

## Nutritional Food Labelling Current thinking and practice

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For over two decades health and consumer organisations have been urging food companies and policy-makers to introduce a common standard for the presentation of nutritional information about food and drink products, designed to be quickly and readily understood by shoppers.

The Coronary Prevention Group in the 1980s defined 'high', 'medium' and 'low' levels of key nutrients in food – principally fat, sugar and salt – and the concept was adopted by a few food companies but waned over time.

In 2004 with growing concern about the rising prevalence of obesity and other diet-related diseases, and the increase in the amount of ready-prepared, processed foods being consumed in the UK, the Government's *Choosing Health* white paper (2004) called for clear front-of-pack nutritional labelling.

In response, the Food Standards Agency (FSA) developed proposals for a 'traffic-light' front of pack (FOP) labelling system, using colour coding to identify foods with low, medium or high amounts of four key nutrients – total fat, saturated fat, sugar and salt. The aim of the system was to increase clarity for consumers and also provide an incentive to manufacturers to reformulate their products.

The FSA Board agreed a series of four 'core principles' within which manufacturers and supermarkets may develop their own labelling with an individual look and feel, as long as their schemes:

- Provide separate information on total fat, saturated fat, sugar and salt
- Use red, amber or green colour coding to indicate whether levels of nutrients are high, medium and low
- Use nutritional criteria developed by the FSA to determine the colour code
- Give information on levels of nutrients per portion of product

These principles should be applied labelling of the following products sandwiches; prepared or ready meals; burgers and sausages, pies, pasties and quiches; breaded, coated or formed meat, meat alternatives, poultry, fish or similar products; pizzas and breakfast cereals.

Food companies expressed concern that traffic-light labelling would lead to many products showing 'red' signals on them – including products labelled as 'healthy' such as vegetable spreads. The problem highlights the industry's concerns about differentiating similar products where, for example, one formulation may have lower levels of fat than another, but there is little or no gain to public health because even the lower fat version of the product has a considerable amount of fat. It may be argued that in relative terms it is better for consumers to choose one product compared to another, but in absolute terms both products should be consumed less.

An alternative to a traffic-light labelling scheme is to provide details of the quantities of nutrients present in a product in numerical format, along with the quantities needed to ensure adequate health for an average person, and leave consumers to calculate what they should buy in order to meet their own optimal dietary pattern.

In 2005, an industry body, the Institute of Grocery Distribution (IGD), published proposals for values that extended the already existing set of Recommended Daily Allowance figures (defined under an EU directive for vitamins and minerals on food labels<sup>3</sup>) to cover the major nutritional components already being put on many food labels: energy, fats, sugars, salt and dietary fibre. These were called Guideline Daily Amounts (GDAs). These were based on COMA and SACN values however both COMA and SACN explicitly stated that the reference values were to be used as pragmatic population targets for public health policies, and were *not* to be used as advice for individuals.

Research commissioned by the FSA unsurprisingly showed that both traffic lights and GDAs were more effective than no FOP scheme. Older adults (aged over 65 years), people with lower levels of educational attainment and those from social classes C2, D and E are less likely to be able to accurately interpret FOP labels. The research also suggests that certain minority ethnic groups have difficulty interpreting them (though because of the sample size, this finding is indicative rather than substantive).

Traffic light labelling was adopted by a number of the UK's major retailers but not, for example, TESCO or the major food manufacturers.

### **Calorie Labelling**

These recommendations cover food consumed at home but the average person eats one in every six meals out of home and, if snacks are added in, men consume about a quarter of their calories when eating out and women a fifth.

To tackle this issue the FSA launched a pilot calorie scheme in restaurants in July 2009. In response, 21 catering companies introduced calorie information in 450 stores across the UK. However, 1 year on, only five firms opted to continue.

### **EU**

Food labelling is regulated at a European level by Directive 2000/13<sup>ii</sup>. Following an EU consultation paper on a future EU Health Strategy, *Enabling Good Health for All*<sup>iii</sup> (2004). The European Commission published a draft regulation on nutritional food labelling early in 2008. It proposed that it would be mandatory to put a limited amount of nutritional information FOP of food

Its rationale was:

- To simplify and modernise existing regulations
- Help consumers choose a healthier diet
- Incentive for manufacturers to reformulate

- Current divergence of labelling schemes in EU region – may constitute a barrier to trade

In July 2010, the European Parliament (following well reported industry lobbying) voted in favour of mandatory front and back of pack labelling; against traffic light schemes; supported GDA schemes and voted to delete national schemes. On a more positive note, they voted to keep nutrient profiles. The Council of Ministers will now adopt a Common Position on this dossier.

### **Current position**

Following the election, the new government's position is yet to be determined, but it is not currently promoting the FSA scheme. Changes in departmental policy responsibility mean that labelling functions are now shared between the FSA, DEFRA and DH in England but remain with the FSA in the devolved countries.

The government negotiating position in respect of the proposed Food Information Directive is not yet set. It is complicated by the above changes in departmental responsibility.

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<sup>i</sup> Department of Health.2004 *Choosing health: Making healthy choices easier*. London The Stationery office

<sup>ii</sup> [http://ec.europa.eu/food/food/labellingnutrition/foodlabelling/comm\\_legal\\_en.htm](http://ec.europa.eu/food/food/labellingnutrition/foodlabelling/comm_legal_en.htm)

<sup>iii</sup> DG Sanco 2004, *Enabling Good Health for All Brussels*