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5 June 2020

Consultation: Health Star Rating Implementation Plan

Front-of-Pack Labelling Secretariat

By email: [frontofpack@health.gov.au](mailto:frontofpack@health.gov.au)

**Implementation of changes resulting from the**

**Health Star Rating System Five Year Review – Stakeholder Engagement – May 2020**

1. **Introduction**

Thank you for the opportunity to make a submission on the implementation of changes resulting from the HSR Five Year Review. This submission is from Consumer NZ, New Zealand’s leading consumer organisation. It has an acknowledged and respected reputation for independence and fairness as a provider of impartial and comprehensive consumer information and advice.

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1. **Support for a mandatory system**

Consumer NZ acknowledges the Front-of-Pack Labelling Secretariat is seeking feedback on the two-year implementation transition period. However, we would like to reiterate our disappointment about recommendation 9 (the HSR system to remain voluntary).

Consumer NZ has repeatedly called for the HSR system to be mandatory. For a front-of-pack labelling system to be effective, it must be displayed on all products so consumers can compare goods within a category.

Ten countries now have mandatory front-of-pack labelling systems. Seven of these countries (Chile, Iran, Israel, Mexico, Peru, Sri Lanka and Uruguay) adopted their system since the voluntary HSR system was introduced in 2014.

In May, a report published by the European Commission concluded it was appropriate to introduce harmonised mandatory front-of-pack nutrition labelling at EU-level.[[1]](#footnote-2)

Public health experts also support a mandatory system. The expert panel of the 2020 INFORMAS Food EPI study, which is made up of more than 50 independent and government public health experts, has recommended the HSR system be mandatory. Panel members were unanimous that the five-year period leading up to the review was sufficient to test the voluntary system, and the uptake and food reformulation rates were too low to warrant its voluntary continuation. In 2018, four years after adoption of the HSR system, the report “The Health Star Rating System in New Zealand 2014-2018” found only 20.9 percent of eligible products in the Nutritrack database carried the HSR.[[2]](#footnote-3)

New Zealand research indicates that mandating the HSR system is likely to have benefits for Maori, Pacific people and low-income consumers. Research suggests these groups are less likely to use food labels, due in part to the lack of simple nutrition labels on low-cost foods.[[3]](#footnote-4) Making the HSR system mandatory will make it more relevant to these shoppers.

A voluntary system also gives the industry the option to “cherry pick” ratings, only putting them on foods with a higher rating. Three-quarters (76.5%) of products displaying the HSR had ratings of three to five stars. Products that displayed the HSR had significantly lower energy density, saturated fat, sodium, total sugar and protein than products without the rating.[[4]](#footnote-5)

1. **Algorithm changes**

Consumer NZ supported many of the agreed changes to the algorithm resulting from the five-year review. However, we are disappointed that added sugars have not been addressed. We acknowledge total sugars will be more heavily penalised but we consider penalising added sugars would result in better alignment with the Dietary Guidelines.

Consumer NZ supports the submission made by the University of Auckland School of Population Health Nutrition Group regarding the required changes to the algorithm. The five-year review was a significant opportunity to improve the algorithm and changes should be made now. An incremental approach is not appropriate given the resources required to update the algorithm and any subsequent label changes.

1. **Two-year transition period**

Consumer NZ believes the two-year transition period is a generous time frame to allow industry to amend labels that are affected by the agreed algorithm changes. As noted in the previous section, uptake of the HSR system has been low so the majority of products on supermarket shelves will not be affected.

We would not support the transition period being lengthened.

The COVID-19 pandemic has seen more consumers shopping online, resulting in fewer opportunities to review nutrition information panels. Consumers may continue to shop in greater numbers online. The HSR provides an at-a-glance tool to empower consumers to make healthier choices more easily in the online environment.

1. **Monitoring uptake**

Despite not making the HSR system mandatory, we are pleased the recommendation has uptake targets of 70 percent. However, we believe monitoring and evaluation of the uptake levels needs to be undertaken sooner than the proposed three-year timeline (September 2023).

In 2013, food ministers noted that to remain voluntary, HSR uptake should be “consistent and widespread”. Waiting for three years is not consistent with this directive.

Thank you for the opportunity to make a submission. If you require any further information, please do not hesitate to contact me.

Yours sincerely



Jon Duffy

Consumer NZ chief executive

1. <https://ec.europa.eu/food/safety/labelling_nutrition/labelling_legislation/nutrition-labelling_en> [↑](#footnote-ref-2)
2. Ministry for Primary Industries, New Zealand Government. (2018). The Health Star Rating system in New Zealand 2014-2018: System uptake and nutrient content of foods by HSR status. New Zealand Food Safety Technical Report No: 2018/09. Wellington, New Zealand. [↑](#footnote-ref-3)
3. Signal, Louise, et al. "Perceptions of New Zealand nutrition labels by Māori, Pacific and low-income shoppers." *Public Health Nutrition* 11.7 (2008): 706-713. [↑](#footnote-ref-4)
4. Ministry for Primary Industries, New Zealand Government. (2018). The Health Star Rating system in New Zealand 2014-2018: System uptake and nutrient content of foods by HSR status. New Zealand Food Safety Technical Report No: 2018/09. Wellington, New Zealand. [↑](#footnote-ref-5)