

Consumers must be educated on the effective use of nutrition information on food packages.



**Nutri
Scene**
DR TEE E SIONG

starhealth@thestar.com.my

CLOSE to 150 participants attended the Asia Food Information Centre (AFIC) international symposium on food safety and nutrition communications in Bangkok on December 6, 2007.

Several current issues related to nutrition and food safety communications were deliberated. I chaired the session on communicating nutrition information on food packaging.

I would like to share with readers highlights from this session, which provides insights into the strategies undertaken by South Korea, Thailand and several countries in Europe in communicating nutrition information on food labels.

The South Korean experience

Regulatory officials from South Korea and Thailand provided updates to participants as examples of current trends in Asian regulatory framework on nutrition information on packaged foods.

Dr Hye Kyung Park, Director, Nutritional Evaluation Team, Nutrition and Functional Food Headquarters, Korean Food & Drug Administration (KFDA), shared her insights on *Nutrition Labelling Policy in South Korea*.

Mandatory labelling of nutrient content of foods was first introduced in Korea in 1996.

It became mandatory to label the calorie, carbohydrate, protein, fat and sodium content of foods for special dietary uses.

Mandatory labelling of these nutrients was extended to breads, noodles and retorted foods in 2003 and to confectionary and beverages in 2005.

Effective from December 2007, the list of nutrients that must be labelled was extended to include sugar, saturated fat, trans fat and cholesterol.

Trans fats in foods is a relatively new focus subject in South Korea. The Korean FDA has recently developed criteria for claims of low and free of trans fatty acids.

Dr Park shared some insights into plans for future developments in the area of nutrition labelling regulations.

She highlighted the first national strategic plan for improving nutritional status among children. This is a five-year action plan (2006-2010) and the strategies include:

- Eliminate the distribution and sale of food that adversely affect children
- Assure the safety of children's favourite foods
- Improve the hygiene and quality of school food services
- Assure good choices of foods
- Develop an easy-to-read nutrition labelling format
- Nutrition labelling on restaurant foods such as fast foods

Labelling nutrition

● Increasing public education on food safety and nutrition

The KFDA expert also summarised activities planned for a Nutrition Information and Education Programme in Korea. These include:

- Internet-based nutrition education programmes, targeting especially nutritionally at-risk groups
- Establish nutrition classes in elementary school
- Develop education materials and support local health centres (for example, leaflets, posters, booklets and DVDs)
- Organise events in public settings to enhance public awareness of healthy eating habits and nutrition labelling

Thailand

Dr Chanin Charoenpong, Senior Expert in Standards of Health Products, Thailand Food & Drug Administration (Thai FDA), shared the Thai FDA's experience in nutrition labelling.

Nutrition labelling is voluntary for most foods on sale in Thailand. Nutrition labelling is only compulsory for foods with nutrition claims, foods using nutrition for sales promotion and foods addressing specific groups of consumers for sales promotion.

If nutrition labelling is provided on a food label, it must comply with the prescribed format for nutrition information.

Dr Chanin highlighted some problems and challenges in implementing the nutrition labelling regulations in Thailand.

These include laboratory testing of food samples, which is costly and time consuming as the Thai FDA has a pre-marketing approval system for all food products.

Another major challenge is the complexity of nutrition information, especially in relation to consumer understanding.

He emphasised the need for training of food producers on nutrition labelling on one hand and education to consumers on the other.

In an interesting and timely development, an extension to the nutrition labelling regulations in Thailand is being introduced. The Thai FDA has targeted five types of snacks commonly consumed by children for mandatory nutrition labelling.

The snacks are potato chips, corn chips, rice crisps (extruded), biscuits and stuffed wafers, and the nutrients that must be labelled are fat, protein, total carbohydrate, sugars, sodium and cholesterol. The label of these foods must also include a warning statement: take less and exercise for health.

In addition, the use of a voluntary nutritional sign posting system for these snacks is also being contemplated by the authorities. The use of a multiple traffic light system and also the guideline daily amount (GDA) for energy, fat, sugar and sodium is being discussed.

Europe's experiences in using front-of-pack signpost schemes

Dr Josephine Wills, Director General, European Food



2.8 g
per serve



1.4 g
per serve



17.4 g
per serve



0.3 g
per serve

The traffic lights system in nutrition labelling.

Information Council, shared with participants the European perspectives of nutrition information on food labels.

She presented findings of a review research conducted by her and her colleagues on how consumers perceive, understand, like and use nutrition information on food labels in EU member states from 2003 to 2006.

A total of 58 distinct studies, covering 15 European countries were included in the review (*J Publ Hlth, 15:385, 2007*).

A wide variety of label formats for conveying nutrition information to the consumers were tested in the studies.

They include front of pack (FOP) health indicators and health logos (eg ticks, stars, smile icons, key-hole); energy labels (highlighting the amount of energy in the pack); guideline daily amounts (GDA) (different ways of expressing % contribution of selected nutrients to daily requirements); colour coding of labels (eg single traffic light and multiple traffic lights to grade amounts of selected nutrients in the pack) and a combination of multiple traffic lights and GDA.

The investigators made four major conclusions from the studies. First, there is widespread interest for nutrition information on food packages.

Consumers generally understand the link between food and health, and many have an interest in doing something about it, including the use of nutrition information.

Second, consumers like the idea of a simplified front of pack information.

They may differ, though, in their liking for various formats, and these differences can be related to conflicting preferences regarding ease of use, being fully informed and not being coerced into certain types of behaviour.

For example, many consumers like simplification.

However when presented with simplified information like traffic lights or health logos, consumers still would like to know what this simplified information stands for and how the red light or the health logo has been arrived at, and are wary of the fact that somebody may have made a decision for them that they do not understand.

Third, most consumers understand the most common signposting formats in the sense that they believe that they understand them and that they can replay key information presented to them in an experimental situation.

Fourth, the investigators admitted that they still have little insight into how labelling information is/will be used in a real-world shopping situations, and how it will affect consumers'

dietary patterns.

Dr Wills shared her thoughts on the use of FOP nutrition information on food labels.

Nutrition labels should be viewed as one of the tools available for nutrition education. It will certainly not be able to solve society's obesity, diet and health issues.

Each of the various signpost schemes has its own positive and negative points. She stressed that what is needed is education, education and more education to motivate consumers to use nutrition labels.

Lessons for Malaysia?

I feel that we can learn a great deal from the experiences of these countries in communicating nutrition information on food labels.

The South Korean experience started with mandatory nutrient labelling for a small number of foods and expanded over the years to cover more items.

The inclusion of restaurant foods for nutrition labelling is also being planned.

In Thailand, nutrition labelling remains voluntary for most foods. The authorities there are making it mandatory to label the nutrient content for five types of snack foods for children.

They are also considering the use of signpost schemes (eg the multiple traffic lights system) on these foods.

In several countries in Europe, a variety of front-of-pack signpost schemes have been in use for some years, in addition to the declaration of nutrient content on labels.

A comprehensive survey conducted on these schemes has provided useful information on consumer preference, understanding and use of these schemes.

Here at home, mandatory labelling of the nutrient content for a wide variety of foods has been enforced since 2005.

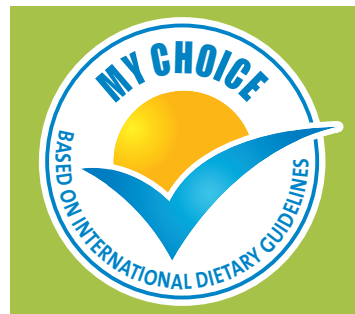
A few studies, mostly by undergraduate students, have indicated that only a small percentage of consumers read the nutrition information provided.

I do agree that nutrition information panels (NIPs) are not easy to use effectively. This is one of the reasons why the law started with compulsory labelling of only four nutrients.

I have contributed in a small way towards better public understanding and use of nutrition information on labels (*NutriScene, December 3 and 17, 2006*).

I really feel that we should do much more. The Ministry of Health needs to have a more intensive educational programme for this purpose, employing multiple approaches and targeted at various consumer groups.

This should include fast food outlets and restaurants as the



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Source of Iron ✓

Examples of ticks that can be used to provide nutrition information.

Ministry of Health has recently implemented guidelines for declaring nutrient content of fast foods. We need better data on the use of such information on labels. We need feedback from consumers on the presentation and format of NIPs.

The Ministry of Health has been discussing with various stakeholders on the use of a simple front of pack "healthier choice logo". We might want to learn from the European experience on the use of such FOP schemes.

I do hope education on appropriate use of the logo will be carried out when the scheme is implemented.

I urge that this logo is not to be promoted as the only tool in assisting consumers in making food choices. It should be used in conjunction with the NIPs.

Having been involved in drawing up the regulations on nutrition information on labels, and having been earnestly keen on promoting healthy eating amongst the communities, I would really like to see such information being better utilised.

■ *NutriScene is a fortnightly column by Dr Tee E Siong, who pens his thoughts as a nutritionist with over 30 years of experience in the research and public health arena. For further information, e-mail starhealth@thestar.com.my. The information provided is for educational and communication purposes only and it should not be construed as personal medical advice. Information published in this article is not intended to replace, supplant or augment a consultation with a health professional regarding the reader's own medical care. The Star does not give any warranty on accuracy, completeness, functionality, usefulness or other assurances as to the content appearing in this column. The Star disclaims all responsibility for any losses, damage to property or personal injury suffered directly or indirectly from reliance on such information.*