

Response ID ANON-ZKFT-DDB5-X

Submitted to **Aspirations for the food regulatory system**

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About you

What is your name?

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Please tick this box if you would like your response to be confidential

What sector do you represent? (Required)

Consumer Organisation

If 'other' sector selected, please specify in the text box:

What is your organisation?

Organisation name:

Consumer NZ

Which country are you responding from? (Required)

New Zealand

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New Zealand

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Challenges and opportunities facing the broader food ecosystem

1 What other key challenges and opportunities are facing the food system?

What other key challenges and opportunities are facing the food system?:

Challenges

1. Addressing the prevention of diet-related non-communicable disease through food regulation. Regulation should support public health objectives to foster healthy diets that reduce consumers' risk of diet-related disease, including overweight and obesity, heart disease, type 2 diabetes and cancer.
2. Ensuring consumers have access to clear, transparent information on food packaging. This includes improving the health star rating (HSR) system to ensure it's robust, increasing HSR uptake by manufacturers, and ensuring food labels provide consumers with information about the origin of ingredients.
3. The impact of unsustainable diets and food production on the environment and climate change. It is well documented current food production methods are contributing to rising greenhouse gas emissions. However, food regulations don't assist consumers to make informed choices based on a product's environmental impacts.
4. The impact of marketing unhealthy foods and beverages to children. The World Health Organization (WHO) states there's evidence to show the marketing of unhealthy food and drink is linked to obesity.
5. Self-substantiation of health claims. Companies must notify self-substantiated evidence to FSANZ. However, claims are published on the FSANZ website before any review of the evidence supporting the claim is done. A product may be on the market before the review is complete. Consumer NZ has also found examples of health claims that have not been notified to FSANZ.
6. The food-medicine interface. The current system allows the same shop shelf to contain products classified as either a food, a food-type dietary supplement or dietary supplement. Each category has different requirements. This is confusing for consumers and makes it difficult to compare products. It also means industry can choose which regulations to comply with and choose the less stringent.
7. Food fraud. Globally, food fraud is increasing. This may be a food safety issue (for example, the 2008 case of melamine in Chinese infant formula) or

consumers may be misled about the products they're buying (for example, free-range eggs that aren't genuinely free-range or extra-virgin olive oil that is predominantly canola oil). Food fraud also runs the risk of damaging New Zealand's reputation as a food exporter.

Opportunities

1. Introduce regulation to address the sophisticated and persuasive marketing used by companies selling unhealthy food and drinks to children. New Zealand's self-regulatory system of restricting this type of marketing is ineffective and a mandatory standard within the Food Standards Code may be more easily enforced.
2. Put public health at the forefront of food regulation to reduce the rates of overweight and obesity. This would ensure proposals benefiting public health and consumer choice (for example, added sugar labelling) are funded, resourced and prioritised to ensure public health strategies are not delayed.
3. Strengthen regulation and monitoring of self-substantiated health claims to ensure consumers are not misled about the products they are buying.
5. Ensure consumers can make informed decisions, via food labelling, about the environmental impacts of the food they buy. For example, in Consumer NZ's 2018 consumer issues survey 68 percent of New Zealanders thought palm oil labelling should be mandatory. Current regulations allow it to be labelled as "vegetable" oil in the ingredients list.
6. Improve the food-medicine interface through regulation to prevent consumers being misled about the products they are buying.

Objectives and scope of the food regulatory system

2 Do you agree that the focus of reforms should be on ensuring the system is set up to support interface management across regulatory systems, enables collaborative risk assessment and triage of issues and provides a range of (regulatory and non regulatory) tools to support the system's objectives and empower consumers and industry?

No

If you answered 'no', please explain why not. :

We agree reforms to the food regulatory system should support interface management across regulatory systems, as long as the focus on public health, and consumer choice and information are prioritised.

Consumer NZ does not agree that non-regulatory tools such as industry self-regulation and government-led voluntary initiatives support public health objectives and empower consumers. For example, the voluntary nature of the health star rating system has limited its potential as a public health tool because industry uptake has been low and lobbying undermines its effectiveness. As a result, consumers are limited in their ability to compare products to make healthier choices.

Aspirations for the food regulatory system

3 Is there anything missing from these aspirations and high level actions?

Yes

If you answered 'yes', what is missing from these aspirations and high level actions? :

1. Addressing public health objectives, such as reducing the prevalence of overweight and obesity, and ensuring sustainable food production.

4 Are there any aspirations or high level actions that you disagree with?

Yes

If you answered 'yes', which ones and why? :

Goal: Strengthen the strategic leadership of the system

Consumer NZ broadly agrees with this goal and high-level actions. However, detail about what each action entails needs to be considered. Public health and consumer stakeholders need to be consulted to ensure public health is prioritised.

Goal: Reorient the system from being focused on food regulation to focus on achieving shared objectives

Consumer NZ disagrees with this goal and high-level actions. Developing shared objectives across stakeholders may be detrimental to public health objectives. Public health and consumer groups are less well resourced, compared with industry, and can find it difficult to fully participate in stakeholder consultation processes.

In addition, Consumer NZ does not support non-regulatory tools to achieve system objectives. Co-regulatory, voluntary and industry-led initiatives have been repeatedly shown to fail at protecting public health and have caused delays in creating mandatory regulation. The range of food available has increased diversity and complexity, and regulation should ensure labelling information is accurate, comparable, consistent and enforceable.

Goal: Expand the range of tools available to monitor compliance and respond to non-compliance.

Consumer NZ agrees with this goal and high-level actions. However, any third-party audits should be independent. Information provided by industry without independent substantiation is not acceptable.

Goal: Improve feedback loops to inform regulatory and non-regulatory approaches and responses.

Consumer NZ agrees with this goal and high-level actions. We agree food standards must be regularly reviewed, particularly in relation to new food substances and novel foods that have been established as "safe" in the short-term but where long-term impacts have yet to be determined.

Consumer NZ supports increased engagement with public health and consumer organisations. However, there is a need to ensure reasonable timelines for this engagement as these organisations are often under-resourced.

High level action: Adopt a mechanism for improving international harmonisation.

Consumer NZ agrees in principle but improving international harmonisation should not result in weakening New Zealand's current food regulatory practices because, in some cases, they represent best practice. Prioritising public health over international harmonisation should also not be compromised.