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DISCUSSION PAPER ON CRITERIA FOR THE DEFINITION OF 'HIGH IN' NUTRITIONAL DESCRIPTORS FOR FATS, SUGARS AND SODIUM

(Prepared Canada and India)

1. INTRODUCTION

Currently the Codex *Guidelines on the Use of Nutrition and Health Claims* (CXG 23 – 1997) only include the “low in” criteria focused on nutrients of public health concern (fats, sugars, and sodium). It was suggested at the 44th Session of the Codex Committee on Food Labelling (CCFL44) that criteria be developed for “high in” levels for the same nutrients.

Sodium, sugars and saturated fat are considered nutrients of public health concern because they are associated with increased risk of chronic diseases and their consumption is in excess of recommended limits in many countries and regions globally. Excess fat consumption has also been associated with excess energy intake and the prevalence of overweight or obesity in some populations, another risk factor for many chronic diseases.

Nutrient content claims, including “high in” levels that are currently available for positive nutrients (nutrients to consume more of), are generally voluntary. They are often used to highlight the positive nutritional attributes of individual products and may not present a balanced nutritional profile of the product.

2. BACKGROUND

CCFL44 considered items identified as potential work that were presented in a discussion paper (CX/FL 17/44/9) prepared by Canada. Among the six items that received broad support was the development of criteria for the definition of “high in” nutritional descriptors for fats, sugars and sodium. The Committee agreed to develop a discussion paper on the topic to be led by Canada and India. The Committee further agreed that information be sought through a circular letter on current practices, issues and any potential role of the Committee in the areas identified. A questionnaire on the topic was developed by the lead countries. It was included as Annex 5 in the circular letter (CL 2018/24-FL) sent to member states in April 2018 with a response date by 29 June 2018. The questionnaire covered the following, consisting of 3 general questions and 5 specific questions to which respondents would provide information on their country/region:

General questions

- Criteria for the definition of “high in” descriptors for fats, sugars and sodium (salt) and their status (in use or proposed; regulatory/mandatory or voluntary)
- International guidelines or other relevant work on this topic
- Issues to be addressed by CCFL on this topic and the reasons why the issues are important

Specific questions relate to the criteria for the definition of “high in” for the nutrients of interest in the country/region of the respondent:

- Any nutrition policies/dietary guidance to help protect consumers from the risks of chronic diseases related to excess consumption of foods high in nutrients of public health concern and which nutrients are part of this policy/guidance
- Established national/regional standards/guidance to reduce consumption of foods high in nutrients of public health concern
- Threshold levels established for levels for the nutrients of interest and the approach for setting the thresholds

- Additional conditions that are assessed when a food is required to be identified on a food label as being “high in” a nutrient of public health concern
- Other considerations related to the criteria for the “high in” definition to be covered in the discussion paper

Twenty-five responses were received from 19 member states/region and 6 associations.

3. SUMMARY OF RESPONSES TO INFORMATION REQUEST

Key observations from the responses received are outlined below according to the questions posed.

Status of “high in” criteria (Q1)

No countries have “high in” criteria for nutrient content claims for nutrients of public concern, but in Columbia, levels for some of these nutrients have been established that will trigger the inclusion of “See Nutrition Information” for the nutrient that exceeds the limit. However, “high in” criteria have been established for front-of-package labelling (FOPL) in several countries. Two countries (Chile and Ecuador) have implemented mandatory labelling of foods high in the while four countries and one region (Brazil, Canada, India, Indonesia and Central America and the Dominican Republic) have proposed similar regulatory measures, with another 3 countries in South America (Bolivia, Peru and Uruguay) are at different stages of development of mandatory front-of-package “high in” labelling.

Several European countries have voluntary front-of-package labelling, such as “traffic light” in the United Kingdom, Nutri Score in France and the Nordic Keyhole in Norway, Sweden and 4 other countries.

The nutrients of concern subject to “high in” labelling vary and include: fat, saturated fat, total sugars, added sugars and sodium/salt. The approaches to defining “high in” also vary, including developing nutrient-specific threshold levels (single, or multiple threshold levels such as traffic light) or applying nutrient profile to multiple nutrients/ingredients.

Existing international guidelines or other relevant work (Q2)

International guidelines cited by several respondents included dietary guidelines and documents related to population nutrient intake goals and to ending childhood obesity published by World Health Organization (WHO) and Pan American Health Organization (PAHO). Codex and European Union (EU) guidelines related to nutrition labelling, nutrition and health claims were also commonly mentioned.

Documents related to restricting marketing to children, such as those published by WHO Europe and the United Nations Children’s Fund, UNICEF, were also considered relevant.

Also included in the responses were references to “high in” criteria related to country-specific initiatives not referred to in the responses to Q.1, as well as documents related to nutrient profiling as they can be used to develop “high in” criteria.

Issues to be addressed by CCFL and the reasons why they are important (Q3)

While the lack of harmonized approaches and criteria were noted by several respondents as an obstacle to international food trade, opinions varied regarding the role of CCFL, the scope and timing of further work on defining “high in” descriptors for nutrients of public health concern. Several respondents were guarded about the feasibility of having harmonized criteria, given the different intended uses, the need to consider different dietary requirements of populations in individual countries/regions and globally, and to preserve regulatory autonomy for countries that already have “high in” labelling, as well as the wide range of products in the marketplace and uncertainty in consumer understanding of label information. The main issues identified can be grouped as follows:

- Overlapping discussion of “high in” criteria with current work on front-of-package labelling (FOPL) and potential work on nutrient profiling
- Technical complexities in standardization, considering
 - Category-specific differences in the nature, composition, processing, and food matrices affecting their biological impact
 - The types of fats and sugars to limit
 - Limitations of setting “high in” criteria with a nutrient focus and single cut-off compared to a food-based, scoring approach, while also taking into consideration the nutritional profiles and the role of foods in the diet, as well as the frequency and quantity of foods typically consumed
 - A single-nutrient approach in defining “high in” levels being applicable to discretionary foods (energy dense non-nutritive foods) but not to all foods, especially the core food groups.

- More research is required into consumer comprehension and use of “high in” levels for negative nutrients. Some respondents noted the potential for arousing fear or misleading consumers into thinking that foods without “high in” declarations are healthier or safe to eat in large amounts. Consumer education should accompany “high in” labelling where it is implemented.
- To achieve the intended positive impact, there is the need to measure outcome in terms of health beyond changes in purchase behaviours. Industry participation was thought to be important by some in developing criteria that are strict but attainable and that are able to differentiate among products. CCFL was encouraged to conduct an effective and objective review of the evidence on the impact of “high in” labelling before undertaking work on this topic.
- Given the rigour and nutrition expertise required in developing the “high in” criteria for nutrients of public health concern and considering the absence of reference intake values for sugars and fats, there was wide agreement that this could be potential work for CCNFSDU. Some respondents suggested that CCFL could develop the principles/guidelines for the elaboration of criteria and clarify the scope of the work that would minimize overlapping efforts with other work already done or is underway.

Nutrition policies/dietary guidance at the country/region level and the associated nutrients (Q4)

National dietary and food-based guidance was the most cited reference source to help protect consumers from the risks of chronic diseases related to excess consumption of foods high in nutrients of public health concern. Some countries (e.g. Brazil and Canada) also reported nutrition policies with multi-components that encompass a range of initiatives, including regulatory measures related to food labelling and advertising, updating dietary guidance and education actions. Some guidelines target single nutrients (e.g. sodium) and food service establishments, including in schools (e.g. Australia).

Trans fat and Calories were also included by some respondents among the food attributes to limit, in addition to fat/saturated fat, sodium/salt, sugars/added sugars.

Standards/guidance to reduce consumption of nutrients of public health concern at the country/region level (Q5)

In addition to regulations on nutrition labelling (e.g. front-of-package labelling indicating “high level” of nutrients of concern in the food), government standards aimed at food reformulation to reduce the level of nutrients of concern (e.g. sodium and *trans* fat) and at restricting food advertising to children were also included as part of the responses. Also included in the responses were voluntary labelling programs involving both nutrients of concern and nutrients/ingredients to encourage (e.g. “Healthier Choice” in Asia).

The nutrients covered are similar to those mentioned in relation to nutrition policies in the responses to Q4.

“High in” threshold levels for fats, sugars or sodium/salt and the approach for setting the thresholds (Q6)

Information was provided on 7 countries, including threshold levels for total and/or saturated fats, total or added sugars, sodium or salt (UK), *trans* fat (India) and Calories (Chile).

The majority of the threshold levels are on the basis of per 100g (for solid foods) and per 100 ml (for liquid foods). Two exceptions were noted, with Canada setting thresholds on the basis of per serving or per reference amount, whichever is greater, for most foods, and Indonesia on the basis of daily amounts. Where per 100 g basis was used, separate levels were set for solid and liquid foods in most cases. Generally, the level per 100 ml is half of that per 100 g, but with exceptions.

Basing the “high in” level as a proportion of reference/recommended intakes was a common approach. One country (Chile) used 90-95 percentile of the nutrient content in the food supply for solid foods and the content in milk as the reference for liquid foods. Another country (India) reported using more than one source of reference intakes, including the adoption of the WHO-SEAR nutrient profile model for the region.

Additional conditions/considerations to be addressed along with the thresholds (Q7 & Q8)

Among the few responses received, the conditions not already provided to previous questions were:

- Exemptions of foods that exceed the “high in” threshold levels, e.g. products containing intrinsic nutrients only
- Prohibition of foods to label “high in” levels, e.g. foods that are the primary or sole source of nutrition for vulnerable groups

Most of the responses to Q8 duplicated those provided to question 3, including: population health considerations and needs of subgroups, labelling principles and provisions, nutrient vs food, need for category-specific criteria, evaluation and research, support and consumer education.

4. CONCLUSIONS

A number of international guidelines are considered relevant to developing criteria for defining “high in” nutritional descriptors for nutrients of public health concern. The cited guidelines include those related to diet-related chronic disease prevention, standards on nutrition labelling, claims, advertising and nutrient profiling.

“High in” criteria have been implemented or proposed in several countries and in the region of Central America. Voluntary front-of-package labelling schemes are also available in others. The nutrients of concern generally include saturated fat or total fat, total sugars and sodium; energy (Calories) and *trans* fat are included in fewer countries.

The mandatory approaches have focussed on a few specified nutrients of concern while some voluntary schemes aim to indicate the nutritional quality of a food based on several nutrients and ingredients. National or regional dietary guidelines and regulatory or voluntary standards have been cited as the basis in developing “high in” criteria. The basis of the criteria (per 100 g/ml or per serving) is tied to existing regulatory practices governing nutrient declarations on food labels.

The “high in” nutritional descriptions are generally associated with front-of-package labelling with the aim of simplifying nutrition information or highlighting the presence of negative nutrients for consumers. Other uses have also been reported, including setting compositional limits in foods (e.g. as maximum permissible levels for *trans* fat, as targets for product reformulation for sodium), restricting advertising to children, triggering the use of statements that prompt consumers to read nutrition information, disqualifying the use of health claims, or taxing certain food categories.

While developing harmonized approaches and criteria is considered important in reducing barrier to trade, opinions diverge regarding the role of CCFL, the scope and timing of further work, in relation to the scientific rigour and expertise required, the concurrent work on FOPL and the potential work on nutrient profiling at Codex. Among the common responses provided is the issue of nutrient-specific threshold vs. food-based scoring approaches in simplifying the provision of nutrition information of individual foods and in achieving health objectives.

5. RECOMMENDATIONS

Based the responses received, the following next steps could be considered by CCFL:

- Clarify the scope and intended applications of “high in” nutritional descriptors
- Agree on the timing of further work, if any, in relation to the work on FOPL and nutrient profiling
- If further work is supported,
 - Develop the principles/guidelines for the elaboration of criteria
 - Review the evidence on the impact, including consumer understanding and use, of “high in” labelling and for other uses, as appropriate