



## Front of Pack Nutrition Labelling - Delivering meaningful public health outcomes

The overarching objective of Front of Pack Nutrition Labelling (FOPNL) should be to deliver accurate, science-based and transparent nutrition information to enable consumers to make informed, balanced and mindful product choices that support positive public health outcomes. FOPNL objectives should encourage consumers to purchase and consume nutrient dense foods rather than energy dense, nutrient poor foods as outlined in dietary guidelines worldwide.

Front of Pack Nutrition Labelling must:

1. Align with country or region-specific Dietary Guidelines and/or science-based nutrition policies
2. Recognize the dietary contributions of nutrient dense foods and consider the health benefits from consuming whole foods not just nutrients in isolation
3. Reflect the health benefits of consuming dairy in particular
4. Provide meaningful comparisons within food categories
5. Be supported by education programs, to enable consumers to choose a healthy balanced diet
6. Any FOPNL logo should be simple to understand, compliant with other relevant country specific food labelling regulation and linked to nutrition fact tables
7. Be implemented on a voluntary basis
8. Be regularly reviewed and monitored to ensure FOPNL systems stay current, reflect changing scientific evidence and are effective



## 1. Align with country or region-specific dietary guidelines and/or science-based nutrition policies

WHO guidelines on implementing FOPNL<sup>1</sup> include the principle that “the FOPL system should be aligned with national public health and nutrition policies and food regulations, as well as with relevant WHO guidance and Codex guidelines”. National food-based dietary guidelines (FBDG) provide context-specific advice and principles on healthy diets and lifestyles, which are based on robust evidence, and respond to a country’s public health and nutrition priorities, food production and consumption patterns, sociocultural influences, food composition data, and accessibility, among other factors<sup>2</sup>.

Some countries’ national FBDG now focus primarily on promoting healthy dietary patterns. To this end no single food or nutrient creates a healthy or unhealthy dietary pattern, but instead it is the consumption of a combination of nutrient-dense foods that is emphasized:

“...dietary components of an eating pattern can have interactive, synergistic, and potentially cumulative relationships, such that the eating pattern may be more predictive of overall health status and disease risk than individual foods or nutrients...” (2015-2020 Dietary Guidelines for Americans).

A review of countries reporting in the FAO dietary guidelines database shows that nearly all of them advise consumption of milk and/or dairy foods. This is reflective of the overwhelming scientific evidence that dairy is an important component of a healthy dietary pattern and associated with positive health outcomes.

Misalignment of FOPNL systems with FBDG recommendations has the potential to discourage purchasing and intake of foods that have established, science-based food-health benefits, such as milk, cheese and yoghurt, and would increase the risk of impaired nutritional status.

## 2. Recognize the dietary contributions of nutrient densefoods and consider the health benefits from consuing whole foods not just nutrients in isolation

Foods and food groups make up dietary patterns and are more than just a collection of nutrients<sup>3</sup>. In addition, this complex mix of nutrients interact differently when presented as foods. People eat whole foods rather than single nutrients in isolation and food-based recommendations are more practical for the general public than nutrient-based dietary advice<sup>4</sup>.

This is addressed by Mozaffarian and Ludwig stating: “Nutritional science has advanced rapidly, and the evidence now demonstrates the major limitations of nutrient based metrics for prevention of chronic disease. The proportion of total energy from fat appears largely unrelated to risk of cardiovascular disease, cancer, diabetes, or obesity.”<sup>5</sup>



While FBDG take a food-based approach, FOPNL systems use specific nutrient criteria (which may for example include total energy, saturated fat, protein, sugar and sodium) to assess the 'healthiness' of foods in a defined food or beverage category. A nutrient focus has the potential to classify some foods as 'unhealthy' or 'less healthy' than otherwise classified in FBDG ; this can misrepresent the association between some foods and health outcomes and is not consistent with broader health strategies designed to reduce the risk of diet related chronic disease.

Additionally, FOPNL generally require labelling of nutrients of public health concern, but should also allow for labelling of other nutrients that contribute to a balanced diet. Calcium, for example, is a shortfall nutrient in many countries/regions because it is under consumed. Highlighting foods high in this under consumed, essential nutrient will help consumers select foods that can improve their overall diet quality. Shortfall nutrients vary by region, but the importance of advising consumers about foods that are good sources of these nutrients should be considered when developing FOPNL guidelines.

It is also the combination of the portion size and the frequency of consumption of the food that will define the diet. Not taking that into account to simplify the FOPNL scheme will create inconsistencies.

### 3. Reflect the health benefits of consuming dairy in particular

FOPNL schemes should take account the nutritional benefits of dairy, in alignment with the science based evidence for the beneficial effects of dairy in the diet.

The evidence for supporting the consumption of milk, cheese and yoghurt in a healthy dietary pattern and association with positive health outcomes is well established. Recent research shows the consumption of dairy is associated with a wide range of health benefits<sup>6</sup> in addition to the well-established benefits on bones and teeth. Several systematic reviews and meta-analyses have shown that increased dairy consumption may protect against weight gain and obesity<sup>7</sup>. Dairy may significantly reduce the risk of type 2 diabetes<sup>8</sup> and reviews suggest either a neutral or inverse association with CVD risk<sup>9</sup>.

While some FOPNL schemes have attempted to consider the health benefits of consuming dairy, none of those in use to date accurately represent dairy. Core dairy foods may be misrepresented under FOPNL schemes due to their fat, sugar or sodium content. This applies to FOPNL schemes based on levels of individual nutrients and those which use algorithms which do not consider dairy as a specific class of food with beneficial attributes. This is not consistent with the recommendations in many national FBDG to consume dairy foods and it may cause consumers to avoid these on the assumption that they are not part of a healthy diet.



Modifications to some schemes could provide a more accurate representation of the benefit of consuming dairy. For example, depending on the type of scheme being proposed, this may include:

- A minimum rating for all dairy foods;
- Using different threshold values of dairy products in the case of interpretive labelling;
- The exclusion of dairy foods from any requirements to carry a “high in” warning label due to saturated fat, sugar, or sodium content, given their evidence-based broad nutritional benefits and impacts on reducing chronic disease;
- Excluding trans fatty acid (TFA) FOPNL inherently present in dairy products from FOPNL declarations for TFA;
- The adjustment of algorithms underpinning the nutritional profiling of foods to take account of the positive attributes of dairy, for example calcium rich foods;

#### 4. Provide meaningful comparisons within food categories

FOPNL will only be beneficial if it helps consumers make healthier food and beverage choices. Comparing foods and beverages across categories with differing ingredients and nutrient profiles will neither be meaningful nor enable healthier food choices. FOPNL must be designed to allow consumers to quickly compare the general nutritional profile of foods within the same category, for example comparing unflavoured yoghurts with flavoured yoghurts in their own category.

#### 5. Be supported by appropriate education programs, to enable consumers to choose a healthy balanced diet

Awareness and recognition of a trustworthy and credible FOPNL scheme is critical to ensure long-term use and improved dietary behaviors.

FOPNL schemes must be supported with a substantial education campaign and material, otherwise consumer awareness efforts, perceptions and use of FOPNL nutrition labelling will be poor. FOPNL schemes tend to oversimplify foods, and not align with FBDG or provide not enough information to assist consumers in making choices that will result in a balanced diet. Given these limitations, FOPNL will not effectively modify behavior or improve health and might even be misinterpreted by the consumer, leading to contradictory consumption behaviors if not accompanied by robust consumer education.

It is imperative that education and communication strategies emphasize that the FOPNL systems be used as a supporting tool to help guide food choice, explain how FOPNL fits into the wider context of nutrition policies and dietary guideline recommendations, and make a clear distinction between foods and beverages to encourage for consumption. Additionally, it should include educating consumers about how the FOPNL links with the nutrition fact table to give a complete picture of the nutritional content of the food or beverage and educating consumers on how to consume it within a healthy balanced diet.



## 6. Any FOPNL logo should be simple to understand, compliant with other relevant country specific food labelling regulation and linked to nutrition fact tables

Any FOPNL scheme and/or scheme should be objectively and effectively evaluated to assess its impact on consumer understanding and ranking of foods within a balanced diet. Regardless of the type of scheme or logo, robust consumer education will be needed to ensure that consumers understand the importance of using the full nutrition labelling when evaluating a given food in the context of their specific needs, preferences and/or circumstances. FOPNL scheme must recognize the overall health outcomes of a food/beverage and not discriminate individual nutrients.

## 7. Be implemented on a voluntary basis

Existing Codex Guidelines for Nutrition Labelling do not forbid inclusion of FOPNL on food packaging. In fact, the Guidelines allow for 'Supplementary nutrition information' (see paragraph 5) to be included on food labels. As indicated in the Guidelines, such supplemental information "is intended to increase the consumer's understanding of the nutritional value of their food and to assist in interpreting the nutrient declaration." FOPNL should follow a similar voluntary framework and be presented on food labels in addition to the nutrient declaration.

These guidelines mention that "content of supplementary nutrition information will vary from one country to another and within any country from one target population group to another according to the educational policy of the country and the needs of the target groups." This suggests that some countries may find FOPNL an important tool to inform consumers about their foods, while others may feel that consumers are already utilizing existing nutrition labelling effectively.

Furthermore, regulation imposes significant costs. We recommend that regulation only be imposed when there is a clear demonstrated market failure. This supports the importance of clearly communicating that FOPNL are voluntary.

## 8. Be regularly reviewed and monitored to ensure FOPNL systems stay current, reflect changing scientific evidence and are effective

It is imperative that FOPNL systems reflect current scientific evidence, established food/health benefits, and enable consumers to clearly and consistently identify foods recommended by FBDG.

Impact on health is difficult to measure and attribute to FOPNL. In addition to increasing consumer understanding and awareness, measuring behaviour change must be considered so that, any behaviour change initiated by the provision of FOP nutrition information is improving dietary patterns in line with country specific FBDG and nutrition policies and reducing the risk of non-communicable diseases.

Therefore, FOPNL schemes should be reviewed and monitored regularly to ensure systems stay current, reflect evolving scientific evidence and are delivering public health outcomes.



## References

- <sup>1</sup> WHO Guiding principles and framework manual for front-of pack labelling for promoting healthy diets; 2019
- <sup>2</sup> <http://www.fao.org/nutrition/education/food-dietary-guidelines/background/en/>
- <sup>3</sup> [https://apps.who.int/iris/bitstream/handle/10665/42051/WHO\\_TRS\\_880.pdf](https://apps.who.int/iris/bitstream/handle/10665/42051/WHO_TRS_880.pdf)
- <sup>4</sup> Astrup A, D. J. (2011). The role of reducing intakes of saturated fat in the prevention of cardiovascular disease: where does the evidence stand in 2010? *Am J Clin Nutr.* , 93(4):684-8.
- <sup>5</sup> Mozaffarian D, L. D. (2010). Dietary guidelines in the 21st century--a time for food. *JAMA.* , 11;304(6):681-2.
- <sup>6</sup> Kongerslev Thorning T et al. 2016. *Food Nutr Res.* 2016; 60: 10.3402/fnr.v60.32527
- <sup>7</sup> Sclesinger S et al. 2019. *Advances in Nutrition*, Volume 10, Issue 2, March 2019, Pages 205–218; Stonehouse W. 2016. *Nutrients.* 2016 Jul 1;8(7):394.
- <sup>8</sup> Gijsber L et al. 2016. *Am J Clin Nutr* Apr;103(4):1111-24 ; Soedamah-Muthu SS et al. 2018. *Curr Nutr Rep.* 2018 Dec;7(4):171-182; Alvarez-Bueno C. 2019. *Adv Nutr.* 2019 May 1;10 (suppl\_2):S154-S163
- <sup>9</sup> Soedamah-Muthu SS et al. 2012. *Hypertension*, 60:1131–1137.