



## **Submission**

### **National Preventative Health Taskforce**

### **Australia: the healthiest country by 2020**

**December 2008**

CHOICE is a not-for-profit, non-government, non-party-political organisation established in 1959. CHOICE works to improve the lives of consumers by taking on the issues that matter to them. We arm consumers with the information to make confident choices and campaign for change when markets or regulation fails consumers.



CHOICE supports the general direction of the National Preventative Health Taskforce's discussion paper. We believe a greater focus on prevention in the health system is necessary because it will improve the overall health of the population. It may result also in reduced costs associated with preventable hospital admissions and other health services.

The Taskforce has been asked to focus on alcohol, tobacco and obesity as the key areas for action. Most interventions to prevent the harm caused by alcohol, tobacco and obesity attempt to change consumer behaviour. This is a particularly difficult task because of the addictive and/or pleasurable nature of alcohol, tobacco and many energy-dense foods. Much consumer behaviour in relation to these products would be considered irrational in an economic sense – consumers may place greater value on the immediate benefit and pleasure derived from consuming these products than on avoiding the longer-term risks or problems associated with that consumption.

A common approach to attempt to change behaviour has been to run social marketing campaigns. In some areas these have been effective but in others less so. Successive governments have run advertising and information campaigns to improve diets and increase physical activity with the aim of preventing or reducing obesity. Despite these campaigns, obesity rates continue to rise. Evidently these campaigns have not adequately achieved their aims.

This suggests that to change behaviour we need to do much more than merely provide information or adjust economic incentives. This conclusion is supported by research in behavioural economics which has shown that, in many cases, even when consumers have ready access to understandable information, they may still fail to choose the product or service that best suits their needs. This is because they may ignore or misinterpret relevant information or fail to act on that information because of other barriers to them changing their behaviour.

Biases in consumer decision-making are well known to traders of good and services. They have large marketing budgets and present their products in the best possible light within the limits of the law. They also exploit consumer biases to increase demand for their product. The large amount of advertising generated by, for example, manufacturers of junk food, makes it difficult for healthy eating messages to have an effect. CHOICE has been campaigning for greater restrictions of the marketing of junk foods. This is discussed further below.

It is generally considered that tobacco cessation programmes have been successful in Australia. They have reduced the smoking rate from 34% of adults in 1980 to 19% in 2007.<sup>1</sup> This has been achieved with a combination of measures. Price signals, through higher tobacco taxes, and information programs have been part of this. However restrictions on the advertising, sale and consumption of tobacco have also been very important elements. Concerted efforts over more than 20 years have changed community attitudes towards smoking. This change in attitude is also likely to have contributed to a further reduction in the smoking rate as smokers feel increasingly ostracised.

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<sup>1</sup> Scollo, MM and Winstanley, MH [editors]. *Tobacco in Australia: Facts and Issues*. Third Edition. Melbourne: Cancer Council Victoria; 2008. Available from: <http://www.tobaccoinaustralia.org.au>



To some extent the lessons from tobacco cessation can be applied to alcohol and obesity. However, there are some key differences in the products. There is no safe or healthy level of tobacco use, the same is not true of alcohol or energy-dense foods. Instead consumers are advised to limit or moderate their consumption. It will not be possible to make unhealthy eating and excessive consumption of alcohol socially unacceptable behaviours to the same extent that tobacco has been. The community is unlikely to accept interventions which impose significant restrictions on those products.

Alcohol and tobacco have long been subject to higher taxes than many other consumer goods. Taxes may serve two purposes. Firstly, they increase the price of the product for consumers and thereby reduce demand. Secondly, they may recover the public costs associated with the consumption of these goods, for instance, the health costs associated with tobacco use or alcohol related harm. CHOICE is not opposed to the use of taxation for either of these purposes, where it is demonstrated to be an efficient and effective intervention.

In applying high taxes to 'sin goods' the effect on all consumers must be considered. Many people consume alcohol and energy-dense foods at healthy levels. Higher taxes on high-fat foods or alcohol will also affect people who are consuming responsibly, though the financial impact would be less significant given that by definition they consume smaller amounts of these products.

On the other hand, if consumers fail to change their behaviour in response to higher taxes on these items an unintentional effect could be that already disadvantaged consumers would be further disadvantaged if they continue to purchase 'risk goods' at the same levels.

This is not as great an issue for tobacco taxes as no level of consumption is considered healthy particularly where taxes are used for programs which assist people reduce or avoid consumption and/or provide services for those harmed by excessive use. Significant research has been undertaken on the impact of alcohol taxation. International and national authorities have concluded that price increases are one of the most effective ways to reduce alcohol related harm. The impact of price was accepted by the House of Representatives Standing Committee on Family and Community Affairs in their discussion of volumetric taxation in their 2003 report on substance abuse.

However there is not, as far as we are aware, the same body of research in relation to the impact of taxation on unhealthy food. CHOICE would like to see further research into the likely implications of higher taxes on food for all consumers. But based on current research CHOICE would be concerned with an approach to harm arising from over consumption of unhealthy food which relied unduly on taxes to change consumer behaviour.

As well as providing incentives for people to change their behaviour or penalties for those who do not, programmes to support and assist people to change their behaviour are also required. The Discussion Paper notes, in relation to obesity, a major action is to 'embed physical activity and healthy eating in everyday life through school, community and workplace programmes'. We believe these types of programmes will be effective because they would be easy to access and



could involve commitments to peers and colleagues. However, as noted previously, information, education and social marketing alone have not and will not be sufficient to bring about significant changes to consumer behaviour, or the rates of overweight and obesity and diet-related diseases associated with alcohol consumption and unhealthy eating.

The general issues discussed above are relevant to interventions in relation to alcohol, tobacco and obesity. We do not wish to comment further on alcohol and tobacco interventions. However, obesity and food marketing, labelling and regulation are areas where CHOICE has a particular focus. This is discussed in more detail below.

## **OBESITY**

CHOICE's focus on obesity – particularly childhood obesity – is on where consumers interact with the market and where market failures are contributing to unhealthy choices. These also tend to be the areas that create the most concern and greatest resistance from those with vested interests. Food manufacturers are happy to support physical activity and school sport, and introduce their own healthy lifestyle advertisements but they're less keen to make any changes to marketing, labelling and the nutritional value of their products if they are going to harm their bottom line.

CHOICE is interested in how the structure of the market either helps or hinders healthy choices. We believe that simply blaming individuals, preaching self-control and better parenting has not and will not work when there are powerful markets at play.

## **FOOD MARKETING TO CHILDREN**

Food marketing to children is one feature of the market that contributes to unhealthy choices. Food marketing is designed to appeal to consumers and instill in us a desire for a particular product and the benefits that we may achieve from purchasing or consuming that product. As adults we'd all prefer to believe that we're rational, autonomous decision makers immune from the charms of marketing – but what about children?

A number of international studies and systematic reviews conclude that food advertising influences children's food preferences, diet and health<sup>2 3 4</sup> and that the majority of food advertisements that Australian children are exposed to on free-to-air television are for unhealthy foods<sup>5 6 7</sup>. We believe the evidence is now overwhelming that childhood obesity cannot be

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<sup>2</sup> Livingstone, S (2006). *New Research on Advertising Foods to Children – An Updated Review of the Literature*. Annex 9 to the Ofcom report – Television advertising of food and drink products to children.

<sup>3</sup> Hastings, GB et al (2003). [Review of Research on the Effects of Food Promotion to Children](#). Food Centre for Social Marketing, Glasgow.

<sup>4</sup> Institute of Medicine of the National Academies (2006). *Food Marketing to Children and Youth, Threat or Opportunity?* The National Academies Press.

<sup>5</sup> Chapman, K et al (2006). How much food advertising is there on Australian Television? *Health Promotion International*, 21, 172-180.



tackled without including changes to food marketing as part of the package of reforms, and conversely we believe that regulation of food marketing will have a positive impact on obesity.

Improvements to the regulation of junk food marketing to children are an important part of any Commonwealth Government obesity prevention strategy. For many years CHOICE has campaigned for better regulation of food marketing to children with the aim of protecting children from the unhealthy influence of junk food marketing and supporting parents to make healthy choices for their children.

**CHOICE commends the Taskforce for recognising the need to protect children from the unhealthy influence of junk food marketing and we support the restriction of energy-dense nutrient-poor foods and beverages during children’s viewing hours.**

### *Growing support for better Government regulation*

There is growing support for tighter restriction of junk food marketing to children. The Queensland and South Australian Governments recently canvassed views on strengthening regulation around the promotion of unhealthy food to children and the Senator Bob Brown introduced the Protecting Children from Junk Food Advertising (Broadcasting Amendments) Bill 2008 which would restrict junk food advertisements during children’s programs.

There is also growing community support for regulating or banning junk food marketing to children. A 2006 Newspoll survey commissioned by CHOICE found that 82% of the 1200 participants wanted governments to regulate the way food and drinks are advertised and marketed to children.

When asked about advertising unhealthy foods and drinks during popular children’s TV programs 65% thought government should restrict the practices and additional 24% supported government action to stop it completely. Fifty-nine per cent (59%) wanted governments to restrict the use for cartoon characters, popular media personalities and toys to market unhealthy foods to children, and a further 26% wanted the practices stopped completely.

Parents play a vital role in ensuring that children eat a healthy diet, but they need help. Governments have a role to play in providing parents with the tools to make healthy choices for their children and removing the barriers that make their job difficult.

In March 2008, CHOICE commissioned a subsequent Newspoll survey, this time specifically asking parents about their experiences of junk food marketing and its impact on their families. Of the 320 respondents, 82% were in favour of increasing the amount of government regulation over the way foods and drinks high in fat or sugar are advertised and marketed to children in Australia.

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<sup>6</sup> Australian Centre for Health Promotion (2006). *Report to NSW Health: Food advertising on Sydney television – the extent of children’s exposure*. School of Public Health, University of Sydney.

<sup>7</sup> Coalition on Food Advertising to Children. (2007), *Children’s health or corporate wealth? A case for banning television food advertising to children*.



Eighty-two per cent (82%) had experienced their child asking for a specific food or drink as a result of marketing, including advertisements; giveaways, collectibles or competitions; or the use of characters or celebrities in promotions. Eighty-eight per cent (88%) believed that food marketing contributes to parents' difficulties in ensuring that their children eat healthier foods.

In addition to the Newpoll survey, CHOICE invited consumers to share their own stories about junk food marketing to children. Here are some of their stories:

*“My son is only 17 months, not old enough to actually ask for products but he certainly reacts to characters he recognises such as Bob the Builder and The Wiggles. While shopping he’ll constantly reach out towards products with recognisable characters and starts to get frustrated if I don’t give him what he wants.”*

*“My son idolises the Australian cricket team. Because they promote KFC in the ad breaks he demands KFC to be just like his heroes. This is disturbing as cricketers should be promoting sport and physical activity, not junk food!”*

CHOICE has compiled parents' stories in a 'storybook' *Fed Up! A tale of junk food marketing to kids*. The final storybook can be viewed at: [www.choice.com.au/fedupstorybook](http://www.choice.com.au/fedupstorybook).

Clearly, there is strong community recognition that the food industry is not going to solve the childhood obesity crisis, or commit to strategies that lead to reduced consumption of their existing products. Expecting the food industry to self-regulate with respect to children's health has led to an array of public relations exercises and token gestures, rather than meaningful improvements to public health.

CHOICE is also aware that consumer research conducted by the Coalition on Food Advertising to Children (CFAC)<sup>8</sup> and abundance of responses the Cancer Council *Pull to Plug* campaign<sup>9</sup>, calling for improvements to the Children's Television Standards demonstrates strong community support for restricting or banning junk food marketing to children.

### ***The business of food marketing***

Food marketing is big business. In 2006, the food, drink and confectionery industries spent US\$13 billion on advertising their products worldwide<sup>10</sup>. In Australia in 2005/06, \$391 million was spent on food marketing, 71 per cent of which was for television advertising. Confectionery (19 per cent) and breakfast cereals (14 per cent) accounted for the biggest proportion of all

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<sup>8</sup> Morley, BC (2007). *National Community Survey of TV Food Advertising to Children*. Prepared by Centre for Behavioural Research in Cancer, The Cancer Council Victoria for the Coalition of Food Advertising to Children.

<sup>9</sup> NSW Cancer Council. (2007), *Junk Food Injunction, Spring 2007*  
[http://www.cfac.net.au/downloads/jnk\\_food\\_injctn\\_spr07.pdf](http://www.cfac.net.au/downloads/jnk_food_injctn_spr07.pdf). Accessed 17/12/08

<sup>10</sup> Advertising Age. (19 November 2007), *21<sup>st</sup> Annual Global Marketers – Part 1: Global ad spending by marketer*, <http://adage.com/images/random/datacenter/2007/globalmarketing2007.pdf>, accessed 28/4/08.



money spent on food marketing. Fast food companies such as McDonalds, KFC, Pizza Hut, Hungry Jacks and Dominos Pizza spent \$115 – 130 million in total on food marketing<sup>11</sup>.

While much of the focus has been on improving restrictions on food advertising on TV, this is just one of many ways that food manufacturers and advertisers appeal to children. But it's much more than TV ads. Supermarket shelves carry a range of products featuring kids' favourite characters like Nemo, Bratz and Barbie. At the movies, in magazines or online – games, toys, celebrities and popular cartoon characters are used to promote an array of sugary and high-fat snacks. On the sporting field, sponsorship deals mean the logos of fast-food companies are emblazoned on children's chests as they sprint towards the finish line.

Other common marketing techniques include:

- competitions to win a holiday, bike or MP3 player;
- collecting product tokens to redeem a prize;
- fast food meal deals where you need to visit the outlet every week to collect the entire set of toys;
- the use of children's cartoon characters, media personalities and sporting heroes to promote foods to kids;
- sponsorship of school and professional sports; and
- the use of junk foods in fundraising.

While on one hand representatives of the advertising industry may claim there is only a weak link between TV commercials for junk food and increased consumption of these products<sup>12</sup>, they also claim that advertising can – and does – play a positive role in influencing healthy choices<sup>13</sup>.

### ***Current regulations fail to protect children***

CHOICE believes that the current co-regulatory system relating to food marketing to children is ineffective in addressing the influence of advertisements for unhealthy foods for the following reasons:

- Regulation of food marketing to children is mostly left to industry codes.
- The majority of food advertisements are for unhealthy foods and the 'advertised' diet is in direct opposition to a healthy one.
- The only government regulations are the Children's Television Standards which apply only to advertisements during children's (C) programs.

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<sup>11</sup> Nielsen Media Research. (8 September 2006), *Special Report:2006 Top 50 Advertisers*, nielsenmedia.com.au/files/Top%2050%20Fiscal%2005%2006%20B&T.pdf, accessed 28/4/08.

<sup>12</sup> ABC The World Today. (24 April 2006), *Fast food marketers hit back at critics*, <http://www.abc.net.au/worldtoday/content/2006/s1622810.htm>, accessed 28/4/08.

<sup>13</sup> Advertising Federation of Australia. (2007), *Submission to the Australian Communications and Media Authority Review of the Children's television Standards*. [http://acma.gov.au/webwr/assets/main/lib310132/20\\_advertising\\_federation\\_of\\_aust.pdf](http://acma.gov.au/webwr/assets/main/lib310132/20_advertising_federation_of_aust.pdf), accessed 28/4/08.



- More children watch television programs outside the designated children's (C) programming.
- Existing standards and codes don't prevent the use of celebrities, cartoon characters and sporting personalities to promote unhealthy foods to children.
- There are no effective guidelines around the extensive use of competitions, prizes, giveaways and premiums are used to create incentives to buy unhealthy foods such as confectionery, soft drinks and snack foods.
- There are no government standards on marketing to children in other media, in particular subscription (pay) television and the Internet.

A copy of CHOICE's submission to the Australian Communications and Media Authority (ACMA) on the review of the Children's Television Standards has been provided for further information.

CHOICE believes that we now have the capacity to help even the scales, thanks to the development of a nutrient profiling system by Food Standards Australia New Zealand (FSANZ). The system assesses the overall nutrition content of a food – weighing up healthy and unhealthy nutrients. If this model was incorporated into food marketing regulation, foods that fail these nutrition tests would be prohibited from being marketed to children.

Nutrition-based regulation should apply not only during C and P programs but also during periods when a large proportion of children are viewing, and to programs that are popular with children. It could also be used to restrict other forms of marketing that are extensively used to promote unhealthy foods to children, e.g. the use of licensed characters, competitions and games, and children's material on food manufacturers' websites<sup>14</sup>.

In recent months, food manufacturers have announced their own initiatives to limit junk food marketing to children. CHOICE commends food manufacturers and advertisers for acknowledging the contribution that unhealthy foods and the way that they are marketed makes to the childhood obesity problem.

Unfortunately, these initiatives suffer from a significant limitation. They only restrict junk food advertising when the majority of the viewing audience are children under 12 years rather than during the periods or programs when more children are watching TV.

The OzTAM data published by ACMA in conjunction with its 2007 CTS Review Issues Paper indicates many more children are watching TV between 5pm and 9pm, than in the period immediately after school which has been traditionally thought of as children's viewing times<sup>15</sup>.

The list of the 50 top-rating programs for children aged 0 – 14 in January to June 2006 includes few C programs. Reality TV programs *Big Brother*, *Australian Idol* and *The Biggest Loser*

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<sup>14</sup> Centre for Health Initiatives. (2007), Food Marketing to Children in Australia: A report prepared for the Cancer Council Australia's Nutrition and Physical Activity Committee,

<http://www.cancer.org.au/File/PolicyPublications/FoodMarketingtoChildreninAustralia.pdf>, accessed 13/6/08.

<sup>15</sup> *Children's Viewing Patterns on Commercial, Free-to-air and Subscription Television, report analysing audience and ratings data for 2001, 2005 and 2006*. Australian Government.



feature prominently as do the PG-rated animated series *The Simpsons* and *Futurama*. Because many adults and older teenagers also watch these programs, the advertisements aired during these shows would not be subject to food advertising restrictions.

The current concept of children's viewing periods is clearly outdated. If junk food marketing restrictions are based solely on traditional children's viewing periods, they will have limited effect on children's exposure to junk food advertisements.

Food manufacturers don't intentionally set out to make children fat, but they inherently benefit when children consume more. First and foremost their duty is to their shareholders so we cannot expect them to introduce voluntary regulation that will have any real impact on their bottom line.

## **AN INTERNATIONAL CODE ON JUNK FOOD MARKETING TO CHILDREN**

The problems of childhood obesity and the influence of food marketing on children are not unique to Australia. The World Health Organisation's Global Strategy on Diet, Health and Disease recognises that unhealthy diets and lack of physical activity have contributed to the increasing burden of non-communicable diseases worldwide. It highlights the role of marketing, advertising, sponsorship and promotion of foods, and encourages the food and advertising industries to support the Strategy by marketing unhealthy foods responsibly, particularly when it comes to children<sup>16</sup>.

At the 60<sup>th</sup> World Health Assembly in 2007 member states agreed to the development of a set of recommendations on the marketing of food and non-alcoholic beverages to children. Earlier this year, Consumers International – the global federation of consumer organisations – in partnership with the International Obesity Taskforce, presented a set of *Recommendations for an International Code of the Marketing of Food and Non-Alcoholic Beverages to Children* to the 61<sup>st</sup> World Health Assembly. The key elements of the recommendations are as follows:

1. The Code should apply to TV advertisements as well as other forms of promotion such as internet, text messages, on pack and in-store promotions.
2. There should be no advertising or promotion to children of energy dense, nutrient poor foods high in fat, salt and sugar.
3. A nutrient profiling system (such as the one developed by UK Food Standards Agency and adapted by FSANZ) would be used to assess whether a product is healthy or unhealthy, and therefore appropriate for promoting to children.

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<sup>16</sup> Consumers International and the International Obesity Taskforce. (2008), Recommendations for an International Code on Marketing of Food and Non-Alcoholic Beverages to Children, [http://consint.live.poptech.coop/shared\\_asp\\_files/GFSR.asp?NodeID=97478](http://consint.live.poptech.coop/shared_asp_files/GFSR.asp?NodeID=97478) accessed 13/6/08.



4. Restrictions should apply to broadcast advertisements and promotions when a significant proportion of children are watching and when children make up a significant proportion of the overall audience – between 6am and 9pm.
5. Non-broadcast media that may be considered within the scope of the Code may include the use of personalities and celebrities; cartoon characters (licensed or created by manufacturers); free gifts or toys; competitions and games; novel shapes and packaging.
6. Energy dense, micronutrient poor foods high in fat, salt and sugar should not be promoted to parents or carers as being suitable for children.

**As an active member of Consumers International, CHOICE supports these recommendations and the development of an international code on food marketing to children by the World Health Assembly. We call on the Australian Government to support this work and the Consumers International recommendations.**

### ***Food regulation***

The primary objectives of food regulation are:

1. the protection of public health and safety
2. the provision of adequate information relating to food to enable consumers to make informed choices
3. the prevention of misleading and deceptive conduct.

There is increasing debate over whether food regulation should be used to meet national health objectives related to diet-related conditions such as obesity, heart disease, Type-2 diabetes and some cancers as well as nutrient deficiencies.

While a wide range of strategies are needed to address these conditions, food regulation must support other public health strategies to reduce the burden of diet-related disease. Food regulatory decisions – when made without regard to public health implications – have the capacity to undermine public health initiatives.

FSANZ recently permitted a range of vitamins and minerals to be added to sweetened water-based ‘formulated’ beverages. FSANZ set a limit on the sugar content of formulated beverages but it is set so high that one 600ml serve of a formulated beverage could provide an adult with 50% of their recommended daily intake of sugar.

Presenting sugary drinks as a source of vitamins and minerals runs counter to public health efforts that encourage consumers to reduce their intake of sweetened beverages and other energy dense foods. Decisions such as this only serve to add to Australia’s escalating levels of overweight and obesity as they enable sugary foods and drinks to be marketed as healthy products because of added vitamins and minerals.



**CHOICE believes that FSANZ must give greater consideration to broader long-term public health consequences of food regulatory decision-making, in addition to the more immediate, short-term food safety issues. However, there also needs to be greater public health consideration at the policy development level, and clear direction given to FSANZ that food and food regulation plays a vital role in protecting and improving the health and nutrition of all Australians.**

### *Food labelling*

CHOICE is also aware that the Australian New Zealand Food Regulation Ministerial Council has initiated a comprehensive review of food labelling regulation and policy. We understand that this review has come about in part in an effort to reduce the regulatory burden of food regulation on food business and that some members of the food industry and some government agencies are calling for food labelling to be subject to co-regulatory or self-regulatory systems rather than government regulation.

CHOICE supports all the current mandatory information requirements on food labels. Information such as date marking, storage suggestions, allergen labelling, ingredient lists and nutrition information panels protect the health and safety of consumers and allow them to make informed choices about the content of the foods they eat and the impact it may have on their health. With consumers increasingly interested in how and where their food is produced, genetic modification status, country of origin information and 'organic' and free range' labelling also require regulation to ensure that consumers are getting what they pay for.

There has been considerable progress in relation to food labelling over the last 20 years, much of this is due to the advocacy efforts of consumer and public health groups to ensure that labels assist consumers to make health and informed choices. These improvements came about despite considerable reluctance and resistance from the food industry<sup>17</sup>. Suggestions to explore self-regulatory and voluntary approaches fail to acknowledge that food labelling laws are vital to meet the three objectives of food regulation.

**CHOICE does not believe it is in the best interests of consumers to give greater regulatory responsibility to companies and organisations who benefit most from making exaggerated and misleading claims about what's in a product, how it was made and the nutritional and health benefits it provides.**

### *Nutrition labelling*

Increasingly, food labels are being used as a vehicle for delivering nutrition information, healthy eating messages, and claims about the potential health benefits of consuming particular foods.

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<sup>17</sup> CHOICE. (2007), Where would you be without CHOICE? CHOICE Achievements 1996 – 2006.



Factual nutrition information required by governments and claims made by manufacturers to increase product sales compete for label space and the consumer's attention.

CHOICE strongly advocated for the introduction of mandatory nutrition information panels. Nutrition information panels were intended to provide consumers with information about what was in their food. There is now increasing expectations that consumers should use food labels to make healthy choices, and there are calls for Australia to introduce front of pack nutrition labelling.

Earlier this year, CHOICE – in collaboration with a coalition of public health groups including the Cancer Council – conducted consumer research to see which front of pack labelling system was most effective in helping Australian consumers to make healthy choices.

Our research surveyed 790 consumers who were responsible for grocery shopping in their household, asking them to identify healthier products using one of four different systems. The labelling systems were:

1. Traffic lights for total fat, saturated fat, sugars and sodium content
2. Traffic lights for total fat, saturated fat, sugars and sodium content, and an additional traffic light for the overall healthiness of the product
3. Monochrome % Daily Intake for all mandatory nutrients on the nutrition information panel (currently being used by some manufacturers and promoted by the Australian Food and Grocery Council)
4. % Daily Intake for all mandatory nutrients on the nutrition information panel with traffic lights colours for total fat, saturated fat, sugars and sodium content.

There was overwhelming support among survey participants for a *consistent* front of pack nutrition labelling system (90%). Of the four systems, consumers using the Traffic Light system were better able to correctly identify healthier products than consumers using the monochrome % Daily Intake system. The research also found that consumers from lower-socioeconomic groups were six times less likely to correctly identify the healthier food using the monochrome % Daily Intake system than consumers from higher socio-economic groups. There was no such difference in consumers' ability to identify healthier products using the Traffic Light systems.

A summary of the research findings is provided with this submission or can be found at <http://www.choice.com.au/files/f133668.pdf>. These findings are consistent with results of similar consumer research conducted by the UK Food Standards Agency<sup>18</sup> and the UK consumer group Which?<sup>19</sup> The West Australian and South Australian health ministers have also called for traffic light labels to help consumers make healthier choices<sup>20 21</sup>.

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<sup>18</sup> Synovate (2005), Quantitative Evaluation of Alternative Food Signposting Concepts, prepared for COI on behalf of Food Standards Agency, <http://www.foodstandards.gov.uk/multimedia/pdfs/signpostquanresearch.pdf>, accessed 13/6/08.

<sup>19</sup> Which? (2006), *Campaign Report: Healthy Signs*, Consumers Association UK.

<sup>20</sup> Government of Western Australia. (2 May 2008), *Complicated food labels hard to digest*, <http://www.mediastatements.wa.gov.au/Pages/CurrentMinistersSearch.aspx?ItemId=130088&minister=McGinty&admin=Carpen ter>, accessed 13/6/08.

<sup>21</sup> Government of South Australia. (13 September 2007), *Green = Go for healthy food in school canteens*, <http://www.ministers.sa.gov.au/news.php?id=2144>, access 13/6/08/



CHOICE is aware that Australian New Zealand Food Regulation Ministerial Council has asked the Food Regulation Standing Committee to develop a draft ministerial policy guideline on front of pack labelling system. We hope that the National Preventative Health Taskforce will participate in the associated consultation process to reinforce the need for a front of pack nutrition labelling system helps Australians make healthier choices and reduce the impact that obesity and diet-related diseases have on our health system and our economy, rather than a system that causes the least offence to the food industry and its bottom line.

**CHOICE supports the introduction of a front of pack nutrition labelling system that uses traffic lights to indicate how high or low a product is in total fat, saturated fat, sugars and sodium. In order to be most effective in assisting consumers to make healthy choices at-a-glance, the traffic light system should be mandatory on all food labels and be displayed in one consistent format to enable consumers to compare products within the same food categories (e.g. two different chocolate biscuits) and across different categories (e.g. a chocolate biscuit and a muesli bar).**