



Labelling: competitiveness, consumer information and better regulation for the EU, DG Sanco consultative document, February 2006

EPHA's response to DG Sanco's consultative document, 16th June 2006

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EPHA's initial considerations about the current consultation

The European Public Health Alliance (EPHA) represents over 100 non-governmental and other not-for-profit organisations working in support of health in Europe. EPHA aims to promote and protect the health interests of all people living in Europe and to strengthen the dialogue between the EU institutions, citizens and NGOs in support of healthy public policies. <http://www.eph.org>

EPHA welcomes this opportunity to consult in such a relevant issue for public health, however we shall point out that we have already been consulted several times directly or indirectly on the topic of labelling and we have provided the Commission with our comments accordingly, needless to say that this has implied dedicating our scarce resources for the repeated exercises (expertise of the Secretariat and EPHA members). Examples of these consultations are the March 2003 "Request for information in view of the revision of Council Directive 90/496/EEC on Nutrition Labelling" (see *Annex I* for EPHA's response) and the March 2006 consultation on "Promoting healthy diets and physical activity: a European dimension for the prevention of overweight, obesity and chronic diseases" - see following link for EPHA's response: http://www.eph.org/IMG/pdf/EPHA_response_GP_Nutrition200603final.pdf

Our second comment is that even six years after a Communication on an Action Plan on Nutrition Policy was supposed to be adopted¹, we still believe that nutrition labelling must be integrated into the larger context of a European Strategy on Nutrition.

Finally, we have tried to organise EPHA's comments on our areas of expertise following the structure of the DG Sanco Consultative document of February 2006.

EPHA's comments on the Strategic Goals –

15. Common themes: alternatives to legislation and implementation of legislation

Alternatives to legislation: EPHA does not support the use of self regulation or codes of best practice by the industry regarding labelling. There is evidence that self regulation does not work and that the protection of public health cannot be properly dealt with by self regulation. Self-regulation is most commonly adopted by industries under threat of legislation. Self-regulatory codes must not intend to play a substituting or independent role apart from legislation. However, if properly enforced, they may have an important role in complementing the legislation, in this spirit, therefore they are bound to fail. Self-regulatory codes must not intend to play a substituting or independent role apart from legislation. However, if properly enforced, they may have an important role in complementing the legislation. They may help to ensure that the basic principles of the legislation are actually achieved in practice, by helping businesses understand how to meet their obligations and reacting speedily to new market practices.

¹ See page 41, action 18 of the European Commission White Paper on Food Safety, COM (1999) 719 final



Self-regulation should not replace the legally binding and well enforced regulation, which is a government role to set minimum rules to protect individuals and society from harm. Self-regulation presents an opportunity for all players in a commercial sector to jointly go beyond existing standards and to improve quality of their products and services as well as to enhance the ethical, social and environmental aspects of their activity. The consensus of the self-regulation system means that no company can gain competitive advantage by undercutting standards and that the benefits of higher standards and quality can be delivered to citizens and society.

Implementation of legislation: there is a need to better assess existing laws at all levels and to ensure the implementation of the legislation.

EPHA's comments on General Food Labelling

20. Yes, the legislation should distinguish between the “information” that must be provided from that which should be available for the purchaser of the foodstuff, this purchaser being the final consumer, regardless of the place of consumption, a restaurant or mass caterer.

21. Yes, the legislation should provide general rules for how the information is to be provided, depending on whether it is mandatory information or information that it would be useful to have available.

23, 24, 25 and 26: EPHA supports mandatory information on all ingredients of alcoholic beverages, and alco-pops are also alcoholic beverages so they should not be excluded. The legislation should provide requirements, and in the case that voluntary agreements take place to complement legislation, it should also provide for requirements to be fulfilled with a view to preventing risk of misleading.

EPHA's comments on Nutrition Labelling

Paragraph 28:

- **should nutrition labelling be mandatory?** yes on the front and on the back of the pack. Mandatory labelling provides clear signals to consumers and supports public health goals. This will fulfil better the stated objectives of the current legislation, which aim to support consumers’ opportunities to make an informed choice on all types of food to assess what is needed to achieve an overall healthy diet. We also think it is important to explore whether labelling initiatives with regard to fresh food (such as meat) and catering would also offer public health benefits. We recognise that the introduction of a mandatory nutrition labelling system may require some exceptions and a “fine tuning” period, but we are confident that the benefit, not only to the consumer but also in terms of public health gains and economic savings, will far outweigh the initial difficulties.
- **how much information is required?** The nutrients which will be listed on the label should be reflect what consumer’s need to know in order to pursue a healthy diet, and should thus use the recommendations being developed by the World Health Organisation, and joint work with the FAO in publishing an expert report. Chronic diseases, which are on the rise in western Europe, can be significantly reduced by altering the daily nutritional intake and labelling can provide a useful tool for achieving this change. For example, the expert report advises less saturated fats, sugar and salt, and nutritional labelling should support education and information on reducing these intakes.¹
- **are there alternative formats for providing nutrition information?** yes there are, but labelling is the main format and it should not be substituted but complemented by other formats (such as websites, and simplified information on the front of the pack). As a general principle, only secondary pieces of information should be optional.

¹ Joint WHO/FAO Expert Report on Diet, Nutrition and the Prevention of Chronic Diseases, and an Executive Summary, 3rd March, 2003. See WHO website for executive report: www.who.int



- **where should the nutrition label be put?** We agree with simplified front of pack labelling ('signposting') but never renouncing to full back of the pack information.
- **how important is the presentation of the information?** Much research has been done by consumer and national health and national food agencies as to the most appropriate format and hierarchy of information, and should thus be used and built upon in the Commission's proposal. Some general comments on the presentation:
 - The format used to provide information should be as clear and consistent, in terms of language used, order of ingredients, and legibility.
 - Language needs to be simple and meaningful, salt is more meaningful to consumers than sodium, Vitamin B1 rather than thiamine.
 - Legibility – there is a real need to improve legibility with standardised font size and standardised colour e.g. black print on white. Red print on blue background results in poor legibility but manufacturers persist in using such colour combinations!
 - Appropriate reference quantity of nutritional declaration – both “100gm/ml” and “per serving” are appropriate, but on balance, “per serving” is more easily understood by consumers.
 - If the food package is too small to include all necessary information, one possible solution is to provide a website or free phone number for further details to consumers.

EPHA's comments on other food issues – Health warnings on alcoholic beverages

41. Warning labels: From the public health perspective, we support the labelling of ingredients that might lead to allergies, caloric value, alcohol (in grams) content and the health and social effects of harmful alcohol use on alcoholic beverages and their marketing and in special situations and settings to consumers.

43 and 45. EPHA agrees on better labelling information on health and environment issues of everyday use such as allergens in cosmetics, textiles, furniture fabrics, detergents, cleaning products, etc. Following the precautionary principle, we advocate for more information on the chemicals that are contained in those products of daily human use.



ANNEX I

Brussels, 6 March, 2003

**EUROPEAN COMMISSION
HEALTH & CONSUMER PROTECTION DIRECTORATE-GENERAL
Food Law & Biotechnology Unit
B-1049 Brussels**

For the attention of Ms. Anne-Laure Gassin

Subject: EPHA response to "Request for information in view of the revision of Council Directive 90/496/EEC on Nutrition Labelling"

Dear Madam,

In response to the "Request for information in view of the revision of Council Directive 90/496/EEC on Nutrition Labelling", which was sent out on 21 January 2003, I would like to register the European Public Health Alliance's (EPHA) initial views on the topic.

EPHA brings together over 85 organisations (including 24 European networks) in the not-for-profit sector, active in promoting public health objectives in public policy. EPHA also has a food and nutrition working group which has provided input on many nutrition and food related-topics, and has provided the platform for this consultation.

Nutrition and healthy diets are key to reducing many chronic diseases in Europe, which are rapidly on the rise. In 2001, chronic diseases – which include cardiovascular diseases, cancers, diabetes, and obesity – contributed to approximately 59% of the 56.5 million reported deaths in the world, according to a joint WHO/FAO expert report due to be published in April 2003.¹ Thus, this revision is of crucial importance to improving the health of EU citizens.

General points:

Nutrition Labelling must be viewed in an overall Nutrition Action Plan to be effective

Although we agree that nutrition labelling must be integrated into an overall educational programme in order to be effective, it is just as important that the framework is seen in the larger context of a European Nutrition Action Plan for serious consumer and public health benefits to accrue.

The new public health programme will go some way to providing information requested in terms of data, policy recommendations and health impact assessments of nutrition and food labelling. However, we question once again, why the Commission has not yet published an integrated and overall Nutrition Action Plan, as foreseen in the White Paper on Food Safety to guide the series of nutrition and food labelling proposals already published or foreseen to be published later

¹ Joint WHO/FAO Expert Report on Diet, Nutrition and the Prevention of Chronic Diseases, and an Executive Summary, 3 March, 2003. See WHO website for executive report: www.who.int



this year. Without this vital framework, it is difficult to ensure consistency and make progress on improving European people's health through food policy.

Mandatory labelling provides clear signals to consumers and supports public health goals

In the future revision of Council Directive 90/496/EEC, we believe an EU wide mandatory labelling system should be proposed, and that mandatory labelling should no longer be limited to just food with a "nutritional claim". This will fulfil better the stated objectives of the current legislation, which aim to support consumers' opportunities to make an informed choice on all types of food to assess what is needed to achieve an overall healthy diet.

We also think it is important to explore whether labelling initiatives with regard to fresh food (such as meat) and catering would also offer public health benefits. We recognise that the introduction of a mandatory nutrition labelling system may require some exceptions and a "fine tuning" period, but we are confident that the benefit, not only to the consumer but also in terms of public health gains and economic savings, will far outweigh the initial difficulties.

Clear, consistent and meaningful presentation of labels based on independent research

Consumers are increasingly aware and interested in nutritional issues, and the potential health gains from a balanced diet. Much research has been done by consumer and national health and national food agencies as to the most appropriate format and hierarchy of information, and should thus be used and built upon in the Commission's proposal. As a general principle, only secondary pieces of information should be optional.

Some general comments on the presentation:

- The format used to provide information should be as clear and consistent, in terms of language used, order of ingredients, and legibility.
- Language needs to be simple and meaningful, salt is more meaningful to consumers than sodium, Vitamin B1 rather than thiamine.
- Legibility – there is a real need to improve legibility with standardised font size and standardised colour e.g. black print on white. Red print on blue background results in poor legibility but manufacturers persist in using such colour combinations!
- Appropriate reference quantity of nutritional declaration – both "100gm/ml" and "per serving" are appropriate, but on balance, "per serving" is more easily understood by consumers.
- If the food package is too small to include all necessary information, one possible solution is to provide a website or free phone number for further details to consumers.

Nutritional information to be provided should be based on public health objectives as being set in the WHO Global Strategy for Diet, Nutrition and Physical Activity and the recent Joint FAO/WHO Expert Report¹

The nutrients which will be listed on the label should be reflect what consumer's need to know in order to pursue a healthy diet, and should thus use the recommendations being developed by the World Health Organisation, and joint work with the FAO in publishing an expert report. Chronic diseases, which are on the rise in western Europe, can be significantly reduced by altering the daily nutritional intake and labelling can provide a useful tool for achieving this change. For example, the expert report advises less saturated fats, sugar and salt, and nutritional labelling should support education and information on reducing these intakes.

¹ Joint WHO/FAO Expert Report on Diet, Nutrition and the Prevention of Chronic Diseases



Health authorities, health promotion agencies and NGOs provide a wealth of experience on promoting healthy diets

A number of EPHA member organisations are health authorities, health promotion agencies and NGOs working on promoting healthy diets and lifestyles, and their activities can provide practical expertise and examples on what works and does not work on this topic. One outstanding example is the material produced by the Health Promotion Agency for Northern Ireland. On their website you will find many interesting resources on good nutrition practices. You can access all these documents from the link <http://www.healthpromotionagency.org.uk/Work/Nutrition/publications.htm>. Some examples include tips on cholesterol, fat, fibres as well as a number of fact sheets on healthy nutritional behaviours.

Public health impact assessment on nutritional labelling essential

Finally, we believe that a comprehensive health impact assessment is required to fully evaluate the benefits (or the problems) related to the forthcoming nutritional labelling system. The public health approach to dealing with any threat to well-being, such as poor diets and its impact on diseases, involves not only defining and monitoring the extent of the problem, but also measuring and testing ways of successfully reducing the it.

We will continue working on food and nutrition related issues, and will relay information from our constituency as it becomes available. We thank you for the opportunity to respond to this consultation and look forward to receiving further opportunities to provide input on proposals.

Best regards.

Génon K. Jensen
Policy Director