-size women. I am the US editor of a body-
12 positive magazine called *Slink*. And I have spoken on
13 national media and many universities on the image of
14 body image, ah, body dysmorphia, and the misuse of
15 diet products. Why this is so important to me is
16 because I am possibly the proof that they need. I
17 didn't go and walk into the Department of Health and
18 Mental Hygiene, ah, when I was a teenager and
19 complain about, ah, the all-natural, supposedly safe,
20 over-the-counter, ah, diet products that I was using
21 and abusing in hopes to become thin, um, because I
22 didn't really know there was anything wrong with
23 them, which is why we need to be here. We now know,
24 I mean, this was back in the Nineties, ah, we now
25 know better. If the same body can wrap their arms

1
2 around something as amorphous and, and new as the
3 dangers of vapes to our children, we should be able
4 to do this. When I was a teenager, um, I've always
5 struggled with my weight, and my mother actually was
6 the first person to give me an over-the-counter
7 herbal, ah, detox tea, um, with laxatives and herbal
8 pills that were supposed to be appetite suppressants,
9 ah, in elementary school. Um, the idea was that it
10 was safe. I mean, granted this was the early
11 Nineties. We know a lot a more than we did then, but
12 apparently not by much. And I spent most of my
13 adolescence chasing the idea of thinness, because
14 thinness was supposed to be health, thinness was
15 supposed to be beauty. And doctors, family members,
16 schools, none of them stopped me. In fact, many of
17 them encouraged me because no matter what I was doing
18 GI was still technically seen as obese on the BMI
19 scale. I had turned to, ah, anorexia. Ah, thanks to
20 the National Eating Disorder Association, actually
21 only about a year and a half ago, did I fully
22 understand that I was actually, could be considered
23 anorexic even though I was fat. Um, I was
24 restricting my calories to under 500 calories a day,
25 sometimes under 100, ah, working out, and taking, ah,

1 an insane amount of over-the-counter products. And
2 when I complained to those who were supposed to be
3 protected me about headaches, about malnutrition,
4 about the fact that I had reached a plateau, um, I
5 was met even by doctors with what I thought was a,
6 um, bare minimum, I think, to legally cover them, to
7 say, oh, I should work on this with a nutritionist
8 or, ah, you know, maybe I shouldn't be taking so much
9 stuff, or maybe, you know, I definitely shouldn't be
10 restricting my, my eating so much. But on the flip
11 side in the same sentence, but you're really still
12 obese on the BMI scale. You've got to lose as much
13 weight as fast as possible. So what is a teenager
14 supposed to do with that information? What I did was
15 I turned to all the get skinny quick schemes out
16 there. Some are very predatory and will continue to
17 charge your credit cards. Um, you know, what I
18 preach now in my capacity as an influencer on body
19 image is that we must understand that we are all
20 pawns in what I like to call the weight loss
21 industrial complex. It is built for us media and
22 weight loss scams and social media influencers who
23 are, you know, getting paid for this. All need you
24 to feel terrible about yourself so you can come back
25

1 and, and buy another product. Buy another month of
2 this. Because if it really worked, they only get the
3 \$19 out of the first time around. That's not
4 profitable. That's bad for business. These are made
5 for these to be scams to keep you coming back, and
6 that's exactly what I did. That's exactly what so
7 many people I knew did the same time, and so many
8 women I'm meeting now, when I went back to my alma
9 mater, Stanford University, and met with their, ah,
10 student group now on body image, which did not exist
11 when I was there, and it was so heartbreaking to see
12 that their struggling was just as much as I did, um,
13 15 years ago. This is not just about senna. Senna
14 is a great start to something to ban. But this is
15 part and parcel of a larger issue, where we are
16 allowing our children to put things in our bodies
17 without knowing what it is. To me, it is about being
18 mindful of what we're putting in our bodies and that
19 is real weakness, that is real health. The way that
20 the City of New York has tackled trans fats, sodiums,
21 and put warnings of calories on menu boards, this is
22 the exact same reasoning why we need to have more
23 education and call upon DCA and your colleagues in
24 the council to look forward and what we can do about
25

1 marketing, limiting the marketing to children around
2 schools, and putting out our own message about
3 warning what these things really are doing, because
4 as you heard earlier, yes, it is blocking the
5 absorption of nutrients, and you don't need to abuse
6 them. These are very strong and potent laxative
7 teas. Ah, when you take them, I mean, all diuretics
8 are made to do their job and, um, it's not about
9 taking an unholy copious amount of them, um, but
10 really just taking them or taking multiples of these
11 types of products at the same time. Because, again,
12 if you're seeing that they're all-natural, they're
13 over-the-counter, they're cheap, there's nothing to
14 make you believe there's something wrong with taking
15 as many as you can get your hands on, and if your
16 goal is to look like what it looks in the magazines
17 or to make your mom or your doctor happy that you've
18 lost that 10 pounds in a week, or whatever your goals
19 are, you'll do whatever it takes. Um, children do
20 have, and I say children, you know, even 17-year-olds
21 aren't quite children, but minors, are obviously
22 equipped to be able to tell the difference between a
23 scam and right and wrong. But when they're being
24 pressured every day, in such a way that even adults,
25

1
2 like myself, who do this for a living, sometimes
3 still battle with my own eating disorders. It is
4 very difficult to say no. And so we have to do our
5 part to inform. I absolutely agree with Council
6 Member Holden, absolutely need to inform, um, the
7 adults of the issues with senna products and these
8 all, supposed all-natural, safe diet products because
9 so many people made the same mistakes my family did,
10 thinking that these were safe to give to children
11 with weight issues. And it is not a safe
12 alternative. It is masking something that is really
13 just abuse of harmful additives, whether they're
14 naturally derived or not, and it is perpetuating this
15 idea that thinness is health and my mental and
16 physical health were damaged, um, like many, I speak
17 on behalf of millions of women who feel the same way,
18 as an ambassador for the National Eating Disorder
19 Association as well. Um, this is something of major
20 concern, um, of, of mental health. Once you start
21 getting yourselves into that system everything is
22 interconnected. This is today about senna teas, but
23 we're talking about something that is one piece of a
24 much larger machine that is causing depression,
25 anxiety, eating disorders, and body dysmorphia, for

1
2 generations to come, and it needs to end now. We've
3 done this for decades. We know what the after-
4 effects are. Let's get to the root of the cause. We
5 are New York City. We can be the ones who lead the
6 charge and make the difference. I urge all of City
7 Council to support this bill, support this ban, and
8 also think towards the future what more we can do to
9 help our, our children and to help end this epidemic
10 of body dysmorphia. Thank you.

11 CHAIRPERSON LEVINE: Thank you so much,
12 Renee. Thank you.

13 RENEE CAFARO: Thank you.

14 CHAIRPERSON LEVINE: Emme?

15 EMME ARONSON: Thank you, council
16 members, for allowing us to speak today. My name is
17 Emme Aronson and I am a 30-year ambassador for the
18 National Eating Disorder Association, social reformer
19 of sorts, um, a rebel rouser around body image and
20 self-esteem for quite some time. Ah, I've had the
21 opportunity to travel throughout the country over 30
22 years, talking, communicating, listening to teens,
23 ah, young adults, ah, adults, and their parents. Um,
24 it's very concerning that, ah, we continue to see, as
25 Renee had just stated, different packaging of the

1
2 same insidious drinks and teas, masked as healthy and
3 natural, without limitation of regulation. Ah, there
4 seems to be a pull-back from time to time, as I've
5 seen over three decades. But it continues to move
6 forward in billions of dollars being made on the
7 backs of young people to get them in first, and then
8 younger adults, and then parents. There's a top-down
9 educational issue that is, that has not been
10 addressed, ah, and if New York State, New York City,
11 um, can lead the charge in educating not only our
12 young people and also the, the people who are in, ah,
13 New York City, but the parents, top down, everyone,
14 full-court press, needs to understand what a laxative
15 does to an individual's body. Period. End of, end of
16 point. Um, these laxatives that are in the teas that
17 you were so called in the, in the bill, ah, are used
18 for surgery to help empty out a lower intestine.
19 Period. When we see this in teas and being marketed
20 to teenagers, to be able to have that unobtainable
21 image of, um, beautiful, ah, very much not inclusive,
22 very exclusive. That perpetuates a problem of
23 thinness at all costs. We are seeing an increase as
24 a National Eating Disorder Association, ah,
25 ambassador as well with Renee. Ah, we see that

1
2 eating disorder clinics, not, not are just half full,
3 they're brimming over with people. It's very hard to
4 get in. It's very costly, sometimes \$40,000 a month,
5 to be able to get help. And a lot of people, now
6 more so than ever, men that are stepping up, boys,
7 brothers, men, um, those that are specified as men
8 are not, ah, we're finding that it's, once again, a
9 full-court press as to who is being affected by
10 eating disorders that are triggered by these types
11 of, um, promotions, advertising, ah, and it really,
12 if we can make a change and get this bill passed and
13 have all the doctors that are involved in the health
14 system in New York City go visit an inpatient program
15 of an eating disorder clinic and listen to why
16 they're there, that would be very helpful to
17 understand how grave the situation is throughout, not
18 only in New York City, but all across the United
19 States and around the world. But if there's not
20 enough understanding of how this is affecting your
21 constituents in New York City, go visit a program.
22 Do get dedicated to that. Education is vital. I
23 understand, do I have one more minute left? OK.
24 Understand that, ah, education is vital, but I'm
25 afraid that if there isn't not only a ban on, ah,

1 this diet tea it seems like it's just a slap on the
2 hand when you're facing a very large industry. So if
3 there's another step, if there's committed or
4 continual infractions of this particular bill, we
5 might need to come up with something that will really
6 sting in order for this particular tea to end as well
7 as other products, promoting their, ah, not accurate,
8 ah, weight loss claims and what the young people will
9 be able to attain by taking this. Um, it's very,
10 very important, when we don't have our youth dreaming
11 and being happy wholly with who they are, because
12 that, once again, is our most natural resource, but
13 down the tubes. They're more concerned about their
14 body shape. They're more concern about how they look
15 compared to everybody else. When they can actually
16 be grooving in their own shoes and making their body
17 the best that it can be. That is the most important
18 resource that we have in our country and we're losing
19 them to suicide rates, eating disorder clinics, we
20 are wiping away a whole generation of young people.
21 Why? Because of the mighty dollar of these very big,
22 very strong, very powerful diet-related industries.
23 Thank you.

25 RENE CAFARO: And if I may just...

2 CHAIRPERSON LEVINE: Please.

3 RENEE CAFARO: ...that I forgot to
4 mention, that I think is very important to address
5 those who are ignorant to the issue and think that
6 there's not enough statistical information to prove
7 they don't have enough complaints, that shows the
8 ignorance in what eating disorders are and what abuse
9 of these products are. You suffer in silence. That
10 is the point of abuse of these types of products.
11 Not only do we think that they're okay for us, so we
12 don't think there's anything to report, but when you
13 suffer body dysmorphia and eating disorders, you
14 aren't a statistic because nobody knows until it's
15 too late. And that is what is important. We need to
16 make action before we have the statistics.

17 EMME ARONSON: If anyone would like to
18 know more information, please go to
19 nationaleatingdisordersassociation.org.

20 CHAIRPERSON LEVINE: Thank you both for
21 that powerful testimony and for your voices, your
22 brave voices in this debate and this battle. The
23 health department stated that, the first rationale
24 they listed for opposing the bill was that they're
25 not receiving complaints about these products. How

2 likely is it, in your opinion, we'll start with you,
3 Renee, that a young person would file a complaint
4 with the New York City Health Department about one of
5 these products?

6 RENEЕ CAFARO: A quick point of order, we
7 were not sworn in.

8 CHAIRPERSON LEVINE: Actually, we only do
9 that for members of the administration.

10 RENEЕ CAFARO: OK, like I, I didn't know
11 [inaudible]

12 CHAIRPERSON LEVINE: There's a
13 presumption of trust.

14 RENEЕ CAFARO: OK, I just want to make
15 sure it counts. Um, so the question is what are odds
16 that someone will be complaining to?

17 CHAIRPERSON LEVINE: Yeah, that a young
18 person is going to find a way to complain to the New
19 York City Department of Health?

20 RENEЕ CAFARO: Um, I would say slim to
21 none from the young person. Because, again, you are
22 facing body dysmorphia and your goal, you're, you're
23 so in the bubble of trying to get, ah, get that flat
24 tummy from Flat Tummy tea, that, ah, you don't think
25 there is an issue. You will not company about it

1
2 because the only thing you might complain about is if
3 it's not working for you and you're not getting
4 skinny fast enough. Um, the odds are, because they
5 are already ill with disordered eating and, um, you
6 know, disordered use of these products, they aren't
7 going to self-identify and bring themselves in to
8 company. Now, parents might. You know, educators
9 might. But we need to educate all of them first for
10 the warning signs.

11 EMME ARONSON: We actually do need to
12 have someone on the council, on the, excuse me, on
13 the Board of Health, then that is a doctor, that sees
14 patients on a regular basis, then that has an eating
15 disorder practice. Then we will have a better
16 understanding of where we're at in the state of, in
17 New York City.

18 CHAIRPERSON LEVINE: Absolutely. So we
19 are up against an industry with a very large ad
20 budget that is using that money...

21 EMME ARONSON: Befitting New York City.

22 CHAIRPERSON LEVINE: Yes. That is using
23 that money to pay for social media, ah, validation
24 from celebrities, from influencers. Could you
25 explain the impact to someone who maybe hasn't kept

1 track with the power of social media? When someone
2 of the stature of a Kim Kardashian or Kylie Jenner or
3 Chloe Kardashian or Amber Rose uses their platform to
4 reach their millions of followers, who trust them, to
5 send the message that detox teas and weight loss
6 candies are healthful, that they can even make a
7 young person happier, ignoring all the potential
8 medical complications. What impact does that have on
9 a young person? What impact is it having on this
10 discourse in our society?

12 RENE CAFARO: Do you want to take that?

13 EMME ARONSON: I'll jump in real quick
14 and, yeah. It's a driver. It is a major, major
15 driver for making billions of dollars for these
16 companies. There are very, very few companies that
17 are making so much money and it is the, it is the
18 vehicle for these companies to, to make the money, at
19 any cost, no matter how it affects the individuals.
20 One of the issues that I see here is that there needs
21 to be parental education of these images, these
22 promotions over social media, and having more
23 conversations with the children around the dining
24 room table, um, more communication general as to
25 what's going on in their daily life. What are they

1
2 consuming? What, if they're, you know, Mom and Dad
3 are paying the bills, they must know where the money
4 should be going, or at least they should. Once the
5 parents can understand that their children, or young
6 people, teenagers, are consuming these products then
7 they have a conversation about why individuals that
8 are social media, ah, icons and celebrities are not
9 the best people to align their identity with, their
10 value system with. But when we have, um, a lot of
11 young people not having dinners at home on a regular
12 basis, there's not, the lack of connective tissue of
13 conversation, unfortunately. Ah, as this decade
14 continues going forward, we just started this decade,
15 but the last decade, with social media being
16 introduced into it. Ah, there needs to be a lot more
17 communication from teachers, parents, doctors, well-
18 informed doctors that understand that these things
19 are there and they're harmful.

20 RENEE CAFARO: That being said, I
21 actually, that's a good start and yes we need to do
22 that. But to your point specifically, what is the
23 impact these celebrities and influencers are having
24 on our children? You need to look no further than
25 the ad budgets of these companies. I mean, they're

1 smart. These companies are not going to be wasting a
2 dollar on the Times Square billboard versus, ah, a
3 Kardashian. They're choosing to spend hundreds of
4 thousands of dollars on these influencers because
5 they know that there is a return on that involvement.
6 They see it, ah, many, many industries are using
7 them. They are the billboards of today and they,
8 people flock, and there are younger children. Yes,
9 all minors, but they're starting 10, 11, 12 years old
10 following, and like sheep, buying whatever they're
11 seeing on Instagram being pushed out there by their
12 favorite celebrities, because it's being pushed out
13 as a safe, fast way to get to that aspirational goal
14 of being like that celebrity and looking like that
15 person in the magazines they want to look like. So
16 it is absolutely effective on brainwashing our
17 children into a life a body dysmorphia and abuse of
18 products like this.

19
20 CHAIRPERSON LEVINE: These celebrities,
21 Kim Kardashian, her sisters, Chloe, Kylie.

22 RENEE CAFARO: All influencers that have
23 tea tox or any of these teas should be, I echo your
24 sentiments, Council Member, shame on them. Shame on

1
2 each and every influencer, whether you have 10,000
3 followers or a million [inaudible].

4 CHAIRPERSON LEVINE: It is shameful that
5 they're abusing the trust they have with young
6 people. And they're doing it for one reason.

7 RENEE CAFARO: Money.

8 CHAIRPERSON LEVINE: They're getting
9 paid.

10 RENEE CAFARO: Lots of money.

11 CHAIRPERSON LEVINE: Whether they
12 acknowledge it or not, they are getting paid. Do we
13 have any idea what these celebrities receive for
14 their social media endorsements?

15 RENEE CAFARO: Ah, it changes, honestly,
16 um, in regards to how many followers you have and
17 what your engagement is, and on what platform. I
18 mean, a lot of this, ah, really spread like wildfire
19 on Instagram, but now we're dealing with TikTok and
20 YouTubers and all, all sorts of things out there.
21 Um, so depending on where you are in that
22 stratosphere, no different than an ad buy, ah, on the
23 streets where a bus shelter will cost you less than a
24 Times Square billboard, it's along those same lines.
25 So, um, I've heard reports of upwards of, you know, a

1
2 few hundred thousand dollars for a post for someone
3 of the likes of a Kylie Jenner. You know, people who
4 have millions of followers get top dollar, obviously.
5 But, um, there are actually micro influencers out
6 there, ah, some of which I have personally taken to
7 task because I'm ashamed of them, as people who are
8 sometimes in my circle now dealing with body
9 positivity, ah, and try to put out messaging on love
10 yourself, whatever, and I see them hawking SkinnyFit
11 tea, and hawking some of these things. Like, oh,
12 it's detox, ah, you know, you ate too much over the
13 holidays and this is a wellness thing. And I have to
14 take each and everyone to task for this, but it is,
15 um, it is wrong and it is propaganda, and you're
16 lying and you're turning your back on the people that
17 are following you, supposedly looking to you for help
18 to improve their self-image, and you're selling them
19 something that puts them into the weight loss
20 industrial complex. They should be ashamed of
21 themselves, and some of them aren't even paid,
22 they're given product. So for a couple of boxes of
23 measly tea, ah, with laxatives and chamomile, ah, we
24 are, at what cost? How many children? How many
25 adults, like myself and those that I'm still speaking

1
2 with on national platforms and universities that are
3 over the age of 18 that are still struggling with
4 this? It is a tsunami of propaganda and it's going
5 to take a lot of people to galvanize together to be
6 able to combat this, because it's a systemic issue in
7 our society that this is what we think, the one issue
8 of beauty and happiness is one look of thinness and
9 you get there at any cost possible, and that is how
10 we end up where we are.

11 EMME ARONSON: So to your point, Renee,
12 this is a catastrophic issue. It's affecting all
13 ages. It's insidiously going in at younger and
14 younger ages. Um, the cost is our future, and if we
15 don't all stop, think, and appreciate just what we
16 have nothing is going to change. And if we can stand
17 also to not take the money that's coming from these
18 diet-related industries, it is very, very difficult,
19 but it is possible. That's when real change is gonna
20 happen.

21 CHAIRPERSON LEVINE: Thank you both for
22 that message. I want to acknowledge that we've been
23 joined by fellow Health Committee member, Council
24 Member Keith Powers, who I believe has a question.
25

2 COUNCIL MEMBER POWERS: Thank you. It's
3 more of a comment. I just wanted to welcome my
4 fantastic constituent, Renee Cafaro, here, but
5 also...

6 RENEЕ CAFARO: [inaudible] Council
7 Member.

8 COUNCIL MEMBER POWERS: ...say thank you
9 for your, ah, your leadership and being a strong
10 voice around these issues. I know that, ah, I've
11 watched you really kind of become a leader around the
12 city, ah, talking about these issues. So I want to
13 say thank you and welcome. She's a fantastic
14 Community Board 5 member as well. But I also want to
15 acknowledge that, ah, the chair seems to know more
16 Kardashian names than I [laughter] believed going
17 into this hearing. So we should have a talk about
18 what your free time looks like.

19 RENEЕ CAFARO: Thank you, Council Member.

20 CHAIRPERSON LEVINE: Thank you for
21 putting it on record, Council Member. [laughter]
22 That will be in the transcript. And I also believe
23 that Council Member Holden has a question.

24 COUNCIL MEMBER HOLDEN: Yeah, I was
25 impressed also that you just rattled those names, you

1
2 didn't look at your notes, either. Um, what did you,
3 I could ask both panelists here. What did you think
4 of the administration's testimony?

5 RENEE CAFARO: Um, like I alluded to
6 earlier, um, it's very disheartening, but honestly
7 not very surprising. Um, you know, it's certainly
8 not my first time seeing an agency spin and flim-flam
9 and pass the buck. Um, but I think it's even more
10 than that. It's, it's an ignorance that we all face
11 on this issue because, um, we're all part of the same
12 society that's sort of been spoon fed for, you know,
13 no pun intended, this idea of, um, weight loss and,
14 um, you should always be, look, watching your diet,
15 and they were just permeated with this sort of fat-
16 phobic, ah, message, and, um, like I testified in my
17 own personal story, ah, doctors were part of the
18 problem, um, not realizing that there was that big of
19 an issue with my abuse of these all-natural products
20 or the fact that I was, um, essential anorexic,
21 because I was over a certain amount on the BMI scale.
22 And that has actually affected me, um, for life, and
23 I actually do believe that I would probably, my
24 natural weight now would probably be much thinner had
25 I not been on my first diet at 8, and not on all of

1 these types of stimulants and things of that nature.

2 But it's, um, like I said, this is a tsunami. This

3 has been in place, um, with weight loss ads and media

4 and Hollywood. It's all been bombarding us with this

5 idea of, of beauty and for so long it's, it's almost

6 hard to fault, um, them, I mean, aside from the fact

7 that they are the Department of Health and Mental

8 Hygiene so they should, they should know better.

9 But...

10
11 COUNCIL MEMBER HOLDEN: Well, yeah,

12 that's my point, though.

13 RENEE CAFARO: They should know better.

14 However, many don't and it's incumbent upon all of us

15 to inform them and that is why I was so impassioned

16 to come here and, and tell my story so publicly that,

17 um, you know, I haven't done really anywhere, um,

18 because it was that important for them to hear a

19 statistic, because they cannot hang their hat on the

20 fact that they don't have enough complaints. Ah, us

21 with eating disorders suffer in the dark.

22 COUNCIL MEMBER HOLDEN: But the, the fact

23 that the health department said we don't know enough

24 about these products.

25 RENEE CAFARO: Time to get to know that.

1 COMMITTEE ON HEALTH 52
2 COUNCIL MEMBER HOLDEN: How long ago,
3 when did these products come out and how long have...

4 EMME ARONSON: A long time. A very long
5 time.

6 COUNCIL MEMBER HOLDEN: Twenty years, 30
7 years?

8 EMME ARONSON: Oh, at least, I can only
9 say that, ah, since I've been working in the full-
10 figured industry, ah, there's been diet products.
11 Teas I think are a little bit newer to the game, um,
12 but to hear that CBD is being, ah, you know,
13 questioned more so than diet-related products,
14 especially being, ah, promoted, not being banned to
15 the promotion of younger people, ah, is an eye-
16 opening fact and I think that there's a lot of room
17 for improvement, ah, of understanding what we're
18 dealing with, what families are having to deal with
19 every single day when a loved one has to an eating
20 disorder clinic and/or dies from an eating disorder,
21 um, because of the onset at an early age with diet-
22 related products. And there's a lot of doctors that
23 don't know or understand what an eating disorder is
24 or how it really can affect an individual. It's time
25 to really, all doctors need to understand how serious

1
2 this issue is, and I'm glad to hear that the doctor
3 that testified earlier is open and ready to learn
4 more, which is excellent, excellent for the State of,
5 you know, for New York City.

6 RENE CAFARO: They also passed the buck,
7 though, saying that eating disorders are mental
8 illness, which in a lot of ways they are...

9 EMME ARONSON: Um, yeah.

10 RENE CAFARO: Ah, but, you know, I do a
11 lot of mental illness parity as well and I think that
12 that's sort of almost a misnomer. Um, I don't
13 consider it to be a mental illness for me, but really
14 a behavioral problem, um, that it wasn't, its not the
15 same as having clinical depression. You didn't just,
16 you don't have like a problem with your brain
17 chemistry and all of sudden you want to buy SkinnyFit
18 tea. You are brainwashed by the stuff. It is the,
19 it is the products that are to blame.

20 EMME ARONSON: Right.

21 RENE CAFARO: It is the marketing that
22 is to blame.

23 EMME ARONSON: Eating disorders are
24 considered a mental illness within the medical field,
25 yeah, yeah.

1
2 RENEE CAFARO: Yeah, but I don't like the
3 idea that it's just seen as, well, like that's just
4 a, these, and this is separate. This is not
5 separate. You know, one causes the other...

6 EMME ARONSON: Right.

7 RENEE CAFARO: And/or one exacerbates the
8 other. So they are inextricably linked and I think
9 that's really important to have that on the record.

10 COUNCIL MEMBER HOLDEN: Yep. I just want
11 to touch upon what I mentioned. I had questioned the
12 commissioner about educating the parents, because
13 they mentioned this Health Smart Nutrition Unit in
14 our schools, but they didn't know if it was a calls.
15 They didn't know if it was, you know, one period of
16 the day. They didn't know, I don't even think they
17 know what is taught in there. They say body image,
18 but I don't think they've touched on this, this
19 problem, that you said has been going on for years
20 and years.

21 EMME ARONSON: Decades.

22 COUNCIL MEMBER HOLDEN: Decades, and, but
23 social media, social media has, you know, blown this
24 up I think way out of proportion...

25 EMME ARONSON: Yes.

2 COUNCIL MEMBER HOLDEN: ...I would
3 imagine. That's how, ah, that's how the, you know,
4 the stars get involved, the celebrities get involved
5 in this. But it, it seems to me that the health
6 department is clueless.

7 RENEE CAFARO: Yes.

8 EMME ARONSON: It would be great to,
9 excuse me.

10 COUNCIL MEMBER HOLDEN: No, I'm sorry,
11 you want?

12 EMME ARONSON: It would be wonderful to
13 see an improvement on what is taught is within
14 schools, ah, as well as having a campaign structured
15 strategy for bus stops and buses, and have a full-
16 court press on the education of what is happening in
17 the, the diet-related industry and how it's affecting
18 families, whether it's the parents, whether it's the
19 children, whether it's teens, and have a real
20 conversation and finally dig deep, dig right in and
21 get great statistics to be able to share. Get some
22 shocking information.

23 COUNCIL MEMBER HOLDEN: But at least
24 something that the schools can give out...

25 EMME ARONSON: Oh, yes.

1 COMMITTEE ON HEALTH 56
2 COUNCIL MEMBER HOLDEN: ...and the parents
3 would get it, even if it's mailed, but certainly
4 education on this topic is very, very important. I
5 didn't know about it.

6 EMME ARONSON: Repeating, repeating,
7 repeating, repeating. Every time that we hear a
8 song, for example...

9 COUNCIL MEMBER HOLDEN: Right..

10 EMME ARONSON: ...that we hate, but then
11 you hear the song over and over and over again you
12 suddenly say, oh my God, I love that song. When we
13 see imagery or when we see, um, certain, um, imagery
14 that is really, ah, not attainable for most people
15 and we see those images over and over and over again,
16 something happens psychologically in every one of the
17 teenager's brains. If we can have more inclusive
18 conversations about what body image is all about, if
19 we could have more education in schools, and, once
20 again, imagery, over and over again, whether it's
21 billboards, buses, um, bus stops, when we can walk
22 around in our everyday life and we can see people
23 with different skin textures and tones, different
24 body shapes, representing, ah, the idea that all is
25 OK. When we can see that more so than just the

1 extreme ideals of beauty, that's when things, that's
2 when we start to question, wait a minute, that's not,
3 I'm not going to believe in that one thing.

4 COUNCIL MEMBER HOLDEN: Yeah, that's the
5 larger picture, obviously.

6 EMME ARONSON: Yeah.

7 COUNCIL MEMBER HOLDEN: And that's, that
8 will take more time. But the big thing here is
9 telling parents what to recognize, that they're kids
10 are using these products and they're using them, be
11 alert that this is a bad sign. This is a bad, these
12 are bad products.

13 RENEE CAFARO: If I can just, you know,
14 address that. Um, I think also, this is focusing on
15 a ban for minors because, um, that is what makes the
16 most sense right now. But, um, if we can just get
17 into the schools, or like I said earlier, I want to
18 call up DCA, um, and other colleagues to look
19 towards, um, how we're going to regulate some of the
20 marketing, because it's not just about the kids. A
21 lot of times this, you know, these products, get into
22 the home through the parents. Ah, that certainly was
23 the case for me and I know it's the case for many,
24 and it's like they need to be educated for their own
25

1
2 purposes, to know that this is unsafe. Like
3 anything, like I mentioned vapes earlier that were
4 supposed to be seen as safe. We clearly know that's
5 not true and we've made, took an action. Um, like
6 many things we see we take action on. All
7 generations need to be told of the risks. We can't
8 make an informed decision on what we're putting in
9 our own bodies, putting in our homes, given our
10 children access to. Um, we can't police our
11 children. We also can't have something for yourself
12 as an adult and, and keep it away from your children
13 unless you know that it's harmful. So this can start
14 in the schools, I think that's a really easy way we
15 can deal with this and, um, having a counter, ah, ad
16 campaign also is something we can, we can do without
17 a lot of fuss, hopefully. And if the schools are
18 looking for some people that know, I think you've got
19 your first two lecturers here [laughs], I'm more than
20 happy...

21 EMME ARONSON: There's a lot more behind
22 us, too.

23 RENEE CAFARO: There's so many more
24 behind us that can go and inform everyone, because if
25

1 they're looking for a wealth of resources, um, it's
2 out there. You just need to know where to look.

3
4 COUNCIL MEMBER HOLDEN: Well, thank you
5 both for educating us, and you're terrific. I want
6 to echo Council Member Powers' praise, because this
7 is a very important topic and we, I'm glad that you
8 came down 'cause this was a terrific education. I
9 want to thank you Chair, for this topic. Thank you.

10 RENEE CAFARO: Thank you.

11 EMME ARONSON: Thank you very much,
12 Council Members.

13 CHAIRPERSON LEVINE: Thank you, Council
14 Member Holden. And I want to thank both of you for
15 your leadership, for your bravery, and standing up
16 for the young people of this city and country who are
17 faced with an onslaught of propaganda, pushed by
18 people who should know better, who are spreading
19 misinformation for money, like the Kardashian sisters
20 [laughter], Kim, Kylie, Courtney, Chloe, and Kendall.
21 Did I make up a name?

22 EMME ARONSON: I think she's a Jenner.

23 [laughs]

24 CHAIRPERSON LEVINE: And we are going to
25 continue to call them out and we're going to rely on

1
2 you as influencers who are spreading a positive,
3 accurate measure, and we're going to continue to push
4 this bill. We're going to push this city to
5 acknowledge the ways in which these products are
6 harmful to young people and the ways in which they
7 feed the damaging narrative, which equates
8 healthfulness with thinness. And we're going to
9 partner with you in this fight. Thank you to both of
10 you.

11 RENE CAFARO: Thank you very much.

12 EMME ARONSON: Thank you very much.

13 CHAIRPERSON LEVINE: Thank you. And
14 we're now going to move on to our next panel,
15 including Kerry Donohue, Iman Hariri-Kia, and Sarah
16 Hamil-Smith.

17 IMAN HARIRI-KIA: Hi.

18 CHAIRPERSON LEVINE: Welcome, and thank
19 you for joining us, and please, you can start us off.

20 IMAN HARIRI-KIA: Thank you so much for
21 having me, ah, I'm so honored that I get to share my
22 experience with you all and grateful that you've me
23 the platform to just talk a little bit about what
24 this looks like in practice, not theory. My name is
25 Iman Hariri-Kia. I'm a writer, editor, and activist.

1
2 I began speaking out about my own experience with
3 detox teas and laxative-based products last year in
4 an article for *Teen Vogue*, and since that have gone
5 on to write for several other outlets and speak
6 publicly on several different TV shows as well. Um,
7 I'm hoping that I can read a statement that I wrote.
8 I'm much more eloquent...

9 CHAIRPERSON LEVINE: Please.

10 IMAN HARIRI-KIA: ...in a written
11 testimony than in person. When I was 16 years old a
12 friend handed me a green box that would go on to
13 irrevocably alter the course of my life. As a junior
14 in high school who was simultaneously applying to
15 colleague, navigating weird social cues, and
16 attempting to conform my figure to better fit in with
17 my peers, I already felt as if I had no control over
18 my trajectory. I was also heavily impacted by a bad
19 bout of middle school bullying, which made me feel
20 more monstrous than I believed humanly possible. You
21 see, I grew up in New York City on the Upper East
22 Side surrounded by mostly homogenous category of
23 white thin children who never failed to remind me
24 that I was an other. Hyper-aware of my darker
25 complexion, the abnormal amount of hair that coated

1 my face, arms, and legs, and my exotic name, I did
2 everything I could to blend in as much as possible.
3 Chasing the American standard of beauty became an
4 obsession and my weight a concrete number over which
5 I could exert autonomy in an otherwise chaotic world.
6 It wasn't my Instagram feed or a prolific celebrity
7 who introduced me to detox teas. It was a trusted
8 friend. We were at a neighborhood bodega when she
9 pointed out a brand called Ballerina Tea, nestled in
10 an unassuming position between the green tea and the
11 Earl Grey. She confessed to me that she had begun
12 drinking the teas in order to lose weight. I studied
13 the box. It didn't look unsafe. It was marked as a
14 cleanse, which was a word that I associated with
15 health, not illness. My friend explained that these
16 teas were the secret to how ballerinas stayed so
17 thin. I thought about the grace, poise, and delicacy
18 with which dancers carry themselves and realized that
19 that feeling, one of being so small, so fragile, was
20 one that I craved, too. So, I bought a box, took it
21 home with me, and drank a cup before bed. Now, I
22 expected to lose weight almost instantaneously. But
23 what I actually experienced was a horrible, gut-
24 wrenching cramps followed by a disgusting round of
25

1 explosive diarrhea the next morning. Had I read the
2 label more carefully and googled the ingredients, my
3 body's reaction would have been apparent. The key to
4 the detox tea's flavor was an herb called senna
5 glycoside, which also happens to be the main
6 ingredient in many stool softeners. I had
7 essentially unknowingly chugged a mug full of liquid
8 laxatives. But the truth was once I was done I felt
9 a wave of ecstasy wash over me, one that I had never
10 experienced before. It was a feeling of being full
11 of my own emptiness, complete and utter emptiness. I
12 could feel my hip bones protruding. No matter how
13 hard I tried, I couldn't expand my stomach. Thanks
14 to these teas I had finally accomplished what I had
15 set out to do in my pubescence, take up as little
16 space as possible. Now, senna glycoside is not, to
17 my knowledge, an addictive substance, and no,
18 drinking one cup of tea won't change your life
19 forever. But when you consciously or subconsciously
20 struggle with disordered eating or body dysmorphia
21 and get even a small taste of that faint, exhausting,
22 delicious emptiness any amount of weight you perceive
23 you as gaining or bloating you imagine will be
24 exacerbated. A cookie crumb can feel like it weighs
25

1
2 50 pounds. Your mind can trick you into believing
3 that you're sucking up all the air in the room. So
4 you turn back to the thing that made you feel good
5 about yourself and, more importantly, give you some
6 semblance of control. For me that was the tea. I
7 needed to pursue that feeling for five more minutes,
8 even if, and I did not realize this then, it would
9 affect my body for a lifetime. And so I took the tea
10 every single night before I went to bed. And like
11 clockwork my body would eject whatever I had eaten
12 the day before as soon as I awoke. I followed this
13 pattern for almost two years, and coupled with the
14 restrictive diet and near-incessant exercise I lost a
15 lot of weight. But instead of asking me if I was OK,
16 my friends and family told me I looked great. What's
17 your secret, they wanted to know. Their
18 encouragement and validation, but also the suggestive
19 manner in which they hinted at something illicit, was
20 all I needed to hear in order to keep my voice and my
21 vice under wraps. But that all came to a head two
22 years later when I went away to colleague. Although
23 I had calculated how much tea I would need in advance
24 of leaving home, I hadn't been prepared for how my
25 change in lifestyle would impact my body. I was

1 eating differently and sleeping differently. My
2 routine disrupted, I began struggling to digest
3 meals. It felt as if every bite of food would tickle
4 my throat, just waiting to come back up, so I ate
5 smaller and smaller portions throughout the day, an
6 apple here, a [chyme] bar there, but my body was no
7 longer gaining the nutrients it needed and I was
8 getting sicker and sicker. One second I'd be
9 chatting with a friend in the library and feel as if
10 I needed to cough. The next, I had unwilling
11 projectile vomited all over my sweater. It felt as
12 if my insides had turned against me, and when I went
13 home to spend Thanksgiving with my family and my
14 attempt at participating in our annual meal resulted
15 in me crying on the bathroom floor. My mother forced
16 me to go see a specialist and get to the bottom of
17 what was wrong. Let me be as clear as humanely
18 possible. Consistently consuming detox teas in my
19 adolescence absolutely destroyed my digestive system.
20 Over the course of two years I was diagnosed with two
21 chronic digestive illnesses, first with celiac
22 disease, followed by gastroparesis. Because of the
23 laxative effect of the teas, the nerve endings that
24 line my stomach are permanently damaged and I digest
25

1
2 food so slowly that I have to be constantly mindful
3 of what, when, and how I put everything into my body.
4 I take daily medication to help with the acidity of
5 having an empty stomach for hours at a time. If I go
6 even a day without taking my medication I experience
7 writhing pain in my abdomen, heartburn, reflux. It
8 basically feels like my digestive tract has been set
9 on fire. Some days I get so bloated and
10 uncomfortable that I struggle to get out of bed. But
11 the worst part, definitely, is the involuntarily
12 spitting of my meals, which can happen at any time
13 with very little warning. Quite frankly, it's
14 disgusting, and it's a demeaning illness that's
15 difficult to manage and I will have to do so for the
16 rest of my life, but I am in recovery and mentally I
17 am healthier than ever before. I now see my body as
18 a source of strength because I put it through so much
19 and it still stands tall. But not all have been this
20 lucky. Since speaking out about my experience, I
21 have been contacted by so many people who confess to
22 be struggling with what I have personally referred to
23 laxative-based bulimia. These people are young and
24 old, male and female. They range from every race,
25 size, and class. But they all have one thing in

1
2 common. They've been struggling in silence and in
3 shame, unaware that anyone else had identified this
4 as real problem or real illness, a real form of
5 disordered eating. These products are sold in
6 grocery stores, pharmacies, and bodegas, hidden in
7 plain sight amongst everyday household items. They
8 are in our mothers' kitchen cabinets and in our
9 little sisters' backpacks. I was just a child when I
10 made a decision that I had no idea would impact me
11 for the rest of my life. And I had no clue what I
12 was doing to my body. And I have to live with the
13 consequences of my ignorance until the day I die. No
14 one else's child should have to bear that burden, and
15 no adult should shoulder this secret shame alone. A
16 bullet on its own is just a bullet, but when locked
17 and loaded we all know it can escalate into something
18 much more deadly. If you're going to examine the
19 impact of these products it would be irresponsible
20 not to look closely at the context in which they are
21 used. It's time to step back and take in the big
22 picture before it's too late. Thank you.

23 CHAIRPERSON LEVINE: Whew, my goodness.
24 Iman, thank you for speaking out. I know that can't
25 be easy, but I think your bravery is inspiring and

1 will inspire other young people to confront this. I
2 think you're doing a lot of good by sharing your
3 struggle, and we're grateful that you're here to get
4 that story on the record. Thank you. Please.

5
6 KERRY DONOHUE: Good morning. My name is
7 Kerry Donohue and I'm here today on behalf of the
8 National Eating Disorder Association to express our
9 strong support for New York City bill number 1485.
10 Thank you to Chairperson Levine for, and all the
11 members of the Committee on Health for the
12 opportunity to speak today. Um, and thank you to all
13 the advocates for speaking out and sharing your
14 stories on this really important issue. Um, I
15 currently serve as the public policy manager at the
16 National Eating Disorder Association, which is also
17 known as NEDA. NEDA is the largest national
18 organization supporting families and individuals
19 affected by eating disorders and is based right here
20 in New York City. NEDA serves as a catalyst for
21 prevention, cures, and access to quality care. I am
22 proud to be with you here today to speak about the
23 importance of this legislation and its impact on the
24 eating disorders community. First, I would like to
25 thank you, Council Member Levine, for your

1 sponsorship of this important initiative. We really
2 appreciate your leadership and working to protect
3 minors and other individuals across the city by
4 limiting access to the senna- and saffron-based
5 products. These products are often included in
6 things like dietary supplements and sold with claims
7 of weight loss. They are often sold without evidence
8 supporting their efficiency or safety, and pose a
9 particularly concerning risk to those struggling with
10 or at risk for developing an eating disorder. Eating
11 disorders, such as anorexia nervosa, binge eating
12 disorder, bulimia nervosa, and others are extremely
13 seriously, potentially life-threatening conditions.
14 Thirty million Americans will suffer from an eating
15 disorder at some time in their life. In New York
16 City the number of people currently struggling with
17 an eating disorder is estimated to be approximately
18 848,000. Eating disorders have the second-highest
19 mortality rate of any mental illness, right behind
20 the current opioid crisis. As you mentioned earlier,
21 eating disorders do not discriminate. They affect
22 people of all genders, races, ages, and socioeconomic
23 backgrounds. Research does show that weight loss
24 products, such as detox teas and other dietary
25

1 supplements sold for weight loss can be a catalyst
2 for these life-threatening illnesses. Thirty-five
3 percent of normal dieters progress to pathological
4 dieting. Of those, 25% will progress to partial or
5 full syndrome eating disorders. These products,
6 including those with senna and saffron, often give
7 false claims about a miracle weight loss, which can
8 be very harmful to those with struggling with eating
9 disorders, causing some individuals to aim for
10 unreachable and frankly dangerous expectations.
11 Recent research that has just been published this
12 money from the Harvard School of Public Health found
13 that adolescent and young adult women who used over-
14 the-counter diet pills or laxatives for weight
15 control were six times more likely than peers who did
16 not use these products to be diagnosed with an eating
17 disorder within one to three years of beginning use
18 of these products. In addition, any product that
19 encourages people to intentionally lose weight is
20 directly perpetuating weight stigma, discrimination
21 or stereotyping based on person's body size. For
22 people with eating disorders discrimination or the
23 fear of discrimination if their weight increases is a
24 necessary result of improved health and recovery can
25

1
2 be a matter of life and death. NEDA would also like
3 to emphasize the potential of these and similar
4 substances to contribute to poor body image in youth,
5 which has been correlated to a number of problematic
6 outcomes, including suicidality. NEDA views this
7 initiative as an important step towards the
8 prevention of eating disorder in the City of New
9 York. For these and other reasons, NEDA asks the
10 committee to support this important initiative to
11 protect residents of New York City from senna- and
12 saffron-based products and to take steps to keep
13 these products out of the hands of our youth. Thank
14 you for your time and consideration, and thank you
15 again for the opportunity to speak today.

16 CHAIRPERSON LEVINE: Thank you, Kerry. I
17 just have to clarify a number that you shared with
18 us. The number of people currently struggling with
19 an eating disorder in New York City you cited as
20 848,000.

21 KERRY DONOHUE: That's an estimated
22 number, but yes.

23 CHAIRPERSON LEVINE: Ah, that is an
24 astounding figure. We understand it's an estimate,
25 but any number anywhere close to that it's alarming,

1 and it's a reminder that this, this is not just a
2 national challenge, it is a New York City challenge,
3 which is why we must confront it here in the City
4 Council. Thank you very much. Sarah?

5
6 SARAH HAMEL-SMITH: Hi everybody, Council
7 Member Levine. I'd like to thank you so much for
8 bringing up this very important issue that impacts so
9 many. Just as Renee was saying before, a lot of
10 people who suffer with eating disorders do so in
11 silence, and a lot of times people's parents
12 encourage them in these unhealthy behaviors because
13 that's what pop culture says, what the right thing to
14 do is, these parents think that they're helping
15 children. Um, my name is Sarah Hamel-Smith. I am a
16 plus-size model, digital influencer, [tadex]
17 presenter, and story teller, and my professional
18 background previously was advertising and public
19 relations. So I understand the power of marketing
20 and the way that marketing can impact people's
21 behavior. I was body shamed for most of my life and
22 as a child my mother gave me, when I around 12 I
23 started to gain some and my mother gave me these
24 detox teas to take, thinking that she was helping me.
25 Um, this progressed into, as I got older, an eating

1 disorder. I was anorexic, I was bulimic. I used to
2 pass out in school and faint. Um, and all, everyone
3 surrounding me ever told me was that they were proud
4 of me and proud that I was losing weight and proud of
5 how beautiful I was looking. Um, I spent most of my
6 life feeling ashamed of myself, ashamed of my body.
7 Regardless of what I accomplished in my professional
8 life or my personal life, nothing mattered. All that
9 mattered was that my body was fat and I wanted to be
10 thin, um, until in my mid to late twenties when I
11 discovered, funny enough, a group of women on
12 Instagram that were plus-size models, and I had this
13 transformative experience where I realized oh my God,
14 like nothing's wrong with me, it's the marketing.
15 It's the marketing. It's pop culture telling people
16 that something's wrong with them when nothing is, and
17 forcing perfectly healthy people to adopt these
18 extremely unhealthy behaviors under the guise of
19 health. So I dedicated my life to empowering and
20 inspiring others and educating others about these
21 different issues, um, which is what brings me here
22 today. I just, sorry, let me check my notes.

24 CHAIRPERSON LEVINE: You're doing great.

1 SARAH HAMIL-SMITH: [laughs] Um, oh, I
2 just wanted to share something. Recently I went to
3 the doctor for an annual checkup and everything came
4 back perfectly health. The doctor actually shook my
5 hand and said congratulations, Sarah, you've achieved
6 great health, but you need to lose weight. And I
7 wanted to share that today, just to bring up how
8 systematically ingrained this unproven correlation
9 between thinness and health is in society, like the
10 doctors, a doctor is literally telling me
11 congratulations, you've achieved great health, and in
12 the same breath telling me that I need to lose with,
13 when every, every single thing that was checked, all
14 the things that say that my body's perfectly healthy
15 are coming back clean, she's telling me that I still
16 need to lose weight. And it's so damaging. I know
17 people who have been refused gynecological
18 examinations because of their weight. I know people
19 that have been refused care from doctors. I have a
20 friend that had a tumor in her brain that they didn't
21 diagnose and took too long to diagnose because
22 everything was just like, oh you're fine, you just
23 need to lose weight. And so this pop cultural issue
24 of the way that society views that fat is so bad, and
25

1
2 it's extremely damaging. To get back to the issue
3 that we're discussing here today, it is an extremely
4 important conversation. As we can see, it has many
5 ripple effects. I think that it's so important that
6 we're here talking about this. This is a great,
7 great place to be, to be starting, to really take a
8 look at what are we promoting healthy, what are we,
9 what are we providing to children as, as being
10 healthy? What are we seeing? What are we educating
11 parents? What are we telling parents that this is
12 something good? Like I said, my mother gave me this
13 tea. Renee's mom gave her this tea. Um, you know,
14 it's really frightening, and again I want to
15 congratulate all of you for bringing up this very
16 important conversation.

17 CHAIRPERSON LEVINE: Thank you so much,
18 Sarah, ah, for being with us and for sharing your
19 story. It's so important. Um, Iman and Kerry
20 referenced the fact that this condition can affect
21 young people of any background, of any race, of any
22 gender identity. I wonder if you could speak to the
23 particular challenges that people who don't, who, ah,
24 who might not be, ah, young white women would face in
25 seeking treatment, ah, for these disorders.

1
2 IMAN HARIRI-KIA: Well, you have to
3 understand that the conversation around disordered
4 eating is not as, I guess, evolved or pervasive as
5 the conversation around mental health and mental
6 wellness. Women, I'd say that the majority of women
7 that I know have struggled with some form of
8 disordered eating or body dysmorphia, but if they
9 don't have the resources, if they aren't given the
10 education or the environment at home to openly
11 discuss how they feel about their bodies and
12 themselves they're not going to be able to diagnose
13 themselves or understand what they're going through
14 or get the help that they need. So additionally
15 women of color from a lower-income background is, ah,
16 statistically less likely to be taken seriously by
17 medical care professionals. They, um, are less
18 likely to be heard, um, by schools and by educational
19 professionals. Ultimately, like this is a problem
20 that isn't being broadcasted and this conversation is
21 so, um, is so overarching that people think of it as
22 a part of the daily landscape and not really
23 something that is being discussed in courtrooms.
24 It's, it's commonplace. People don't even, ah,
25 people don't even blink when discussing things like

1
2 diet supplements or detox teas, and it would be
3 foolish to think that only the few women that are in
4 positions of privilege and power that speak up are
5 the ones who are suffering. That is not the case and
6 they only are using their platform to, I suppose,
7 raise the voices of those around them for more
8 marginalized backgrounds and communities.

9 CHAIRPERSON LEVINE: Thank you. Iman and
10 Sarah both, you both discussed the role that social
11 media played and, and your mistaken impression that
12 these products were healthy. I wonder if you could
13 speak more broadly about what this means for young
14 people that celebrities with millions of Instagram
15 followers are accepting money to push these products.
16 What impact does that have on young people?

17 IMAN HARIRI-KIA: Well, I actually, in my
18 testimony, mentioned that in my personal experience
19 this was brought to my attention from a friend, not
20 social media. This, my problem outdated the
21 invention of Instagram, as well as the popularization
22 of other social media platforms. Um, I have been
23 able to bear witness to their normalization through
24 the use of streaming services and online platforms.
25 Ah, but I just wanted to clarify that I think the

1 fact that I was able to walk to a convenience store
2 on my block and buy 50 boxes of tea to bring home for
3 a semester of college is, ah, suggests that this
4 problem is overarching, larger than social media, and
5 if the internet were to block out tomorrow, God
6 willing, we would all still be struggling with
7 tackling this issue because it really, it looms so
8 much larger than our smart phones. With that being
9 said, ah, I think that the effect of social media on
10 the mental health of adolescence is one that, um,
11 touches every single, every single conversation that
12 you will engage in when you're talking about the
13 health [inaudible], but I think part of the issue is,
14 um, older adults thinking that, thinking that, um,
15 it's as simple as a Kardashian Instagramming about
16 the teas. I mean, it's, it's not that simple. You
17 have to remember that, um, health and wellness and
18 fitness Instagrammers with much smaller followings
19 have been posting about products like these for
20 decades and, um, as long as Instagram has been
21 around, and those people have much smaller, more
22 dedicated followings. If anything, I'd say that, um,
23 Gen Z is more quote unquote woke and they, they can
24 see through the propaganda of people like the
25

1
2 Kardashians because of, they've been called out for
3 so many missteps, cultural appropriation, um, the
4 perpetration of diet culture, etc. It's more so the
5 nano influences, in my opinion and in my experience,
6 and the friends and the family that can have this
7 pervasive effect. And also when we're talking about
8 social media I think the, the greater danger that we
9 have to be aware of is that it just further
10 perpetrates this, um, ideal of the, ah, female beauty
11 standard. And I have a 13-year-old cousin who is
12 constantly trying to look like the, um, the
13 standardized Instagram model of beauty and I see her
14 sort of contorting her figure and her appearance to
15 fit in with that image and I think that this is
16 something that, again, has outdated Instagram because
17 I grew up without Instagram. It was invented when I
18 in high school, and I still felt like I needed to
19 conform to a different standard of beauty that
20 revolved around thinness. So social media and
21 Instagram is only a product of the program, not the
22 problem itself. But, um, yeah, I realize I rambling,
23 but I would just say that I believe that if you have
24 a platform you have a responsibility to educate
25 yourself about what you are selling.

1 COMMITTEE ON HEALTH 80
2 CHAIRPERSON LEVINE: Thank you. I
3 believe Council Member Holden has a question.

4 COUNCIL MEMBER HOLDEN: Yes. Thank you
5 all for your testimony. Again, it's an education,
6 and I want to say that just the fact that they're
7 marketing a tea, because we're all taught that teas
8 are good. We're all taught that teas are, you know,
9 are healthy. So by putting a drug like this, a
10 laxative in a tea, I think that's irresponsible. But
11 the marketing, or the warning labels. I don't, I mean,
12 were the warning labels, did they tell you that you
13 shouldn't drink this every day, or?

14 IMAN HARIRI-KIA: I can't speak to what I
15 looked at and read on the box, um, when, I was 16 at
16 the time and I don't remember the first time I saw
17 it. But it was as unassuming as possible. Um, it
18 was marketed as a cleanse, a health product. Um, I
19 did not feel appropriately warned about what would
20 happen to my body if I took them consistently. And I
21 also want to note that I live on Houston and Mott and
22 I recently went to a deli around the corner from my
23 apartment and I looked for the exact same brand of
24 tea that destroyed my digestive system years ago. It
25

1
2 was still being sold between the green tea and the
3 Earl Grey.

4 COUNCIL MEMBER HOLDEN: Right, yeah, so
5 that's exactly my point. But I just want to say I
6 admire your testimony. Your testimony is well
7 written. It's, it's wonderful. I think it should be
8 required reading in our schools, because this is, no,
9 this is a very important point. This is an amazing
10 story and I'm sorry it happened to you. But I
11 really, really want to thank you for coming today
12 and, and warning other people about this situation,
13 and parents should also read this. But I think it
14 should, we should give it to the Department of Health
15 to pass it around, with your permission. But it
16 should be, everybody should be aware of this, and
17 thank you so much, all of you. Thank you.

18 IMAN HARIRI-KIA: Thank you.

19 CHAIRPERSON HOLDEN: Sure.

20 IMAN HARIRI-KIA: And I just wanted to
21 quickly add that I think the most important, I'm so
22 pro this ban because I think ultimately while it's
23 important that parents are educated about the warning
24 signs and what to look for and the brands of tea and
25 when in the day and routinely their children are

1
2 drinking said teas, I gaslit my parents for years
3 about what was in these teas and I was lying to
4 myself as well as them. So I think, I'm very for a
5 complete ban on the sale of these products to minors.
6 I think it's the most effective way to stop them from
7 purchasing the teas. And, yes, I wasn't expecting
8 the, um, administration's testimony to make me so
9 emotional, but as I was listening to them discuss
10 what I see as their negligence it made me realize how
11 so many are suffering while we sit in here in this,
12 in this small room and discuss the fate of so many,
13 um, bright and [opportunistic] individuals. So thank
14 you.

15 CHAIRPERSON LEVINE: Thank you. And at
16 the end of the day, we are here to consider a
17 legislative proposal which would do exactly what you
18 said. Make it so that a 16-year-old in the city
19 can't just stroll into a store in their neighborhood
20 and pick up dozens of these boxes...

21 IMAN HARIRI-KIA: Absolutely.

22 CHAIRPERSON LEVINE: ...as you yourself
23 related having done. This is about protecting kids
24 from easy access to products which are not good for
25 them, which feed the kind of terrible body image

1
2 stereotypes which contribute to low self-esteem,
3 which contribute to eating disorders, and which are
4 part of a broader corporate effort to push only one
5 type of body image as the ideal of beauty for young
6 people. And we are taking a stand against that and
7 in favor of a concrete proposal to protect the young
8 people of New York City. And despite the very
9 disappointing response of the administration today,
10 we are not going to back down on this fight. We're
11 gonna to push as the city's legislative body to pass
12 this bill on behalf of young people in New York City.
13 Thank you to all of you for adding your voices to
14 this debate. It was incredibly important and
15 powerful to have you on the record. I admire your
16 bravery. Thank you very, very much. And this will
17 conclude our hearing. [gavel]

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C E R T I F I C A T E

World Wide Dictation certifies that the foregoing transcript is a true and accurate record of the proceedings. We further certify that there is no relation to any of the parties to this action by blood or marriage, and that there is interest in the outcome of this matter.



Date February 2, 2020