

READ 'EM AND EAT

Simple front-of-package nutrition labeling could help to combat obesity—but only if the food industry buys in and consumers pay attention.

By Agnese Smith

A burger is a burger is a burger. Except when it's not.

Stroll through any Marks & Spencer grocery store in Britain, and so long as you are not color blind, you will see that a venison burger has less fat and salt than its made-of-beef counterpart. No need to work out percentages or possess an advanced nutrition degree.

In common with more than half of all food products sold in the U.K., the pre-prepared burgers sport a series of standard color-coded symbols that measure a product's fat, saturated fat, salt and sugar. So-called "traffic light" front-of-package (FOP) symbols are designed to help consumers make informed decisions about what they stuff in their gobs.

Grocery shelves in America are also heaving with colors, ticks, stars, point scores and many other labels, each screaming out its own particular views on a product's relative healthiness. That's because shoppers are looking for guidance in a country where more than a quarter of young adults are too fat to serve in the military.

But unlike in the U.K., there's no easy-to-read universal label that can be trusted by more or less everyone.

This may soon change.

Data Package

"There will be some sort of standardization in labeling—I think it's inevitable," said Ellen Wartella, chair of the Front of Package Marketing Study Committee of the Institute of Medicine (IOM), an independent group that advises lawmakers on health policy.

Congress had asked the IOM in 2009 to make recommendations and clear up confusion over FOP labels. So far, the IOM's call for government-endorsed guidance symbols has been largely ignored.

Following an announcement earlier this year by the Food and Drug Administration (FDA) that it will revamp its back-of-product label policy, there is some hope the more controversial FOP issue will finally be addressed, some experts say.

"It's clear that the public wants it," added Wartella, professor of communication studies and of psychology at Northwestern University. "So long as there's someone pushing it, it will stay on the agenda. My understanding is that once the nutrition label has been put into place, then they will turn their attention to the IOM recommendations on front-of-package labels."

For its part, the FDA, the nation's health protector and the agency

responsible for passing any kind of labeling legislation, says it is cooperating with the food industry on developing a voluntary code.

The agency will seek opinion "on several labels, including one that categorizes some nutrients into categories of 'avoid too much' and 'get enough,'" FDA spokesperson Theresa Eisenman wrote via email.

"We plan to work collaboratively with the food industry to design and implement innovative approaches to front-of-package labeling that can help consumers choose healthy diets." There is no timeframe, she said.

The big question is whether the FDA—which has been working on this plan since 2009—will come up with something new or implement the recommendations it had previously requested.

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Quite possibly, the agency will simply endorse the food industry's own solution to FOP labels, Facts up Front, some nutritionists said.

"The food industry will never accept traffic lights or anything close to it, as recommended by the Institute of Medicine," said Marion Nestle, professor of nutrition at New York University and author of the blog *Food Politics*, in an email interview. "The food industry's idea of working together is Facts Up Front."

Before IOM issued its *final report* in 2011, the Grocery Manufacturers of America and the Food Marketing Institute announced the launch of their own label, in what some experts said was a pre-emptive strike before harsher regulation kicked in. Silence from the FDA has been interpreted by many as endorsement.

Health advocates have criticized Facts up Front for simply repeating the back-of-package nutrition information—with some added marketing to boot. The label includes information about calories, saturated fat, sodium, sugars and up to two "nutrients to encourage."

"It is a lousy system, because it just drags a few nutrients from the side label to the FOP," said Michael Jacobson, executive director of the consumer group Center for Science in the Public Interest, in an email interview. "It doesn't convey the overall nutritional value of a food."

U.K.'S TRAFFIC-LIGHT SYSTEM FOR FOOD LABELING

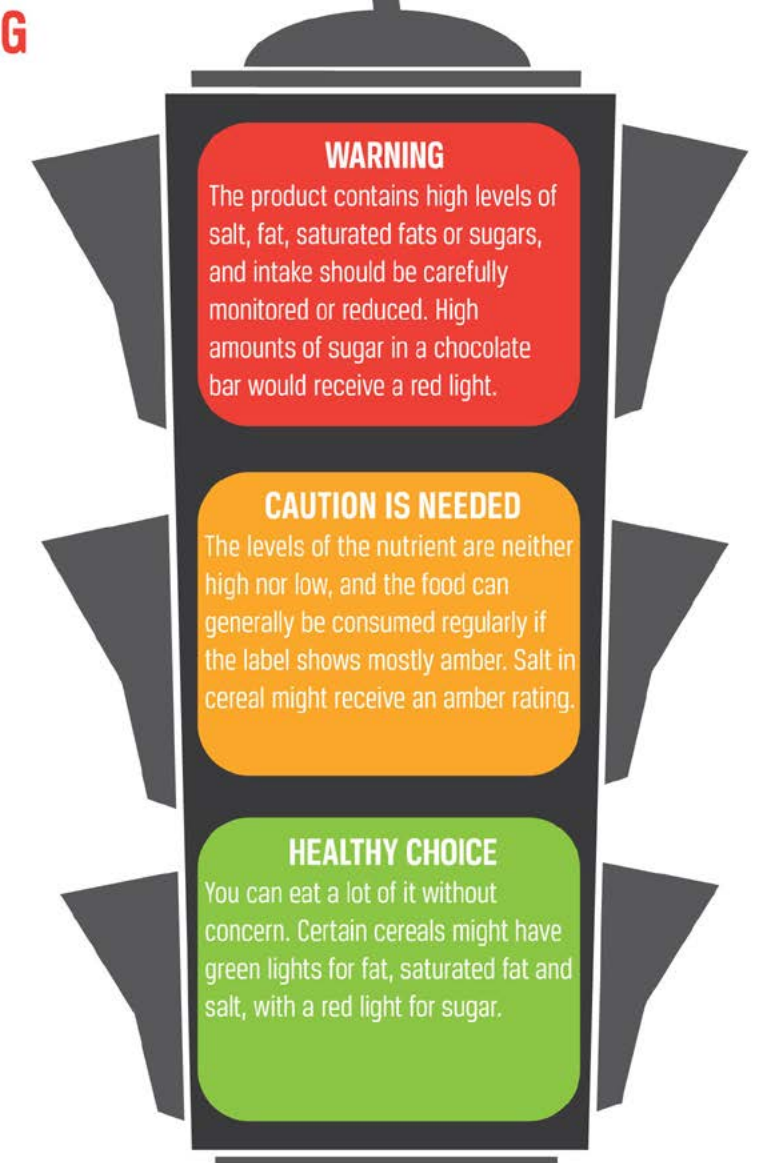
GREEN MEANS GOOD

Each grilled burger (94 g) contains

ENERGY	FAT	SATURATES	SUGARS	SALT
924 kJ 220 kcal	13 g	5.9 g	0.8 g	0.7 g
11%	19%	30%	<1%	12%

of an adult's reference intake. Typical values (as sold) per 100 g: energy 966 kJ/230 kcal

Foods and drinks are evaluated by their calorie, salt, fat, saturated-fat and sugar content. Each receives a color-coded rating: low (green), medium (amber), high (red).



Some nutritionists see the interests of the food industry—valued at about US\$1.3 trillion and with a reported lobby war chest to match—as incompatible with those of consumers.

They fear Facts up Front has already trumped IOM recommendations and any other system that puts a big stop sign on junk-food purchases.

“Industry will vigorously oppose any really good label,” said Jacobson. “The food industry is trying (to) make its Facts up Front label the one that government will accept.”

The campaign follows an earlier industry-led label initiative called Smart Choices, which was laughed off the shelves when sugar-laden breakfast cereals such as Froot Loops and Cocoa Krispies got the nod. It was scrapped in 2009.

While it stopped short of calling for British-style traffic-light labeling, the IOM in 2011 recommended symbols like checks or stars and a point value showing saturated and trans fats, sodium and added sugars. Foods with high levels would get no points.

The voluntary nature of the Facts up Front campaign is also problematic in that food makers could simply fail to put guidance on junk food, said the Center for Science in the Public Interest on its website.

However, other label proponents—particularly outside the U.S.—are less pessimistic about the possibility of U.S. regulators and the industry

working together and about the efficacy of a voluntary scheme.

The experience in Australia, which recently approved a labeling scheme, shows if the government sets the policy objectives and principals for reaching them, then there can be good constructive dialogue, said Boyd Swinburn, professor of population nutrition and global health at the University of Auckland. Industry and government can work together “so long as things are transparent, the (government) controls the process, and there is a credible threat of regulation in the absence of progress,” he said in an email interview.

Britain’s traffic-light system is voluntary, though most major retailers have decided to offer them on their own brands of products.

“The U.K. is an example of where it has worked, particularly with retailers,” said Mike Rayner, professor at University of Oxford and director of the British Heart Foundation Health Promotion Research Group. “Any form of interpretative labeling is better than nothing.”

And at least in Britain, retailers see value in cooperation.

“The food industry has a once-in-a-lifetime opportunity to take a consistent approach to front-of-pack labelling that will make it easier for customers to make informed healthier eating choices about the food they buy,” said Justin King, chief executive at British grocery store Sainsbury’s, speaking last year. “We hope all food retailers and manufacturers will join up to the scheme for the benefit of U.K. consumers.”

But the program will remain voluntary. European food producers last year spent a reported \$1.4 billion against making traffic-light labeling mandatory throughout the 28-member state.

A Weighty Problem

Regardless of where one stands on label formats, on fat vs. sugar, carbs vs. protein or government intervention in health choices vs. private accountability, America clearly has a weight problem that cannot be ignored. While some reports show spotty improvements in bringing down growth rates, the overall numbers are still alarming.

Obesity is associated with an increased risk of diabetes, high blood pressure, certain types of cancer and sleep apnea, among other health issues.

Nearly 35 percent of U.S. adults are obese, according to the Centers for Disease Control and Prevention (CDC). This is defined as having a Body Mass Index (BMI), a relative measure of an individual’s body fat based on height and weight, over 30. A normal-weight individual has a BMI of 18.5 to 24.9, though BMI values can be skewed by people with significant amounts of lean muscle.

The problems associated with obesity are estimated to cost the U.S. between \$150 and \$200 billion per year, according to various sources. Medicare and Medicaid account for about half of those figures. Health-care costs for obese individuals average about 40 percent more than those of a person of normal weight, according to Yale Rudd Center for Food Policy and Obesity.

These figures do not take into account other costs associated with a much larger—and unhealthier—population, such as loss of productivity because of sick days, increased fuel needs for the aviation industry, extra-large equipment for ambulances and other emergency services, etc.

Even more worrying is the fact that one-third of American children and adolescents are classified as overweight or obese. The CDC said the percentage of children aged 6-11 years who are obese increased from 7 percent in 1980 to nearly 18 percent in 2012.

Half of U.S. adults will be obese by 2030 unless Americans change their ways, according to a report by the health policy organization Trust for America’s Health and the Robert Wood Johnson Foundation.

The U.S. is not the only country faced with a ballooning population. Obesity rates in Australia, New Zealand, Scotland and England slot in the mid-to-high 20s, while most of continental Europe is somewhere in the teens, according to Public Health England. At the other end of

the spectrum, Japan’s rate is about 4 percent. Mexico is also in the big leagues, while China is reportedly fast catching up.

Many countries and communities have responded by direct government intervention, including taxing sugary soda (e.g., France, Mexico), traffic-light and other types of labeling (e.g., U.K., Peru, Ireland, Australia) and restricting junk-food advertising to children (e.g., Norway).

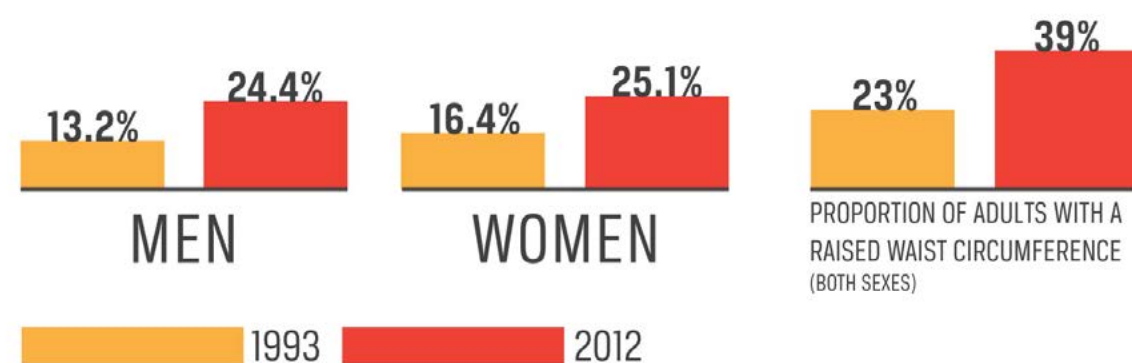
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Polls indicate people want better information. According to a 2013 poll conducted by The Associated Press-NORC Center for Public Affairs Research, eight out of 10 Americans support measures to provide nutritional guidelines to help shoppers make better choices.

But not all government bids aimed at reversing the obesity trend have enjoyed universal applause. Former New York City Mayor Michael Bloomberg supported a 2012 proposal to ban the sale of giant

OBESITY IN ENGLAND

Adults classified as obese (Body Mass Index of 30 kg/m²):



Source: Statistics on Obesity, Physical Activity and Diet: England 2014, Health and Social Care Information Center

U.S. OBESITY STATISTICS

34.9% OF U.S. ADULTS ARE OBESE

ESTIMATED COST OF OBESITY IN 2008 DOLLARS:

\$147 BILLION

2012 LOWEST OBESITY RATE:

COLORADO
20.5%



2012 HIGHEST OBESITY RATE:

LOUISIANA
34.7%



Source: Centers for Disease Control and Prevention



containers of sugary sodas, and it kept many cartoonists busy until courts eventually jettisoned the plan in 2013.

So choices are limited in terms of government intervention.

Obesity rates (for people as well as their pets) around the world started to climb in the 1980s.

While the food and beverage industry blames bigger portions and our increasingly sedentary lifestyle, it's never been fully explained just how so many people from different countries decided to become couch potatoes at the same time. The consensus among nutritionists is that this massive global weight gain during the last 25 years is largely due to the ubiquity of cheap, processed food—high in fat and sugar—many claim is very addictive.

Highly processed food now accounts for about 70 percent of a typical American diet, according to Professor Carlos Monteiro at the Department of Nutrition, School of Public Health, University of Sao Paulo. That's about double of a standard French diet, said Monteiro, using figures from the 1990s.

Better food labeling—whether color coded or based on point scores—could help steer consumers away from such choices, experts say. Studies in Canada and elsewhere have shown that graphic labels have gone a long way toward reducing cigarette smoking.

But they are no magic bullet against obesity. Some nutritionists question labels' potential.

"If non-clear information is given, as usual, it won't work," said Monteiro via email. "By clear information I mean clear warnings on the main problems behind ultra-processed products including high energy density, high added sugar, etc. Labels in general will not make people move from processed products to minimally processed foods, a move which is essential to improve the quality of diets of Americans."

Indeed, there is not a lot of hard empirical evidence that people in the U.K., the granddaddy of FOP labeling, have made the switch from "red" foods to "green."

Other factors, such as price and brand familiarity, currently play a bigger role in what people put in their baskets, said Oxford's Rayner.

However, labels are proven effective at persuading some food makers to reformulate products to earn better ratings, say experts on both sides of the Atlantic.

"Labelling can make important differences," said Walter Willett, chairman of the department of nutrition at the Harvard School of Public Health, in an email interview. "Here we have had the experience that

adding trans fat values to food labels led to a massive reformulation of foods, which was good."

In the U.S., these labels currently include such varied offerings as the American Heart Association's checkmark, grocery chain Hannaford Bros.' Guiding Stars, NuVal's point scores, as well as the food industry's own FOP label, Facts up Front.

While health advocates groan at the glacial pace of government action/inaction with regard to our collective weight gain, the U.S. hasn't entirely stood still on the issue.

The fight against child obesity is championed by no less than First Lady Michelle Obama, who delighted the nutrition community earlier this year by supporting the FDA's proposals to alter its Nutrition Facts label.

More realistic serving sizes and—gasp—a bigger font for calories may be on the cards for American consumers. But unlike traffic lights and other symbols, the back-of-package Nutrition Facts label does not indicate which foods are good or bad. It simply provides information.

The FDA is currently in the process of asking health experts and the food industry their opinions on the new guidelines.

There is little doubt consumers—and lawmakers—are interested in what goes on the front of packages. Congressman Frank Pallone in September 2013 introduced a proposal, the "Food Labeling Modernization Act of 2013," to help clarify labels.

Whether any new guidelines and labeling schemes—color-coded or otherwise—will actually change consumer behavior is another matter. ■

About the Author

Agnese Smith is a journalist based in London, England. Over the past 20 years, she has written for Bloomberg, Marketwatch and the "Canadian Bar Association Magazine," most recently covering regulatory changes and corporate governance issues in Europe and North America.



Source: National Health and Nutrition Examination Survey, Centers for Disease Control