



Global Update on Nutrition Labelling

Executive Summary
February 2016



With contributions from:

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Executive Summary

Nutrition labelling is the provision of information about the nutritional content of individual food products. It is most commonly applied to pre-packaged food and beverage products, but comes in a variety of formats. Variables include: the type and number of nutrients labelled, the reference values used, whether the information appears on front-of-pack (FOP) or back-of-pack (BOP) and whether the label gives any interpretative guidance to the consumer.

The rise of overweight and obesity has focused policymakers' attention on the provision of nutrition information as it is hailed as an important instrument in promoting healthier eating habits. In some countries, government regulations for nutrition labelling have been in place for many years; others have only recently developed a statutory framework for the provision of nutrition information. In both circumstances, the provision of nutrition information on the FOP is becoming an increasingly prominent policy issue. Meanwhile, voluntary FOP nutrition labelling initiatives proliferate.

A number of studies in recent years have examined how consumers perceive and use nutrition labels and assessed consumer preferences for different nutrition labelling schemes. This Global Update seeks to provide a comprehensive overview of the state of play on the issue today: What are the major nutrition labelling initiatives adopted or in the pipeline to date? How do they work? What do the various stakeholders say? Where is the debate heading? What does the research show? The key objectives are as follows:

- To give an up-to-date, comprehensive snapshot of the situation worldwide.
- To evaluate research and practical experiences to date, so as to identify examples of best practice.
- To highlight emerging trends and remaining knowledge gaps.
- To suggest ways forward, particularly with respect to consumer research.

Snapshot of Global Trends

At the national level, countries can be grouped into two broad categories based on their statutory regulations on BOP nutrition labelling:

1. Mandatory

Those which make nutrition labelling mandatory (**United States, Canada, Mexico, Argentina, Brazil, Chile, Colombia, Ecuador, Paraguay, Uruguay, European Union (EU) Member States, Russia, Israel, Gulf Cooperation Council members, Nigeria, India, Hong Kong, China, Japan, South Korea, Malaysia, Taiwan, Thailand, Philippines, Indonesia, Australia and New Zealand**), even in the absence of a nutrition or health claim. They define which nutrients must be listed and on what basis (e.g. per 100 g/per serving). They also allow voluntary initiatives to provide additional nutrition information.

2. Voluntary

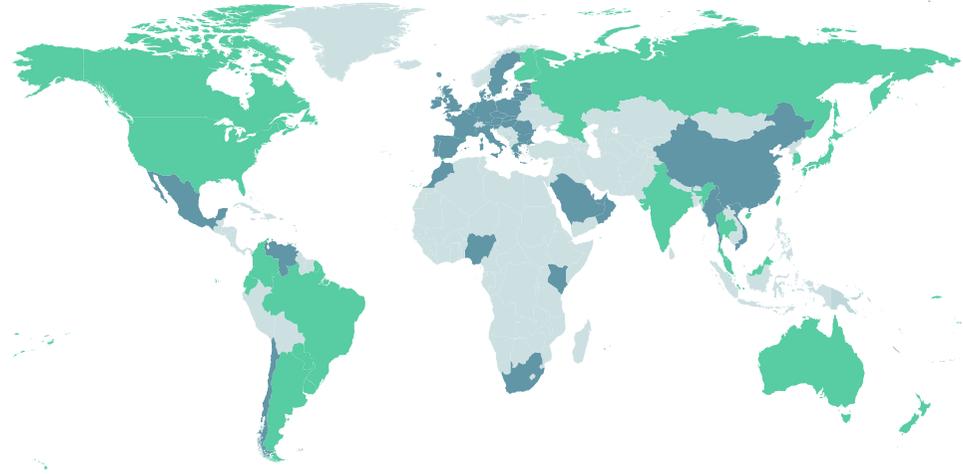
Those which provide state-sponsored guidelines to be followed voluntarily (**Venezuela, Turkey, Switzerland, Morocco, Lebanon, Jordan, Singapore, Brunei, Myanmar, Vietnam, Kenya, Mauritius and South Africa**). They define which nutrients should be listed and on what basis, but labelling is not mandatory unless a health or nutrition claim is made or unless the food is for special dietary uses.

Mandatory Nutrition Labelling Trend

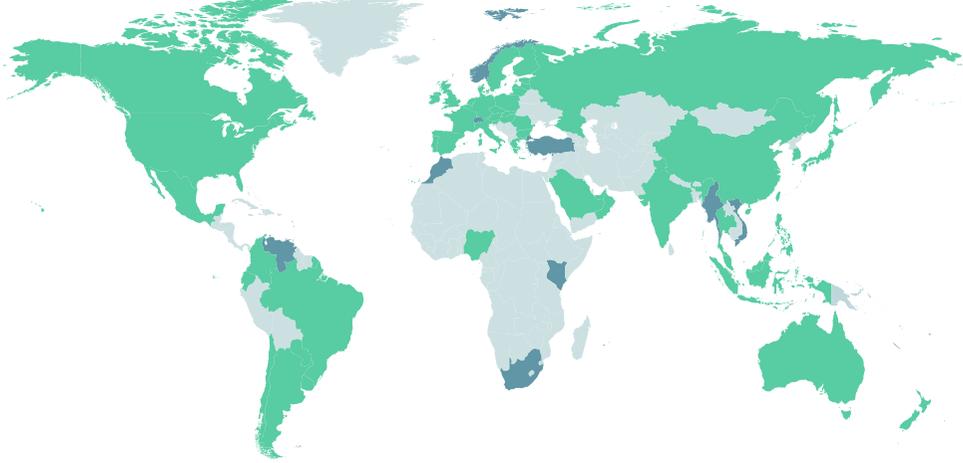
In recent years, the global trend has been a move toward mandatory nutrition labelling regardless of whether a health or nutrition claim is made. In reflection of this trend, the Codex guidelines were amended in 2012 to recommend that nutrition labelling should be mandatory even in the absence of health claims (Codex Alimentarius Commission, 2012). In addition, many countries that had a voluntary approach to nutrition labelling have adopted measures to make nutrition labelling mandatory. **Nigeria, Japan, Indonesia, the Philippines and Saudi Arabia** have all moved in this direction, while rules for mandatory nutrition labelling have entered into force in **China** (as of 1 January 2013) and will take effect in the **EU** (as of 13 December 2016,

Figure 1
Global overview of mandatory and
voluntary nutrition labelling

2007



2015



- **Mandatory** nutrition labelling on pre-packaged foods
- **Voluntary** nutrition labelling unless health or nutrition claims are made or foods for special dietary uses
- Information not found

though the format requirements for displaying nutrition information already entered into force as of 13 December 2014 for companies voluntarily providing on-pack nutrition information).

The inconsistent presence of nutrition labelling on food and drink products fuelled the European debate. An **EU**-funded research project, **FLABEL**, found that in the 27 EU member states and **Turkey** 85% of products in 5 product categories carried BOP labels and 48% carried FOP labels (Storcksdieck genannt Bonsmann et al., 2010). 84% of products displayed information in a tabular or linear format, while only 1% displayed health logos. Among FOP schemes, Guideline Daily Amounts (GDAs) and nutrition claims were most widespread, but both the prevalence of labelling and the type of label varied by country. A similar situation has developed in Asia, with a wide variety of labelling formats in place and an emerging trend toward standardisation, particularly in **ASEAN** countries. In this regard, Codex Alimentarius guidelines are often used as a basis.

Standardisation of Front-of-Pack Labels

While governments have been considering whether to introduce FOP labels and what format would be most appropriate, a variety of FOP labels have been launched by international organisations, NGOs, industry associations and individual companies in order to make nutrition information more accessible to consumers. Some of these labels emphasise a judgement of nutritional quality through colour-coding (e.g. “traffic lights”) or a symbolic “health logo” based on specific nutritional criteria (e.g. heart symbol, “Green Keyhole”), while others provide information in the context of the overall diet, such as GDAs. This proliferation of different formats has prompted a push toward harmonisation in some countries and regions.

The **EU** adopted in 2011 a new Regulation on Food Information to Consumers, which allows for voluntary FOP labelling following a specific format. The label is based on the GDA format, but the term “reference intakes” will have to be used instead of GDAs. Additional forms of expression and presentation of the nutrition declaration, such as colours, graphical forms or symbols, are permitted under certain conditions established in the regulation. However, concerns over the impact of such additional forms of expression on the EU single mar-

The prevailing view in countries with mandatory and voluntary labelling alike is that standardised labels are preferable to a multitude of different nutrition labels.

There remains broad disagreement, however, on what format is most effective at influencing consumer behaviour.

ket have been raised and one such scheme, the government-endorsed UK traffic light label, is currently under scrutiny by the European Commission. This has, however, not halted similar developments in other Member States, such as France, which is considering the introduction of a five-colour FOP label.

Government-endorsed FOP nutrition labels are also being considered and/or implemented in several other countries (e.g. Australia, New Zealand, India, Chile, South Africa). Key considerations are whether to make FOP labels mandatory and if so, whether they should emphasise a judgement of nutritional quality. In this respect, **Australia and New Zealand**, for example, have opted for a star rating system, combined with a nutrient icon component, and applied voluntarily.

In Europe, colour coding has been gaining ground. The **UK** opted for a government-endorsed voluntary scheme, combining colour coding and text. As this was the first initiative in the EU to take advantage of the option to use additional forms of expression, it generated significant interest and some controversy. As a result of criticism from a group of Member States, led by **Italy**, calling into question the compatibility of the label with the EU internal market, an infringement procedure against the UK was launched by the European Commission. The UK has responded to the Commission's concerns and for the moment no further action has been taken.

In **France**, for example, the creation of a "simple and accessible for all" voluntary nutrition label was included in the 2014 draft health law (Service publique de la diffusion du droit, 2015). In this context, a label using five colours to rate foods has been evaluated and received support from various public health and safety bodies, as well as researchers, while retailers are proposing an alternative label, also based on colour coding, but with only four levels. Meanwhile, **Sweden** is attempting to renew interest in its Keyhole logo and has developed new criteria, allowing it to be applied to additional food groups (e.g. gluten-free products).

Colour coding has also been proposed in **South Africa**, where a draft regulation sets requirements for a voluntary traffic light label for energy (in kJ), total sugar, fat, saturated fat and total sodium or salt equivalent per serving. The regulation was subject to public consultation until the end of August 2014 and the submissions are still under

review. Until the draft regulation is finalised, GDA labelling remains prevalent.

FOP labelling has also been a prominent issue in Asia for several years. In May 2011, **Thailand** became the first country to introduce mandatory FOP nutrition labels, which initially applied to five snack categories, but were subsequently extended to all snack foods, chocolate, bakery products and other categories. Also in 2011, **South Korea** was the first Asian country to press ahead with recommendations for voluntary traffic light labels on children's food. On 25 May 2012, the Prime Minister's Office announced its intention to progressively introduce mandatory traffic light labelling to snacks and beverages, which would have made South Korea the first country globally to mandate traffic light labelling. Since then, two draft bills have been submitted to the Korean National Assembly, but their review has been delayed.

Colour coding is under consideration in **India**, where the Food Safety and Standards Authority (FSSAI) is reportedly looking at traffic light labels as part of a group of measures to address obesity-related NCDs. Sri Lanka may also propose traffic light FOP labelling for sugar in ready-to-drink (RTD) products, while **Thailand** may consider the introduction of a health logo. **Indonesia**, on the other hand, has opted for a warning statement on certain processed and fast foods along with information on the content of sugar, salt and/or fat.

In Asia, there are also voluntary initiatives spanning several countries attempting to introduce consistent FOP labelling in the region. For example, an **ASEAN** regional initiative, supported by the ASEAN Food and Beverage Alliance (AFBA) and Food Industry Asia (FIA), is under way to implement regionally consistent FOP GDA labelling guidelines. As a result, FIA members have committed to roll out GDA labels for energy on FOP by the end of 2016 and AFBA and its member associations have committed to promoting the scheme among their members.

In the **US**, the Food and Drug Administration's priority is to review the Nutrition Facts Panel (NFP) on BOP before making recommendations on FOP labels. At the moment, the debate is focused on the inclusion of a separate line for added sugars into the NFP, with final recommendations expected in 2016. In the meantime, research from the International Food Information Council (IFIC) Foundation has indi-

cated that a separate line on added sugars may not provide clear and useful information that would be applied appropriately by the majority of consumers (Laquatra et al, 2015).

With regard to FOP labels, the Institute of Medicine (IOM) issued recommendations for a rating system displaying calorie counts by serving size and a “point” value, showing whether the saturated and trans fat, sodium and added sugars in the products are below threshold levels (Institute of Medicine, 2011), but no legislation followed. In the absence of a government-endorsed scheme, a private initiative called “Facts Up Front” was launched in January 2011 by the Grocery Manufacturers Association (GMA) and the Food Marketing Institute (FMI), representing leading U.S. food and beverage manufacturers and retailers respectively. This labelling system, which displays calories and important nutrients (saturated fat, sodium and total sugars content) on the FOP, is voluntary and has received support from the U.S. FDA (Food Navigator, 2012b). On local level, warning statements for sugar-sweetened beverages have been proposed in New York State, California, Baltimore and Maryland and passed as a city ordinance in San Francisco.

While many countries are opting for voluntary FOP labelling, a number of countries in North and South America have introduced mandatory nutrition labels. **Mexico, Ecuador, Chile and Peru** have all introduced different forms of mandatory FOP labelling, thereby increasing the inconsistency between labelling requirements in the region.

The Way Forward

The debate over which nutrition labelling scheme is the most effective is likely to continue in **Europe, Asia-Pacific and the United States** for the foreseeable future. More research would be useful to inform these discussions. Governments, NGOs, food manufacturers and retailers have all explored which scheme consumers might prefer, for what reasons and how certain schemes impact purchasing behaviour and balanced choices. While some evidence has emerged on several of these issues, there remains no consensus among stakeholders on the way forward. Evidence on the impact of the various schemes on purchasing behaviour, and therefore on their relative effectiveness in

While the U.S. and the majority of EU Member States have opted for labels based on reference intakes, some countries in Europe, South America and the Asia-Pacific region have chosen FOP schemes based on a judgment of nutritional quality.

The debate over which nutrition labelling scheme is the most effective is likely to continue for the foreseeable future and more research would be useful to inform these discussions.

helping consumers make balanced choices, also remains limited, partly because of the relative novelty of interpretative guidance schemes in the marketplace.

Nonetheless, there is agreement on the need to provide consumers with more consistent, informative and simpler nutrition information on food labels. The mandatory Nutrition Facts Panel/Table is regarded as a public health tool that is intended to assist consumers in making informed and healthful food choices in the **EU, the United States, Canada, Hong Kong, Malaysia, Australia, New Zealand and India**. Yet, like all tools, it only has an impact if it is suited to its task and if consumers actually understand and use it. In response to concerns that the Nutrition Facts Panel may not be sufficiently understandable, the FDA announced that its first priority with regard to labelling will be to revise it. This in turn will become the foundation for further consideration of FOP labelling.

Nutrition labelling is also increasingly moving beyond packaged goods, particularly in **North & South America and Asia**. Most recently, legislation requiring mandatory labelling of calories in fast food restaurants was proposed in **Argentina**. Menu labelling in restaurant chains with over 20 locations, selling substantially the same items and operating under the same name, is now mandatory in the **U.S.**, although the deadline for compliance has been extended to 1 December 2016. In addition, the trend toward more labelling continues on local level, with additional warning labels for food with high salt content to be enforced as of 1 March 2016 in New York. A 2015 poll found that a majority of Americans support menu labelling of calories but also believe they already receive enough nutrition information in restaurants (The Washington Times, 2015).

While menu labelling research has proliferated in recent years, only a few studies look at the effect on purchasing behaviour in real-world situations and do so with conflicting results. There is some evidence of an effect on parents' decisions, but follow-up research, factoring in children's choices and influence on their parents in real-life situations, is needed. More in-depth research into how menu labelling affects food choices would be useful in this debate, which is likely to continue, especially in countries with a higher proportion of out-of-home eating.

Overall, by providing nutrition information about the nutrient content of foods, nutrition labelling allows for—but does not necessarily cause—more healthful food choices. Recent studies have found that the presence of nutrition labels can improve subjective understanding of labelling, but did not note a significant difference in impact between the different types of labels. Research has also found that use of nutrition labels is increasing across geographical regions, while differences based on gender, age, income and education levels persist. In order to understand these differences and strengthen the impact of labels on actual purchasing decisions, corollary issues related to consumer motivation need to be considered: What factors underlie consumer motivation to make changes in their diets? How can appropriate and meaningful nutrition information be provided on the food label so that motivated consumers can act on their desire to improve their diets?

Summary Points

- **Policy decisions should fundamentally be based on science: the key question is which labelling scheme gives the best guidance from a nutritional point of view.** In this respect, it is clear that what matters is the overall diet, not the consumption of an individual product.

- **Nutrition labelling policy should take into account consumer use, interpretation and understanding of different nutrition labelling schemes, but ultimately it is the impact on purchasing decisions and overall diets that matters.** The consumer research section of this report shows that these factors vary from country to country and among consumer segments. Most research on FOP formats has been conducted in **Europe, North America, Australia and New Zealand**. Given the potential for variance, studies in other regions are needed to understand better local consumer attitudes. Publicly available research on the actual impact of FOP nutrition labels is limited. In some countries, such as the **United States**, research regarding consumers' preference and use of labels has been conducted by retailers on their own products, but is not publicly available as sales data are often pro-

prietary. By contrast, sales data from **Singapore** indicate an increase in purchases of products bearing the Healthier Choice Symbol.

Further consumer research seems to be needed in particular on the following questions:

- **Do consumers make long-term healthier food choices as a result of having used nutrition information on food packaging?** Some research has shown that consumers understand and know how to use accurately various nutrition labels should they choose to do so, but studies in **Europe** have shown no demonstrable short-term effect on purchasing decisions. Little is known about whether consumers make long-term healthier food choices as a result of having used nutrition information. If healthier food choices cannot be traced to nutrition information, other factors that motivate healthier food choices should be identified.

- **To what extent do nutrition labelling schemes have to be standardised to help consumers cultivate healthy eating habits?** Research by FLABEL, EUFIC and the Surrey Food Consumer Behaviour and Health Research Centre in **Europe** and by the **Australian** Heart Foundation in Australia suggests that different labelling schemes can be equally effective in helping consumers identify healthy options, yet many groups discussed in this report assert that standardised nutrition labels are imperative. A future study on the impact of the EU regulation and the Australian star rating system would be insightful.

- **How can consumers best be helped to make good use of nutrition labels to make better food choices?** Research suggests that good use of nutrition labels is related to better nutrition knowledge, and that overall use is linked to health motivation. How can consumers be motivated to eat more healthily? What awareness raising and education initiatives are most effective? Who should be the primary target of which information and education initiatives – parents, children, others?

- **Is nutrition labelling beyond packaged foods useful?** The menu labelling debate has moved beyond the **United States to Canada, the UK, Ireland, Argentina, Australia and Asia**. Menu labelling research has proliferated in recent years, but is limited chiefly to **Europe, North**

America and Australia. While studies have not delivered a clear message on the effect on food choice, some have attempted to explore the effect on the meals offered by restaurants. Further research on both issues is needed to fully gauge whether nutrition labelling beyond packaged foods has an impact on food choices.

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