Front of Pack Labels (FOPL)

Your right to healthy food
VOICE is an acronym for Voluntary Organisation in Interest of Consumer Education which has pioneered the protection of consumers in India. Based in New Delhi, the organisation has championed consumer education in the country since 1983. Over the years, VOICE has been representing consumers and protecting their interests with policy-makers, the judiciary and statutory regulatory bodies. From 1991 onwards, VOICE has been spearheading an independent and non-partisan programme on “comparative testing of products” with the technical support of Stiftung Warentest of Germany. Its activities have been supported by the government of India’s Ministry of Consumer Affairs besides other ministries and departments. VOICE has among its stakeholders many reputed Indian and international organisations supporting social causes over and above individuals, academicians, professionals and volunteers who work relentlessly to educate consumers and make them aware of their rights. VOICE provides independent and unbiased reviews of food products, consumer durables, financial and banking services and much more. It also runs a legal help-desk for consumers.
Role of Consumer VOICE in pushing for FOPL in India

The role of Consumer Voice in the unfolding of the Front of Pack Label (FOPL) dialogue dates back to 2016 when based on international news on implementation of FOPL in some countries it wrote to the Indian regulator, FSSAI about the need to introduce label designs for unhealthy processed and ready to eat packaged foods. These cited global examples besides the Traffic Light program run by Consumer Voice in many schools in Delhi where the canteen food were tested and ranked as per the traffic light signal. These were showcased on big boards in the school canteens and a workshop was organized in many schools to bring awareness amongst children to moderate the consumption of unhealthy foods.

Consumer Voice actively participated in the discussions with FSSAI prior to the draft notification in 2018 to highlight the importance of FOPL as a means of consumer information for healthy and unhealthy foods. This was focused as a consumer right. Post the draft notification, it submitted a detailed response applauding the move to introduce FOPL while pointing out key factors missing in the draft document. This was a simultaneous process when the fight for banning Trans Fats was at its peak with a lot of industry opposition.

The mission of prompting the Regulator at regular intervals continued besides participation in the stakeholder consultation meetings. It was emphasized that a strong FOPL integrates well in the Eat Right India movement and mission with the intention of making foods healthy, nutritious and safe. Children were the focal point and the mission of FSSAI to put a regulation for marketing of junk foods in and around schools came as a booster to the long drawn demand by the civil society.

When the consultative committee was formed, Consumer Voice actively participated in all the discussions and reemphasized the need for bringing in the global best practices of Latin America of Warning or High In label designs for India as Indian consumers can easily read and understand the symbols. It also objected to many clauses brought on the table by the industry like voluntary scheme, per serve, traffic light or star labels, high threshold levels, 5 year implementation period etc besides the stand to stick to WHO SEARO model as cut offs. Some of the issues were decided in our favour and minuted by FSSAI.

The discussions are continuing and the civil society is eagerly awaiting the call by FSSAI to discuss matters mainly on the label design, threshold levels and implementation time. Since this is a matter of health of consumers in the decade of rise in non-communicable diseases like hypertension, cardiovascular diseases, and diabetes, which is a lead cause of mortality and hospitalization, the subject of FOPL will continue to occupy our working space for ensuring a robust regulation within a short time. We sincerely hope that India will adopt a strong and meaningful FOPL declaration so as to save millions of lives.

Mr Ashim Sanyal
COO, Consumer VOICE
Introduction

In order to tackle the growing burden of nutrition-related non-communicable diseases (NCDs), government-led strategies and policies have been introduced to improve the diet in the population. Among the variety of possible interventions, front-of-pack nutrition labels (FOPLs) have received growing attention from public authorities, and are now considered one of the key policies to tackle NCDs.

5.8 million Indians die every year from NCDs (such as cancer, diabetes and cardiovascular diseases) but most of these deadly diseases, although hard to treat, can be prevented by modifying diets and transforming the food industry.

Front-of-package warning labelling is a key component of a comprehensive strategy to promote healthier lives, as it enables consumers to identify in a quick, clear and effective way, products high in sugar, sodium, saturated fats, trans fats and total fats, the critical nutrients associated with the NCD burden in India. Research has revealed that countries such as Chile which have adopted the warning label system of FOPL have succeeded in reducing consumption of the unhealthiest ultra-processed foods and beverages. With Brazil, Israel, Chile and more recently Colombia adopting ‘high in’ warning labels on their food packets – considered a best practice approach – there is a global momentum to make packaged foods safer and healthier.

Ultra-processed food products (UPP) have become increasingly available across the world

“I think it is a very well established fact that the foods which are high in contents of fat, salt sugar, - the ultra-processed foods lead to obesity, NCDs, cardiovascular diseases, diabetes, hypertension. According to a Lancet study published in 2019, consumption of these foods is significantly associated with the increasing prevalence of obesity, coronary heart diseases, etc. in India.”

Dr. Madhukar Mittal
Additional Professor, Endocrinology and Metabolism
AIIMS, Jodhpur
UPP are frequently high in calories and have little nutritional value. The great majority of these pre-packaged foods are ultra-processed with high levels of added sugars, sodium (salt), saturated fats, and refined carbohydrates.

Besides having a bad nutrient profile, UPP are linked to nonrecommended dietary practices, including overeating, mindless eating, and fast eating, as they increase the speed of eating rate, worsen satiety, and promote excessive energy intake.

A considerable body of research highlights the large and significant impact of consuming ultra-processed foods on the major NCDs, including obesity, diabetes and hypertension.

As of 2016, more than 1.9 billion individuals have been estimated to have overweight or obesity, and without intervention, this global health epidemic will continue to grow.

What is FOPL?

- Based nutrient profiling models
- Help consumers select healthier foods
- It is aimed at making consumers aware of food products that are high in fat, sugar and salt content.
- It will improve dietary intake and help in reducing risks of non-communicable diseases like cardiovascular diseases, diabetes, hypertension etc
- FOPL refers to nutrition labelling systems that:
  - are presented on the front of food packages (in the principal field of vision);
  - comprise an underpinning nutrient profile model that considers the overall nutrition quality of the product or the nutrients of concern for NCDs (or both); and
  - present simple, often graphic information on the nutrient content or nutritional quality of products.
The World Health Organization has set the upper limit intake for the critical nutrients that provide energy to be less than the following:

- 10 percent from free sugars (with additional benefit if lower than 5 percent)
- 10 percent from saturated fats
- 30 percent from total fats
- 1 percent from trans fats For sodium (salt), the recommendation has an absolute and a relative upper limit.
- For adults, with an average 2000 kcal energy requirement, sodium intake should be lower than 2000 mg.
- For children, the upper limit for sodium should be adjusted downward based on the energy requirements
World Health Organization (WHO) Guiding Principles and Framework Manual For Front-Of-Pack Labelling For Promoting Healthy Diets

- **Principle 1:** 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.

- **Principle 2:** A single system should be developed to improve the impact of the FOPL system.

- **Principle 3:** FOPL systems should not displace nutrient declarations on food packages.

- **Principle 4:** A monitoring and review process should be developed as part of the overall FOPL system for continuing improvements or adjustments, as required.

- **Principle 5:** The aims, scope, and principles of the FOPL system should be transparent and easily accessible.

What are the proposed draft codex guidelines on FOPL?

- FOPL programs should use a **combination of text and symbols** to present nutrition information quickly and simply.
- The FOPL systems under consideration should be evaluated based on desired impact to select the better one for a given country, and to defend the selection during implementation.
- Labels should be based on **national health values** and be easy to see and understand so that they can meet their purpose, whether this is improving ease of comparison of different products and/or the ability to identify products that are excessive in critical nutrients.
  - If a country does not currently have national dietary guidelines, the system could be aligned with global or regional dietary guidance, such as those systems designed by the WHO and its Regional Offices.
- One system should be used in each country.
  - See the WHO guiding principles and framework manual for front-of-pack labelling for promoting healthy diets for further information.
- There should be an **education program** to help consumers understand and use labels.
- FOPL programs should be evaluated periodically and improved as needed.
- The WHO guiding principles and framework manual for front-of-pack labelling for promoting healthy diets should be an important resource for the Codex. Furthermore, it will be important to make sure that the Codex guidelines and the WHO guiding principles complement one another.

(Source: World Heart Federation)
Why is FOPL important?

- FOPL can enable consumers to make informed and healthier choices
- It will quickly inform consumers about the relative healthiness of products or by warning them when products are excessive in added sugars, total fat, saturated fats, trans fats and/or sodium, which are the critical nutrients associated with top risk factors for the most burdensome diseases in many countries (e.g. heart disease, high blood pressure, high fasting plasma glucose, and overweight and obesity).
- Consumers need help making healthy choices and identifying harmful products

Comparison of ‘High’ Nutrient Criteria of HFSS Model With Other Models

<table>
<thead>
<tr>
<th>Excessive/ High nutrient criteria</th>
<th>HFSS model</th>
<th>PAHO model</th>
<th>SEARO model</th>
</tr>
</thead>
<tbody>
<tr>
<td>Added sugar</td>
<td>&gt;10% total energy</td>
<td>--</td>
<td>--</td>
</tr>
<tr>
<td>Free sugar</td>
<td>--</td>
<td>≥10% total energy</td>
<td>≥10% total energy</td>
</tr>
<tr>
<td>Sodium</td>
<td>Threshold values specified for food categories</td>
<td>≥1 mg per kCal</td>
<td>≥1 mg per kCal</td>
</tr>
<tr>
<td>Total fat</td>
<td>--</td>
<td>≥30% total energy</td>
<td>≥30% total energy</td>
</tr>
<tr>
<td>TFA (Trans Fat)</td>
<td>&gt;1% total energy</td>
<td>&gt;1% total energy</td>
<td>Exclusion criteria</td>
</tr>
<tr>
<td>SAFA (Saturated Fat)</td>
<td>Threshold values specified for food categories</td>
<td>≥10% total energy</td>
<td>≥10% total energy</td>
</tr>
<tr>
<td>Other sweeteners</td>
<td>--</td>
<td>Any amount</td>
<td>--</td>
</tr>
</tbody>
</table>

(Source: FSSAI)
Worldwide Food Labeling Systems

Summary Systems

Nutri score
(e.g., five possible scores in the Nutri-Score system developed in France (A, B, C, D, or E)

Health Star rating system

The Australian Government introduced a voluntary Health Star Ratings (HSR) front-of-pack labelling system in June 2014 on a voluntary basis for five years.
The system rates food products on a 1 to 5 star scale (with ½ star increments) based on four aspects of food associated with increasing risk factors for chronic disease – energy, saturated fat, sodium, and total sugar – as well as positive aspects, namely protein, dietary fiber, fruit, vegetables, nuts and legumes and, for some products, calcium. The overall rating of the product is determined based on an algorithm that awards stars according to the quantity of these components within the product – i.e. the more stars, the healthier the food.

Components: Negative components: Energy, saturated fat, sodium and total sugars. Positive components: Fruit and vegetable content, dietary fibre and protein content.

Reference Unit: Nutritional composition of 100 g or 100 mL (developed in Australia, from half star to five stars)

Color-coded GDA or Reference Intake (RI) FOPL systems

In 2017, the voluntary nutriscore FOPL scheme was initiated in France)
In 2017, the voluntary nutriscore FOPL scheme was initiated in France, and it was recently also approved to be used in Belgium, Spain and Portugal by their respective Ministries of Health. The Nutri-Score, also called the 5-color system, is a system of nutrition labeling based on a logo with five values ranging from A to E and from green to red, established according to the nutritional value of a food product.


Reference unit:
- Nutrition composition per 100g or ml
- Use three different colors corresponding to traffic light road signs, depending on the level of nutrient content
- Red for a high level of nutrient content, amber for medium, or green for low

“HIGH/EXCESSIVE” systems, also known as nutritional warnings

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"Understanding nutrition label is tough unless one has full knowledge of it or is a nutritionist. Having a High In label on food items will do wonders."

Dr Nancy Sahni, Senior Dietician, Department of Dietetics, PGIMER, Chandigarh
On December 11, 2017, Chilean Ministry of Health (MOH) published in the Official Gazette, Decree Nº1, which outlines the implementing regulation for labeling and advertising of packaged foods and beverages that carry one or more black octagonal stop sign labels. Chile notified the proposed implementing regulation to the World Trade Organization Technical Barriers to Trade Committee (WTO/TBT) on November 15, 2016. On June 7, 2012, Chile’s MOH published Law 20.606 commonly known as “Super 8 Law” or Law of Food Labeling and Advertising. According to Article 6 of Law 20.606, all food advertising must contain a message, determined by MOH, which promotes habits of a healthy life. Decree Nº1 is the implementing regulation that sets the characteristics and the disposition of the graphic norm to use for the message.

Components: Negative components: Energy, sodium, total sugars, saturated fats.

Reference unit:

Nutritional composition per 100g

use front-of-package text-based seals to inform consumers when a product contains excessive amounts of critical nutrients Eg High In Sugar

Adopted in Chile, Mexico, Brazil

**Success Stories**

**Chile**

In 2012, Chile adopted some of the strongest mandatory FOPL regulations to warn consumers if products were high in either sugar, sodium, saturated fats, or calories. Because the labelling system is relatively simple and has been used by all types of consumers in Chile, it has an impact across different socioeconomic and education levels, and greatly impacts the purchasing pattern of all Chileans. It has also contributed to the reformulation of some products.

**Mexico**

In October of 2019, the Mexican Congress voted to approve the inclusion of front-of-pack warning labels in the General Health Law, thereby replacing the Guideline Daily Amount (GDA) nutrition labels. The official Front-of-Pack Labeling (FOPL) Regulation, NOM-051, which implements this part of the law, was reviewed and debated from August 2019 to January 24, 2020, when the modification was approved, rendering the reform a success. Studies have shown that the High In has helped in decreasing in the consumption of critical ingredients in low- and middle-income Mexican consumers.
Traffic light vs Warning Labels

Attention capturing, information processing and understanding

• Food purchase decisions are made in very short time frames. For this reason FOPL systems that quickly capture consumers’ attention and ease information processing are preferable to those that require more time and cognitive effort to process.

• Nutrition warning systems are located and read more quickly than traffic light colored-coded systems

• They are better at improving consumers’ understanding of excess nutrient content than traffic light systems

Usage of information and influence on purchase decision

• Traffic light systems, to some extent, can improve consumer understating about the nutrition composition of the product when they are compared with the absence of a FOPL.

• In contrast, nutrition warning systems have effectively decreased consumers’ intent to purchase products containing excessive amounts of critical nutrients across different populations and influenced consumers’ to make healthier purchase decisions

Why should FOPL be mandatory?

“FOPL is the most effective approach for preventing obesity and nutrition-related NCDs like diabetes and hypertension. People need to understand clearly and simply what is in the food that they are buying. Food labels have to interpret the nutrition information for consumers across age, income and literacy levels.”

Dr. Barry Popkin
W.R. Kenan Junior, University of North Carolina
Gillings School of Global Public Health
• Public health measures that address important risks for the population should be mandatory, to ensure the protection of the entire population.
• When the health of the population is at risk, rigorous and urgent public health measures need to be mandated and enforced to ensure the protection of the public’s health.
• There is no evidence to support that a voluntary approach can meet the intended purpose of a FOPL system. On the contrary, evidence has shown that food industry compliance with voluntary FOPL is low especially in instances where labels will reflect poorly on the products.
• The food industry is unlikely to comply with any voluntary FOPL that highlights negative properties of products they manufacture and discourages their purchase by consumers.

The Indian Journey to Healthy Life
2011- Food Safety and Standards (Packaging and Labelling) Regulations, require companies to disclose energy (kilocalories), protein, carbohydrates, total fat, trans-fat and saturated fat contained per 100g or per millilitre or per serve.

2012 - The Codex Alimentarius Commission recommended mandatory nutrition guidelines even when health claims are not made on a product.

April 2018- FSSAI announced the formation of an expert panel to look into the draft of Food Safety and Standards (Labelling & Display) Regulations 2018.

2018- the FSSAI came up with a draft law which recommended that a packet should have clear information on how much each nutrient, such as salt, sugar, contributed to the RDA and it must be declared as sodium chloride for instance, and that those ingredients which breached the RDA should be marked in ‘red’.

25th June 2019- The Food Safety and Standards Authority of India (FSSAI) published a draft Food Safety and Standards (Labelling and Display) Regulations, 2019.

July, 2019- FOPL was included within the draft Food Safety and Standards (Labelling and Display) Regulations, 2019 in India.

December 17, 2019, CSE released the results of its study of 33 packaged and fast foods that were found to be high in salt, sugar and fat.

Jan 2021, FSSAI set up the core committee and restarted the discussions on the Draft FOPL Act which included Consumer Voice

Jan - July 2021 – Seven rounds of discussion have happened with consumer organizations and Industry for consensus approach

**NPM Thresholds - SEARO (South-East Asia Region Organization) model**

The nutrient profile model is meant to be applied to foods consumed by a healthy population and excludes special food supplements for specific disease conditions.

**Threshold criteria for SEARO Model**

1. The daily energy requirement is approximately 2000-2150 kcal for a 10-11 year old, moderately active female and male child respectively. Therefore an average of 2100 kcals is used as the energy intake for calculation of Thresholds. This model is targeted towards children of all ages and both sexes and activity levels.

2. (Approximately 25% of the energy requirement is from each main meal (3 meals/day) and 10-12% from snacks (2 snacks/day). Therefore, thresholds have been calculated on the basis that each 100 g of product provides approximately 230 kcals. This energy level also aligns with the threshold energy content of foods defined as energy dense by various agencies

- The nutrients for which thresholds have been set are: total fat, saturated fat, total sugars, added sugars and sodium. The thresholds are based on the WHO Population Nutrient Intake Goals for preventing obesity and related NCDs.
For sodium, which is not a calorie-containing nutrient, an absolute number for the intake goal for adults has been established (2,000 mg), which is to be adjusted downward for children according to their energy requirements. Countries can consider applying an absolute ceiling of 300 mg of sodium per 100g of product, in addition to the 1mg:1kcal sodium: energy ratio threshold recommended in the PAHO Nutrient Profile Model.

For ultra-processed and processed drinks that provide no energy, the upper limit for sodium can be set at 40mg per 100ml, which is double the amount of the maximum usual sodium content found in drinkable water according to WHO guideline on drinking-water quality.

Even as we move to fortify our food, it is equally critical to equip people with information regarding harmful nutrients in their food products including high concentration of salt, sugar and fats. As a consumer we have a right to know what is being sold and we must exercise this right for our health and the health of our family.

Padma Shri Awardee
Dr Chandrakant Pandav
President
Indian Coalition for the Control of Iodine Deficiency Disorders (ICCIDD)
Per Serving Vs Per Unit

Likewise, the use of per serving sizes, which Industry usually favour, is also increasingly being rejected across the globe. ‘Per serving sizes’ are found to be arbitrary and difficult to regulate as they are not standardised. It lacks consistency thereby posing a challenge to consumers’ ability to easily interpret information and compare food products. Such complex serving size logic should not be introduced in a country like India, where consumers hardly spend less than 10 seconds to choose a product. Other than causing confusion, it also gives room to the industry to manipulate the thresholds, altering the serving size, and then dipping the percentage of products that will have the warning with ‘High in’ label. Instead ‘per 100g/100ml’ format largely recommended by the Codex and adopted by most countries, including European Union Member States and Israel (‘per serving’ as a voluntary addition) should be adopted.

Challenges

Industry Interference

Influencing the government through executive, legislative and judicial powers
- Lobby
- Building pressure through other arms of the government
- Funding the election, contributing to party fund, sponsoring mega event
- Public-Private partnership/self regulation/voluntary agreements/ Voluntary disclosure
- Litigation against the policy or threaten to litigate
- Use of trade and investment agreement to challenge the policy

Industry Interference - Influencing the Science
- Sponsor and disseminate biased research
- Influencing academic institutions, scholars, professional nutrition & health associations through financial support, recruitment.
- Demonise and criticise scientific evidence that opposes industry interests
- Discredit and intimidate public health advocates or researchers
- Industry sponsored education programs for universities / educational institutions

Influencing national and regional Civil Societies and Media
- CSR and philanthropies
- Support grassroot organisation involved in implementation and service delivery.
- Alliances with Health Organisations to co-opt them
- Placing industry supported bodies as independent think-tank
- Fragmentation of civil society (to create antagonism between them)
- Highlighting role of industry in country’s economic growth and aspirations.
- Job loss / creation , economic slowdown / recession, economic hardship for poor and marginalized
- Pushing for Self-regulation, voluntary disclosure, public-private partnership, false solutions to shift adverse public opinion.
- Demonise the Government as “Nanny state” and bogey of “wasting the taxpayer’s money”.


Industry claims and myths

Industry claim #1: FOPL is not an effective solution to public health problems.

<table>
<thead>
<tr>
<th>The industry claims</th>
<th>The evidence says</th>
</tr>
</thead>
<tbody>
<tr>
<td>• “FOPL does not reduce overweight or obesity”</td>
<td>FOPL, as implemented in several countries, have led to decreased purchases, reduced perceptions of healthfulness, and in some cases has led to reformulation of “high in” products. Consumption of these products is linked to increased obesity and diet-related diseases, thus, FOPL may help to reduce obesity and diet-related diseases.</td>
</tr>
<tr>
<td>• There is insufficient evidence on FOPL’s impact on reducing obesity.</td>
<td></td>
</tr>
</tbody>
</table>

Industry claim #2: Individuals can make personal choices about what they eat, and they are responsible for their own health.

<table>
<thead>
<tr>
<th>The industry claims:</th>
<th>The evidence says:</th>
</tr>
</thead>
<tbody>
<tr>
<td>• “FOPL is not the solution to address overweight, obesity, and diabetes. The solution is for adults and parents to make the right choices.”</td>
<td>Consumers have trouble understanding back-of-pack-age nutrition labels and need a simpler and more effective way to choose relatively healthier products when presented with several options.</td>
</tr>
<tr>
<td>• “FOPL is not necessary. Adults and parents can responsibly purchase and consume healthy foods.”</td>
<td></td>
</tr>
</tbody>
</table>

Industry claim #3a: The traffic light label is preferred by consumers.

<table>
<thead>
<tr>
<th>The industry claims:</th>
<th>The evidence says:</th>
</tr>
</thead>
<tbody>
<tr>
<td>“The traffic light label is preferred by consumers and the colors help facilitate consumer choice and understanding.”</td>
<td>Research shows that the traffic light label does not change purchase decisions and performs worse than FOPL warnings at helping consumers identify unhealthy foods.</td>
</tr>
<tr>
<td>“Consumers prefer the UK traffic light label; it is more attractive and easier to understand. The colors help facilitate consumer choice and understanding.”</td>
<td>“High in” warning labels help consumers more quickly identify products with high contents of unhealthy nutrients compared to traffic light label, which consumers have difficulty understanding.</td>
</tr>
</tbody>
</table>

Industry claim #4: FOPL is trying to scare consumers from buying certain food and beverage products.

<table>
<thead>
<tr>
<th>The industry claims:</th>
<th>The evidence says:</th>
</tr>
</thead>
<tbody>
<tr>
<td>“High in” warning labels are too harsh and will make consumers anxious.</td>
<td>“High in” warning labels are evidence-based and easy to identify. Consumers do not find “high in” warning labels to be harsh.</td>
</tr>
</tbody>
</table>
Industry claim #5: “High in” warning labels do not provide adequate information to consumers.

<table>
<thead>
<tr>
<th>The industry claims:</th>
<th>The evidence says:</th>
</tr>
</thead>
<tbody>
<tr>
<td>“‘High in’ warning labels do not provide enough information to inform consumers on the health benefits of foods. These types of warnings unfairly label certain foods.”</td>
<td>When compared to other labeling systems, “high in” warning labels have proven to help consumers make informed choices about healthy and unhealthy foods.</td>
</tr>
<tr>
<td>“‘High in’ warning labels (e.g., triangle and stop sign) don’t provide consumers with enough information to choose “healthy foods,” they only show consumers which foods are unhealthy.”</td>
<td>Positive nutrition claims can undermine warning labels and make it more challenging for consumers to identify unhealthy food.</td>
</tr>
<tr>
<td>“We have reformulated our products to make them healthier, adding whole grains, however, our products still bear warning label.”</td>
<td></td>
</tr>
</tbody>
</table>

Industry claim #6: Non-legal measures such as self-regulation and public education are an effective first step to addressing public health issues.

<table>
<thead>
<tr>
<th>The industry claims:</th>
<th>The evidence says:</th>
</tr>
</thead>
<tbody>
<tr>
<td>“We are providing additional, alternative solutions to the NCD epidemic that are more effective than implementing FOPL.” [46]</td>
<td>Self-regulation activities often lead to lack of compliance because they are not mandatory. Compul- sory measures are more effective.</td>
</tr>
<tr>
<td>• “We support all training, education and information programmes aimed at improving the dietary habits of the population.”</td>
<td>• Industry created self-regulation standards for labeling are often vague and use less effective FOPL systems, such as GDA.</td>
</tr>
<tr>
<td>• “‘High in’ warning labels are not the least burdensome measure possible. Alternative measures can be used.”</td>
<td></td>
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</tbody>
</table>

Industry claim #7: FOPL violates Codex and other international trade agreements.

<table>
<thead>
<tr>
<th>The industry claims:</th>
<th>The evidence says:</th>
</tr>
</thead>
<tbody>
<tr>
<td>“FOPL are not allowed by Codex, does not align with Codex or countries should wait until Codex developed FOPL guidelines.”</td>
<td>FOPL do not violate Codex. Codex does not address FOPL and does not prevent countries from adopting evidence based FOPL measures.</td>
</tr>
</tbody>
</table>

Industry claim #8: FOPL will impact trade if different countries have different requirements.

<table>
<thead>
<tr>
<th>The industry claims:</th>
<th>The evidence says:</th>
</tr>
</thead>
<tbody>
<tr>
<td>“FOPL is trade restrictive because it is costly and time consuming to implement.”</td>
<td>Companies are able to change their packaging at will, and already do so for different countries and markets.</td>
</tr>
<tr>
<td>• Where costs are an issue, stickers can be allowed.</td>
<td></td>
</tr>
<tr>
<td>• Any costs incurred by the company have the potential to save governments in healthcare costs.</td>
<td></td>
</tr>
</tbody>
</table>

(source: Global Health Advocacy Incubator)
In 2018, the FSSAI proposed a draft Food Safety and Standards (Labelling and Display) Regulations, 2018, highlighting certain criteria for labelling on the front of packs. Under this, the FSSAI proposed the Guiding Daily Amounts (GDA) design for FOPL, with the critical nutrients (salt, sugar and fat) in the food product to be marked in RED. FSSAI also laid down the thresholds for sugar, salt/sodium and fats for various food and beverage categories which was in line with the WHO-SEARO model.

FSSAI developed a modified set of thresholds in 2019 after being faced by opposition from the industry. In this case a study was conducted by Nutrition Alchemy and validated based on the Indian context and environment. It revealed that almost 96% of food products require a reformulation and does not meet the WHO threshold limits. However, this too took a backseat after industry opposition.

The thresholds should be scientific and arrived at by the WHO and FSSAI, the measures units based (for example, per 100gms) as against the serve size which could be very confusing. Various consultations held by Consumer VOICE and other consumer rights’ groups have deliberated on this.

Most importantly, FOPL design should be simple and effective, providing clear warning about the presence of high sugar, salt and fat content in food. This will help consumers make informed choices and the industry reformulate in the interest of public health. The industry favours a health star rating but global best practices backed by scientific evidence has shown that it is the High In warning labels which have been successful. In a country like India where the rate of literacy is low and language is a major barrier, a ‘High In’ label will be the best.
Warning Labels for unhealthy foods for consumers' health protection

Join us for Twitter Chat

Today | 6 PM IST
#FoodLabelsSaveLives

An exclusive webinar on
Front-of-Pack Warning Labeling
The Consumer Centric design option

Date: July 22, 2021  Time: 4.00 to 5.20 PM

Why front of pack labeling (FOPL) is important

Have you ever checked carefully if your food pack contains the veg/non-veg or the organic food logo on it? How about information like the nutrient composition panel and its comparison with the Guideline Daily Allowance (GDA) value on it? I'm sure, like me you too get confused with the way this information gets presented on a food pack. And thus, came the concept of front-of-pack labeling (FOPL) to enable the consumers to understand the intended nutrition messages. FOPL is quoted as one of the most effective strategies to fight non-communicable diseases (NCD) by WHO. This article summarizes FOPL, its types, need, and significance in reducing the NCD burden.

Love your heart? Leave unhealthy food...

Packaged Foods High in Fat, Salt and Sugar are one of the key causes of heart disease.