



Wolfson Institute of Preventive Medicine
Barts and The London School of Medicine & Dentistry
Queen Mary, University of London
London EC1M 6BQ
Telephone: 020 7882 6018
www.actiononsalt.org.uk

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Front of Pack Nutrition Labelling: BRC Consultation on Proposed Format

CASH Response

Introduction

Consensus Action on Salt & Health (CASH) is an organisation interested in reducing the salt intake of the UK population so as to prevent increased risk of heart disease, stroke, kidney disease, obesity, osteoporosis, and stomach cancer. Our main focus as a charity is to reduce the average salt intakes in the UK population to below the maximum recommended 6g a day, primarily through reformulation of processed foods. Until this is achieved across the whole of the food industry, we feel clear labelling is the only practical solution for people to understand what is in the food they buy and help them take responsibility for their health. We therefore welcome the opportunity to respond to this consultation for a more uniformed and consistent front of pack food labelling format. CASH have long campaigned for the introduction of a single front of pack nutrition labelling scheme in the UK to include traffic light colour coding for energy and four nutrients (salt, sugar, fat, saturated fat).

Taking into consideration the importance of consistency in order to enable customers to clearly see and understand the information, we feel the guidelines require greater specificity. As the draft in its current format stands, there is the potential for guidelines to be misconstrued. Outlined below are our thoughts and concerns in response to the Front of Pack Presentational Guidance.

Format

We are in agreement with the proposed content included within the lozenge (energy plus 4 nutrients, % RI and colour coding). But it is imperative that this remains consistent and does not allow for any additional nutrients to be included (e.g. fibre) as this would confuse consumers. The guidance should also state that colour coding in each lozenge refers to each nutrient per 100g. We recommend that energy per 100g is provided as text only as opposed to an additional lozenge, to avoid any confusion.

Nutrients

It is mentioned that products such as single portion spreads, and small jars would be able to use option 1 for nutrition labelling. However we feel further clarification should also be given with regards to what would pass as a 'single portion', e.g. minimum sizes. This is particularly important for salt, where your entire maximum daily recommendation could fit into packaging the size of a teaspoon. We therefore suggest option 1 should refer to pack size as opposed to portion size, and a clear list of categories pertinent to this section provided.

With regards to terminology (sugar/sugars, saturates/sat fat), wording would have to remain consistent and will need to be accompanied by an educative push to support the introduction of front of pack labelling. Many consumers are not aware of what saturates are, and would need better understanding in order to fully appreciate front of pack labelling.

GDA's and RI's

Although the use of GDA's on packaging has been used in the UK for many years, it is still uncertain whether it is fully understood by consumers. What is important for the customer is the percentage visible on the front of pack labelling, rather than the acronym used. RI's are internationally recognised and adopting this acronym would provide a more consistent understanding of labelling to the consumer on an international level. It is therefore agreed that GDA's should be replaced with RI's in order to comply with the EU FIC regulations.

Design

We feel that more detail should be given to retailers and manufacturers with regards to lozenge design. We are in accordance with the uniformity of colour for red amber and green, but do not see any reason why the quantity of colour should be less than 100% for each lozenge. Only the energy lozenge needs to be black or white. By providing a block colour, this will undoubtedly minimise confusion for the consumer, and provide a clearer message.

We understand that there are differences in packaging material (colour, material, size etc), and therefore some leniency may have be given to accommodate this, but imprecise guidelines will only lead to manufacturers misunderstanding the recommendation and providing inconsistent labelling.

Guidelines on delineation are also unclear and insufficient. We feel it is important that each nutrient should be clearly and visibly separate from each other, and suggest the guidelines specify a minimum border. The border should also be contrasting, using the same colour of the text.

We therefore request that more specific recommendations on design are published. We suggest that each category should have a solid block of colour (100% of the category) and agree this should be accompanied with a contrasting background to emphasise clarity. All text should also be just one colour, with clear delineation between lozenges, ideally the same colour as the text.

Additionally, there are no guidelines to the font size or size of the lozenge. We are aware of EU regulations for font size on back of pack information, and agree that similar guidelines should be made for front of pack information, with a set font size that is legible to the customer, without having to lift, remove or scan the packaging.

Location

Greater specificity is required with regards to the location of the lozenge. The importance of the lozenge is to help consumers take better control of their health and food choices. We therefore feel consumers would benefit from a consistent location of the front of pack information e.g. bottom right hand corner, and would not require removal of packaging in order to be read. In line with maintaining a contrasting background, it should also be stated that no images are placed behind the sign post.

We propose that a minimum percentage of the pack label, e.g. 10% should be used for the front of pack nutrition label.

High/Medium/Low Text

We feel it is very important to include high/medium/low text within the lozenge, as it would benefit those who are colour blind. By making this optional, it would result in inconsistent labelling, which could affect consumer understanding. We therefore recommend that it should be included, and urge the BRC to reconsider.

We look forward to seeing how our comments are incorporated into the final guidance.

A handwritten signature in black ink, appearing to read 'Graham MacGregor', written in a cursive style.

Graham MacGregor

Professor of cardiovascular medicine and Chairman of CASH