

This as a result of
many different



This report will explore and explain the issues around whether or not nutritional labelling and policy implementation have successfully developed a policy on nutrition labelling. Which meets the needs of consumers, public health objectives and food industry. Introduction Nutritional labelling regulations are set out by law and are created to ensure that they are followed by the food industry. For example EU Regulation No. 1169/2011 which was created to “inform consumers on nutritional information” (foodlabel.org, 2017).

This is different from a Food Policy as policy's are not law's, they are created as a result of many different factors such as population change, technology advances or a food scares such as BSE or the horse meat scandal. “Food Policies are different to food laws as they are voluntary to follow, they are put in place to address a need or a problem, for example the childhood obesity plan. This is a plan which has set targets to reduce the level of childhood obesity in the UK, the food industry can choose to follow these policies or not” (Lang T & Heasman M, 2004). Nutritional labelling was initially created in 1990 through the Nutrition Labelling and Education Act (NLEA).

“This required all packaged foods to bear nutrition labelling and all health claims for foods to be consistent with terms defined by the Secretary of HHS.” (Eating Well, 2017). The Food Labelling Regulations 1996 state that the Food Industry must display the following information (mandatory information) on all pre packaged food packaging:” Name of the food, Quantitative ingredients declaration(where needed), List of ingredients (including allergens), The weight or volume of the food (net quantity), ‘ Best

before' or ' Use by' date, The name and address of the food business operator (FBO) responsible for the food information, The alcoholic strength by volume (as a percentage) on drinks containing over 1. 2% alcohol by volume.”(gov. uk, 2016) This lead to the Food Labelling Act 2006 , “ this act established the traffic light coding system on FOP it stated that the nutrients to be coloured include: Energy, Fat, Sugar and Salt” (gov. uk, 2018) This lead to the current piece of legislation: Food Information to Consumers Regulation (EU) No.

1169/2011 which came into effect in 2011. “ This stated that Food Products Ingredients list must show allergens in bold font, so that they are emphasised, ensuring that consumers with serve allergies can easily be made aware. An allergy advice statement may still be used on the packaging - this will direct consumers to the ingredients list for allergen information, use of statements such as ' Contains: milk, nuts' to summarise allergens ingredient information will no longer be allowed” (food. gov. org, 2015). “ The only exception to this is for products that do not have an ingredients list, such as wine where a ' contains: sulphites' may be used.

Further requirements of this legislation came into effect on the 13th December 2016, that nutritional FOP (front of pack) labelling declarations for all pre packaged foods must apply” (gov. uk, 2016). Non pre packaged food products such as restaurant foods must provide nutritional information for all products. For example Whetherspoons provide nutritional information on their menu. “ This legalisation had the aim of providing consumers with more autonomy and informed consent around the foods they eat which are high in fat, salt and added sugars” even when consumers are out for

dinner (gov. uk, 2016). Food Policies are defined as a “ consisting of a web of decisions and actions that allocate values. Food Policies are created through the process of: Problem identification, Policy formulation, Policy adoption, Policy implementation and Policy evaluation.

Policies and the policy-making process shape the outcome of the food supply chain, food culture and who eats what, when and how” (Lang T & Heasman M, 2004). The policy process is essentially a complex and multi-layered system. “ Its a complex political process” (Lang T & Heasman M, 2004). Success of policies is down too food preferences of consumers, and the food, social, and information environments influence on shaping these food preferences; second, the problems consumers face, for example consumers of a low economic background may not have the skills or cooking techniques to cook healthier products. Lastly the distribution of food products to stores which are accessible for all consumers at a low price with clear labelling (Hawkes C et al, 2015). Policies are developed from an initial need for healthy learning for consumers. Policy actions are needed to overcome barriers for the expression of healthy preferences. “ Policy actions are also needed to encourage people to reassess existing unhealthy preferences” (Hawkes C et al, 2015).

Evaluation Public HealthNeeds: “ Public health involves the art of preventing disease, prolonging life and promoting human health through organised efforts and informed choices of society, organisations, public and private, communities and individuals” (fph. org, 2017). In 1994, the Department of Health started the ‘ 5 A Day’ campaign to inform and educate the public to eat a combination of at least 5 portions of fruit and vegetables every day, <https://assignbuster.com/this-as-a-result-of-many-different/>

ideally three vegetables and two fruits due to the high sugar level of fruit. This was developed due to the link between diet and many serious illnesses such as cancer. This policy was developed for individuals to encourage them to consume more fruits and vegetables. Research showed that “ 30% of adults and 41% of older adults met the “ 5-a-day”.

However this is expected to increase as the survey confirmed that eating habits do not change quickly”. Therefore this policy could become more of the success in years to come as generations grow up with this knowledge (gov. co. uk, 2017).

However Public Health nutrition, through the medium of health promotion, needs to address the wider issues including the control of who controls the food supply, and thus the influences on the food chain and the food choices of the individual and communities. “ Such an upstream approach to food policy (one that has been learned from work on tobacco) is necessary if we are seriously to influence consumer food choice leading to a healthier public, however this has been said if it is taken too far can lead to a ‘ Nanny state’ where food is completely controlled” (K. Calman, 2009).

The Public Health state must therefore consider a number of key principles when designing public health programmes, including Mill’s harm principle, “ caring for the vulnerable, autonomy and consent”(K. Calman, 2009). Policies should then be evaluated and the success rates investigated to improve future policies.

Since 2001 the Food Standards Agency have been investigating to help improve the clarity of labels. In 2002 the first Clear Food Labelling Guidance <https://assignbuster.com/this-as-a-result-of-many-different/>

was published, which introduced best practice advice on achieving label clarity. “ The original objectives of the Guidance were as follows: To improve labelling practice with respect to clear labelling and awareness of existing legislation on clear labelling in the manufacturing and retail sectors. To improve consumer confidence in labelling through improved clarity. To provide enforcement authorities with guidance to help them improve labelling advice” (gov. uk, 2016). ConsumerNeeds: To be fully informed on the nutritional value of the food they are consuming and the health consequences of eating these foods. Research has shown that the use of consistent FoP (Front of Pack) labelling across as many food products as possible will help consumers to become familiar with its format, and to use it to balance their diet and control their energy intake.

“ Research and modelling have also shown that even small changes to the diet can have significant impacts on individuals’ health, and in reducing the costs of ill-health to the economy on the NHS” (gov. uk, 2017). It has been found that “ Clear FoP nutrition information supports consumers in making healthier choices and realising those benefits of eating healthier products” (gov.

uk, 2017) This therefore provides consumers with informed consent around food choices. However research has found that the presence of multiple different FoP label types could result in too much information and therefore confusion. This type of problem is likely to result in the choice and autonomy being abandoned entirely. “ This was illustrated by the finding in the cognitive testing that some shoppers were unable to compare two products with different FoP labels, declaring it was just too difficult” (Malam

<https://assignbuster.com/this-as-a-result-of-many-different/>

et al, 2008). “ Also if FoP labels look similar but contain different signposting information, this could cause inaccurate comparison through misinterpretation of one or other of the FoP labels. The qualitative work and cognitive testing suggested misallocated meaning to some FoP label types” (Malam et al 2008).

This therefore shows that only a consistent system will work. Evidence also suggests that labels work by filling an information gap for groups of consumers who already have healthy preferences and an intention to eat healthy foods. Therefore FoP and BoP of pack nutritional labels do not provide adequate and understandable advice for consumers who are not health conscious. “ Work needs to be done to engage these consumers and interest them in health concerns.” (Hawkes C et al, 2015). FoP can seem confusing for consumers, Figure 2 shows traffic light labelling for a pie, per portion, which is not clear when immediately looking at the product. Consumers could consume more than the portion and therefore consume more calories and nutrients than they thought, therefore this doesn't provide fully clear informed consent.

Food Industry Needs: To have the open ability to create innovative food and beverage products without sales decreasing due to negative advertising. The FDA has shown understanding that nutritional labelling for some products is negative and off putting for the consumer. “ Therefore authorised certain health claims for foods which can be shown on front of packaging, this can increase the amount of sales and provide incentive to create healthier options.” (Eating Well, 2017). These would then be purchased from health

conscious consumers which means it meets the needs of the health conscious consumer.

However “ The Food Industry has expressed concern over certain aspects of the food clear labelling guidance policy. For example the recommendation of a minimum font size of 8 point for mandatory information. It was felt that in many cases this was impractical. This view was balanced by advice from the Royal National Institute of Blind people² (RNIB) which provided advice on visual problems” (food. gov. uk, 2008).

Therefore there have been issues which need to be overcome to ensure consumers can have fully informed consent around food choices.

Multinational companies have led the way with positive nutrition, moving one step ahead of the law to provide nutritious products to their loyal health conscious consumers. In 2004 PepsiCo launched SmartSpot by designating the more nutritious of its products with an easy to spot package which initiated the start of the focus on front of pack packaging. PepsiCo went on to further their initial plans and start “ Performance with Purpose” campaign (PepsiCo, 2017). This meant that the nutritious benefits and values of products would drive innovation and therefore not impact sales negatively. PepsiCo also show through marketing that they don't advertise to children under 16 years of age.

“ In 2014, 70% of Pepsi's estimated retail sales were in no sugar colas, this shows that consumers have an understanding of health benefits on these products” (Pepsico, 2017). Conclusion Many issues determine the success of food policies and nutritional labelling. Initially the consumers food

preferences will determine what a individual eats, social economic background will influence this as if they have grown up in an environment with fast food and ready meals they wont know the needs for a balanced diet. Consumers may also face problems in sourcing healthy products as they may only have a small corner shop near the and no method of transport to go to a larger food shop. Lastly the effect of cost, fresh fruit and vegetables can seem more expensive than purchasing a ready meal or cheap fast food product. Therefore education is key to change food preferences and understanding of the link between healthy diet and health (Hawkes C et al, 2015).

Public Health Strength's of Food labelling and policies for Public Health include that if consumers are aware of food labelling and what healthy food choices are then there preferences are likely to change and therefore decrease obesity rates. " For example 30% of adults and 41% of older adults met the " 5-a-day" and this is expected to rise as habits set in for further generations, therefore food polices are making a positive impact on the diet."(gov. co. uk, 2017).

However weaknesses for Food labelling and policies for Public Health include the fact that obesity has increased, " 67% of men and 57% of women in the UK are overweight or obese (study which was run from 1980 to 2013), this has increased by an average of 8%" (Sedghi, A., 2017). This shows that Public Health need to implement more effective Polices and Law's focusing on specific areas to make nutritional labelling more accessible to the consumer which will decrease the obesity levels in the UK.

Public Health could therefore improve the choice of fresh fruit and vegetables in smaller supermarkets which are more accessible in lower economical areas where food choices are limited. This would lead to an increased opportunity to purchase healthy produce. Work also needs to be done to ensure that education is the top objective, young children from aged 4 should be taught at school about healthy food choices, and how having a healthy diet can impact health, to ensure that life long habits are created. Consumer A strength of the use of Food labelling and Policies is that “ if one continuous system is used then consumers will become used to the system and will be able to use it to compare similar products based on their nutritional value” (gov. uk, 2017).

For consumers that are “ health conscious already traffic light labelling can provide more information about the product, however it doesn’t make a difference for consumers who are not health conscious”(gov. uk, 2017). A weakness of traffic light labelling is that it can be confusing as some products state per portion as portions are often smaller than what the consumer would consume. Therefore to improve the knowledge of the consumer individuals need to be taught how to interpret and use traffic light labelling therefore the most impactful strategies to improve consumers informed consent is to focus on helping children maintain a healthy weight. “ Consumers should be informed from an early age as it is much easier and more effective to prevent obesity than to try to reverse it later so creating and implementing policies for children and education to include cooking classes and fruit and veg education classes and introducing nutritional labelling”(Sedghi, A., 2017). This will then lead to providing them with more

informed consent and a deeper understanding of the relationship between diet and health.

Food Industry Strength's of the use of Food labelling and Polices in The Food Industry include the “ FDA enabled use of health claims which can help promote the food products, and therefore not create negative marketing, multinational companies have used this to their advantage to set themselves apart from other products in the market” (Eating Well, 2017). However weakness' include the use of Food labelling and Policies is that if a pack had four red traffic light labels then this could deter consumers from purchasing the product. However these issues could be overcome by education of children through to adults on the fact that these products can still be consumed just in smaller amounts and not every day.

For example parmesan or parma ham will have at least two reds on pack, but if consumers didn't have this product every day it would not have a detrimental affect on their health. Overall Policies and laws are not doing enough to prevent diet related diseases and obesity in the overall population. To have a sustained and equitable effect over the long term, the top policy priority should be to implement comprehensive policies that create food, information, and social environments that enable infants and young children to learn healthy preferences. “ Food Policies should aim not just to make the healthy choice the easy choice, but the healthy choice the preferred choice of the consumer” (Hawkes C et al, 2015). Word Count: 2740References1. Anon.

(2004). Public Health Nutrition. Public Health Nutrition . 7 (1), 591-800. 2.

Campos, S.

, Doxey, J. and Hammond, D..

(2011). Nutrition labels on pre-packaged foods: a systematic review. Public Health Nutrition. Cambridge University Press.

1 (1), 1496–1506. 3. Eatingwell. com . (2017). History of what is required on food labels .

Available: <http://www.eatingwell.com/article/278358/a-history-of-what-is-required-on-food-labels-and-the-nutrition-facts-panel/>. Last accessed 12/12/17.

4. food. gov. org.

(2015). Allergy, what is to consider . Available: <https://www.food.gov.uk/sites/default/files/multimedia/pdfs/publication/allergy-labelling-prepacked.pdf>. Last accessed 11/01/17. 5.

food. gov. uk. (2008). Food Labelling, Clear Labelling Guidance . Available: <https://www.food.gov.uk/sites/default/files/multimedia/pdfs/clearfoodlabelling.pdf>. Last accessed

09/12/17. 6. Foodlabel. org .

(1). Food Labelling. Available: <http://www.foodlabel.org.uk/label/allergens.aspx>. Last accessed 02/01/18.

<https://assignbuster.com/this-as-a-result-of-many-different/>

7. fph. org. (2017). What is Public Health .

Available: <http://www.fph.org.uk>. Last accessed 11/11/17. 8. Gov.

uk . (2018). Clear food labelling guidance. Available: <https://www.food.gov.uk/sites/default/files/multimedia/pdfs/clearfoodlabelling.pdf>. Last accessed 02/01/18. 9. Gov.

uk . (2016). European Food Information to Consumers Regulation No 1169/2011 (FIC). Available: <https://www.food.gov>.

uk/enforcement/regulation/fir/labelling. Last accessed 01/11/17. 10. Gov. uk . (2016). Food Standards Agency . Available: <https://www>.

food.gov.uk/sites/default/files/nutritionlabellinginformationleaflet.pdf. Last accessed 02/01/18. 11. Gov.

uk . (2017). Guide to creating Front of Pack Labelling. Available: <https://www.food.gov>.

uk/sites/default/files/multimedia/pdfs/pdf-ni/fop-guidance.pdf. Last accessed

12/11/17. 12. Gov. uk . (2017). New National Diet and Nutrition Survey shows UK population is eating too much sugar, saturated fat and salt.

Available: <https://www.gov.uk/government/news/new-national-diet-and-nutrition-survey-shows-uk-population-is-eating-too-much-sugar-saturated-fat-and-salt>. Last accessed 10/11/17. 13.

Hawkes C et al. (2015). Smart Food policies for obesity prevention. Lancet . 1 (1), 2410. 14. Hill M.

<https://assignbuster.com/this-as-a-result-of-many-different/>

(2014). The Public Policy Process. Pearson Longman. 6 15. K. Calman.
(2009).

Beyond the ' nanny state'. Stewardship and Public Health. 1 (1), 1.

16. Lang T, Barling D and Caraher M. (2009). Food policy. Integrating Health, Environment and Society. Food Policy . 1 (1), 1. 17.

Lang T & Heasman M. (2004). Food Wars: The Global Battle for Mouth, Minds and Markets.

Food Wars. 18. Malam, S, Clegg, S, Kirwan, S, McGinival, S.

(2009). Comprehension and use of UK nutrition signpost labelling schemes.

Available: <http://webarchive.nationalarchives.gov.uk/20120907091356/http://www.food.gov.uk/multimedia/pdfs/pmpreport.pdf>. Last accessed 11/11/17. 19.

PepsiCo. (2017). What We Believe Products.

Available: <http://www.pepsico.co.uk>. Last accessed 11/01/18.

20. Sedghi, A. (2017).

How obese is the UK. Available: <https://www.theguardian.com/news/datablog/2014/may/29/how-obese-is-the-uk-obesity-rates-compare-other-countries>. Last accessed 11/11/17. 21. stateofobesity.org. (2017). Obesity Trends . Available: <https://stateofobesity.org/obesity-rates-trends-overview/>. Last accessed 11/12/17.

21. stateofobesity.org. (2017). Obesity Trends . Available: <https://stateofobesity.org/obesity-rates-trends-overview/>. Last accessed 11/12/17.

How obese is the UK. Available: <https://www.theguardian.com/news/datablog/2014/may/29/how-obese-is-the-uk-obesity-rates-compare-other-countries>. Last accessed 11/11/17. 21. stateofobesity.org. (2017). Obesity Trends . Available: <https://stateofobesity.org/obesity-rates-trends-overview/>. Last accessed 11/12/17.

com/news/datablog/2014/may/29/how-obese-is-the-uk-obesity-rates-compare-other-countries. Last accessed 11/11/17. 21. stateofobesity.org. (2017). Obesity Trends . Available: <https://stateofobesity.org/obesity-rates-trends-overview/>. Last accessed 11/12/17.

org. (2017). Obesity Trends . Available: <https://stateofobesity.org/obesity-rates-trends-overview/>. Last accessed 11/12/17.

org/obesity-rates-trends-overview/. Last accessed 11/12/17.

<https://assignbuster.com/this-as-a-result-of-many-different/>