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A volunteer community organisation providing support for people with allergy, food and chemical sensitivity

A participating organisation of National Toxics Network



COVER SHEET

SUBMISSION

Name for publication of the submission: ASEHA Qld Inc and National Toxic Network, Inc Submission to the food labeling review

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ASEHA is a support group for individuals and families suffering from allergy, food and chemical sensitivity, chronic fatigue syndrome/fibromyalgia and behavioural disorders that are related to allergy, food and chemical sensitivities. ASEHA networks with other support groups who have similar interests so this submission represents the interests of consumers across a broad range of food related disorders.

Our input into the consultation process is essential to ensure that our voice is heard and government processes protect the interests and special food needs of consumers. This is because we represent an area of unmet or poorly met need. ASEHA would like to see a food regulatory system that has as its primary concern public health and safety, consumer interests and clearly demonstrates its duty of care to those with food allergy/intolerance and other unmet special food needs.

We thank you for the opportunity to present yet another submission to the food labeling review.

ASEHA finds the statement in the preamble (Appendix 1 terms of reference) relating to the commitment of Australian governments to regulatory reform to 'reduce the regulatory burden without compromising public health and safety' somewhat inconsistent. Our experience is that deregulation of the food industry over a period of time and advances in food technology have resulted in a lowering of the standard of foods available in supermarkets at higher prices. This includes a larger range of processed foods that are of reduced quality and appear to depend on sugar, salt and flavourings to cover stale, inferior ingredients. We also find that more processed foods now contain food additives that have not necessarily been there in the past.

Even fresh whole foods are now hard to find with many foods being stale at the point of sale. These do not store long in the home. There is an industry involved in transporting food and maintaining freshness e.g. cold storage, freezing, gassing of bananas to ensure they are ripe at the point of sale; plastic bagged foods treated with nitrous oxide (additive 942) to delay the decay rate; food treated with carbon dioxide or nitrous oxide used as a fungal inhibitor (Al-Jamali AF, Bani Hari MT). etc. Many within ASEHA are now unable to tolerate commercially produced foods due to the food processing aids used, some are also experiencing problems with whole foods that should be fresh and should not contain food contaminants from food processing aids.

ASEHA is interested to see that COAG has agreed to tackle the burden of chronic disease and its relevance to the food industry because we now have a degraded food supply aided by industry deregulation, poor safety assessments by FSANZ and their failure to adequately apply the precautionary principle so that their decisions err on the side of human health and safety. Public

health and safety must always take priority over industry profits. Common diseases in children that can be related to a contaminated and degraded food supply are obesity, tooth decay, hypertension and cardiovascular diseases, diabetes, cancer, allergy, digestive disease, osteoporosis, asthma, malnutrition (World Health Organisation. 2004).

http://www.who.int/nutrition/publications/obesity/PHNvol7no1afeb2004/en/index.html

Current food regulations do not protect children from being bombarded with 'junk food'. A public education campaign is essential to assist parents to make healthy food choices for children and government can have a role in this via food labels. Government should take responsibility for protecting child health and safety by taking into account their special vulnerabilities as they are in a stage of development where unsafe substances in their food can cause or contribute to chronic ill health that can affect them for whole of life. Food labeling should show that foods are unsafe for children and labels need to be developed to show that the food for children is healthy i.e. has minimal processing, is grown without chemical inputs, contains no additives/processing aids, especially those that are known to impact adversely on child health and development e.g. MSG, caffeine.

Pregnant women also need protection from potentially unsafe substances in food because some substances can cross the placenta and impact adversely on the foetus and affect its development or health status. Labels should show substances that can cross the placenta and affect the unborn e.g. nanomaterials such a nanosilver should be labeled because it has been shown to cross the placental barrier.

Food labels must protect the vulnerable in the community i.e. those with food allergy/sensitivity and diseases associated with specific foods and food components. Food allergy/sensitivity is linked to many chronic disorders and is common in the population. Some common examples of diseases associated with food allergy/sensitivity are Coeliac disease, lactose intolerance, PKU, fructose intolerance, salicylate, amine, glutamate sensitivity, purine/pyrimidine sensitivity, irritable bowel disease, asthma, eczema, mood/behaviour disorders. The following symptoms of food intolerance were noted by Loblay and Swain (1986), lethargy, headache, gastrointestinal, myalgia, cerebral, rhinitis, uriticaria, mouth ulcers, asthma/eczema and behavioural problems.

ASEHA is not sure how we can have an evidence base for the relationship between many foods, food processing aids, diseases and the percentage of the population affected by e.g. food intolerance which can affect a significant percentage of the population. Allen, Koplin, Gould and Osborne (2007) indicated that 29.3% of the population believed they had a food allergy while 61.7% of these reported doctor diagnosed allergy. The 2002 NSW Adult Health Survey found that 24.6% of those surveyed reported sensitivity to chemicals. There is a good possibility this population will react to naturally occurring substances in food and added chemicals.

Unless evaluations are done to ascertain the prevalence of those in the community with food related diseases, the nature of their food related illness and the nature of their special need, we cannot identify those who need to be protected by food labeling regulation and legislation and what the regulatory requirement should be. Under these circumstances we do not know how effective food labeling laws can be at achieving their policy purpose. This is a primary issue.

Quality assurance mechanisms must be put into place to track food related problems so that food labeling regulations and supporting legislation can have a scientific and appropriate evidence base. This will require a public education campaign to alert the public to the possibility of reactions to foods and food processing aids so that individuals can identify food related problems. Studies to ascertain the prevalence and nature of food related problems are essential to identify the labeling requirements relevant to the special need. Studies also need to be initiated to investigate the impact of chronic ingestion of food additives/processing aids and mixtures of these on human health so that we have an evidence base on which to secure an effective regulatory framework to protect public health and safety from unsafe substances. Mixtures need to take into account combinations of food additives/processing aids in average feeds; food contaminants e.g. pesticide residues; and naturally occurring food chemicals as these can modulate additives, contaminants e.g. pesticides Daniel, Otto *et al.* 1999.

We believe that government must regulate the food industry to protect public health and safety as we have already experienced that the industry is not capable of self-regulation. With regard to labeling, legislation needs to be introduced to allow government to regulate labels and enforce breaches of labeling law.

Part 1 Context

The issue is not really whether food can be adequately labeled to cover the multitude of additives, GE foods etc but whether these should be in the food supply in the first place. Consumers cannot have a high degree of confidence in the quality and safety of the food supply when we see:

- Foods for children that contain additives such as colourings that are banned overseas, MSG (621), caffeine; high levels of sugar, salt and fat; contaminants from packaging such as bisphenol A and phthalates that are under review in various parts of the world;
- Gene technology in the food supply which introduces substances that have never been previously encountered in the body;
- Nanotechnology which can have dangerous impacts and like gene technology, is untested for long term health effects and we do not have science adequately developed to provide the data we need to ascertain safety;
- FSANZ has permitted the introduction of untested technologies into the food supply based on flimsy science and with total disregard to the precautionary principle, essentially using civil society as an experiment;
- Decisions made by FSANZ that allow substances in food because of 'technological need' and that ignore community concerns about the impact on public health and safety e.g. the red colouring erythrosine;
- Apart from the questionable science, food for pregnant women and children should not contain any additives, contaminants or leachate from packaging. Pregnant women have a high level of need for protection from substances that can cross the placenta and adversely impact on the unborn child;
- Children especially should have the right to safe food so that they can grow up healthy without the tooth decay, obesity, diabetes, high blood pressure, cardiac disease and other diseases we see prevalent in them today;
- Poor availability of fresh, high quality whole foods (e.g. meats, fruits and vegetables) that have not been subject to some intervention (e.g. freezing, irradiation, gassed) and the carbon footprint of foods that are transported around the World from other countries. This shows no commitment to sustainability and interventions to tackle climate change issues. It also impacts on food freshness and the need for the food industry to use various technologies to preserve and provide safe food at the point of sale.

We cannot have any confidence in FSANZ or the food industry.

While we appreciate that the Review is expected to comply with international labeling requirements as per Codex Alimentarius, domestic labeling requirements should be the best we can have for Australians and our food safety should not be downgraded by the use of international trade and international labeling requirements. If our requirements are more stringent than Codex standards, food for import into Australia needs to comply with our more stringent regulations. This is another conflict of interest that can impact adversely on public health and safety in Australia.

Above all the focus of this Review should be on high quality food that is nourishing, public health and safety, freedom of choice and right to know. Consumers generally think that government regulates food and it is automatically safe for them. Some education needs to be undertaken by FSANZ to alert consumers to labeling regulations, the role of food additives and other chemicals used in food production, the toxicology of these and how they can affect human health. Some promotional work on diseases that are caused or impacted upon by foods is also necessary to educate consumers about how labels should work to protect them from hidden sources of food chemicals and foods not tolerated that they need to avoid. Those who do not wish to consume food that contains processing aids and other contaminants from growing and packaging and those with cultural considerations must also be taken into account.

PART 2 FOOD LABELING - OVERVIEW

Why label food

2.3 Consumers demand food labelling to provide them with accurate information across a wide field of needs and interests to make informed choices.

Consumers have a right to know and demand food labelling to provide them with accurate information across a wide field of needs and interests to make informed choices. Food needs to be labeled for health and safety reasons, in particular to alert those with allergy/sensitivity to the presence of substances that can cause anaphylaxis, other types of reactions or food related ill health. Some individuals also do not wish to ingest chemicals and other substances or have cultural considerations. They all have the right to information upon which to base their purchase decisions and protect their health and wellbeing.

2.4 The crux of this Review will be to address the tensions between fair and competitive trade in the market, the minimisation of the regulatory burden for business, the securing of government objectives in food labelling and the needs of consumers in order to make informed choices.

Once again ASEHA finds conflicts of interest in this statement. We do not believe it is possible to take into account fair trade, competition and minimisation of the regulatory burden for business and protect food safety and public health. We are already paying high prices for inferior food that is causing ill health. Food label regulations are required to ensure that consumers, in particular those with special needs, can make safe and appropriate food choices.

2.7 The term 'public health and safety' is not defined in the FSANZ Act. A narrow interpretation could mean the avoidance of illness and death resulting from the consumption of unsafe food. However, public health and safety can be interpreted more broadly. The National Public Health Partnership defined public health as 'the organised response by society to protect and promote health, and to prevent illness, injury and disability. The starting point for identifying public health issues, problems and priorities, and for designing and implementing interventions, is the population as a whole, or population sub-groups'.

Public health and safety needs to be defined in the FSANZ Act and should be subject to community consultation. Studies need to be implemented to evaluate the impact of food labels on:

- those with food related diseases;
- consumers who do not wish to consume certain foods whether by choice or culture e.g. meat, dairy, gene technology, nanotechnology, kosher or halal foods;

This is essential to establish an evidence base on which to inform food labeling regulation and legislation. Information should be solicited from various sub groups in the population.

Q. 1 To what extent should the food regulatory system be used to meet broader public health objectives?

2.9 The food regulatory system should be used to meet broader public health objectives by:

- Defining public health and safety in the FSANZ act. There must be a clear definition to ensure that consumers and FSANZ are talking about the same issue
- Establishing a standard in regard to the appropriateness of information contained on food labels which should be adequate for those with food related disease to make a safe food choice;
- Enforcing food label regulations and prosecuting misleading labelling and other deceptive practices;
- Evaluating the performance of the food industry in regard to labeling regulations;
- ensuring that a food audit can be done to ascertain full product ingredients (especially hidden sources of foods and additives);
- Ensuring transparency and accountability for food labeling regulations and legislation;
- establishing quality assurance mechanisms to ensure that the relevant information is present on food labels and food labeling regulations are adequate and appropriate;
- Establishing a process whereby the special food needs of the population can be surveyed and monitored to ensure that the best possible labeling is used and in particular to monitor those with all food related disease to ensure that their needs in food labeling are met;

- initiating a public education campaign to educate consumers about the use of food additives and alert consumers about their adverse health implications. Lack of knowledge can have profound effects on public health, particularly when unknown sensitivities exist e.g. many food additives can initiate or trigger asthma which is costly to the nation in health care, lost work time, lost school time and lost productivity;
- Affording the same level of protection for Australian consumers that is given in the European Union e.g. removal of the Southampton additives.

Q.2 What is adequate information and to what extent does such information need to be physically present on the label or be provided through other means (eg education or website)

2.10 Adequate information on a food label includes full ingredient listing of foods and food additives/processing aids, including hidden sources, whether the food/product contains genetically engineered components, nanoparticles, or is irradiated. This should also include:

- removal of the 5% labelling loophole as 5% of some ingredients can be too much for highly allergic/sensitive individuals e.g. SO2. Food labels should state that it contains 5% of whatever ingredient;
- full listing of the contents of flavouring ingredients which may be relevant to those with food chemical sensitivities;
- consistency in labelling of food additives either use the code number or common name of the additive so that people can have clarity in their decision making;
- cessation of meaningless disclaimers on labels e.g. the disclaimer 'may contain' e.g. wheat, or traces of nuts. This is useless information on which to base a choice, it is like industry having a bet each way;
- remove the statement made from local and imported ingredients ensure the countries of origin of all food and food components are named including the country of origin of packaging;
- the labelling of hidden ingredients and additives, e.g. vanilla flavouring can contain sodium benzoate; cornstarch can contain sulphites; vegetable oil can contain additive 320 BHA; HVP/TVP are alternative names for MSG (621) and needs to be clearly labelled otherwise individuals allergic to MSG may suffer adverse impacts; milk fats used in products need to be clearly distinguished for those with milk allergy or lactose intolerance;
- advertising space on labels should be limited to the name of the product, name and contact details of the manufacturer with the majority of the space taken by contents information;
- should there be insufficient space on the label for the necessary information, a food information sheet should either be provided for inspection at the point of sale, by telephone from the manufacturer or from their website;
- full information should be available either from the label or the point of sale. Some people do not have access to the internet and your website suggestion is not adequate to fill population need. However, it is a good suggestion for those with internet access;
- label displays should be a requirement for food that does not carry labels e.g. fruit and vegetables should disclose country of origin, whether the food is genetically engineered or modified in some way; is out of cold storage, is waxed; has been irradiated, fumigated or treated with substances that affect freshness.

Q. 3 How can accurate and consistent labeling be ensured?

2.11 The main benefit of any food standard should be public health and safety with any cost of such standards being of secondary consideration. Quality assurance mechanisms should ensure that labeling is accurate and consistent. However, it is inconsistent of COAG to require the benefits of label accuracy and consistency to be weighed against the cost of labeling to the industry when public health and safety should be the prime consideration. It is not possible to put a price on good health.

We need good food to be healthy. The cost of unsafe food labels or unsafe food can contribute dramatically to the cost of health care to the community. Food should be safe, uncontaminated, nutritious and primarily to nourish and sustain the population. If these factors are not considered above cost, there is not much hope for Australians and the health care bill can only escalate. Preventive health policy is cheaper than providing health care for chronic and avoidable diseases.

Food can be responsible for a very large number of diseases such as tooth decay, obesity, diabetes, cancer, allergy, heart disease, asthma, eczema, irritable bowel disease, Crohn's disease, acne, Chinese Restaurant syndrome, ulcerative colitis, constipation, diarrhea and others. Government must regulate and be empowered to enforce all food regulations to ensure food safety for the population. Anything less is unacceptable.

A monitoring process needs to be established to develop and ensure label accuracy and consistency; to gather an evidence base to develop standards on which to base food label regulations. This is an essential quality assurance mechanism.

Question 4 What principles should guide decisions about government intervention of food labeling

2.12

- The application of the Precautionary Principle which should err on the side of the protection of public health and safety. Currently, FSANZ does not apply this adequately for public health and safety, as deregulation, industry compliance and costs take prime consideration;
- The representation of adequate numbers of consumers on all food regulation reviews, including the food labeling review. Currently, there does not appear to be one consumer representative on the Panel for this review. There should be a minimum of two with one representing those with special food needs.
- Community education re the dangers of unsafe food and the need for accurate food labeling needs to be implemented so that the public can be informed about food labeling issues. An informed public is better placed to make complaints about breaches of labeling regulations or for protecting their own special needs;
- The general public should be encouraged to report breaches or unmet special needs which should assist to serve as part of an evidence base on which to make label regulations.
- The labeling regulation review needs to be an ongoing process to ensure accuracy and consistency of food labels now and into the future;
- The 'level playing field' has not yet flowed on to consumers, we are just a 'cash cow' for the food industry and the GST. No process to date has solved the problem of the accuracy and consistency of food labels and it is clear that government must legislate and enforce food label regulations because currently they are inadequate.
- Voluntary codes of practice, good manufacturing practice and other industry self regulation does not work. Our experience is that we cannot trust the food industry to self-regulate in anybody's interest but their own they are profit driven.

Q5 What criteria should determine the appropriate tools for intervention

- Government duty of care to the population and their responsibility for ensuring that food products do not compromise public health and safety.
- Protection of human health and safety over compliance cost to industry;
- Inaccurate or misleading information about a product that does not allow a consumer to make an informed or safe choice;
- Recognition of the special food needs of those in the community with food related diseases;
- prevalence studies into food related disease to ascertain which diseases require label intervention;
- Health warnings on foods as per those on medications related to food colourings in the European Union;

Changes to improved food labelling should be evidence based and driven by:

- the growing trend in the population to take responsibility for one's own health by making healthy food choices;
- the lack of trust in industry claims on food labels;
- the lack of confidence FSANZ research, regulation and enforcement of regulations;

Evidence for this lack of trust and need for reforms to food labelling can be found in several survey responses.

• 95% believed the foods they eat now will determine how healthy they are in years to come.

- 78% were concerned about chemicals and additives in food and were making an effort to avoid them;
- 73% were concerned that regulatory authorities were not adequately regulating what can or can't be put in foods.
- 79% did not believe the claims made by food manufacturers on their labels.

(Meat and Livestock Australia Survey, 2008).

A survey by the Food Intolerance Network (2008) indicated that 96% agreed that food additives should be better tested for their effects before they were approved. <u>www.fedup.com.au</u>

A FSANZ consumer survey in 2007 also indicated that consumers lack confidence in regulation and monitoring of the food supply and information on labels.

(www.foodstandards.gov.au/newsroom/publications/consumer attitudes/index.cfm)

PART 3: KEY ROLES OF FOOD LABELLING

3.1 Food information sheets should be available for manufactured or processed foods that are not labeled at the point of sale, and from the manufacturer. This includes small packaged foods. All fresh and whole foods should have a label display that shows all countries of origin and an audit of products to respond to consumer concerns must be achievable e.g. whether the food contains or has come into contact with sulphur additives, or contains ingredients with sulphur additives not required to be labeled by the end product manufacturer. Enforcement of this is essential in the interests of public health and safety.

Q 6. Is this a satisfactory spectrum of for labeling requirements.

- Few exceptions should be made for any food where there is a need to know the ingredients. The development of food information sheets could provide the relevant information. These should be available at the point of sale of the food and can include contents of small packaged foods;
- Fresh and whole foods should have label displays showing all countries of origin of product or ingredients, whether it is genetically modified, contains pesticide residues, nanoparticles or is irradiated;
- For some foods such as small goods, food information sheets should be available at the point of sale for consumers to check ingredients, processing aids, country of origin information, whether there is any genetic modification or irradiation etc;
- A process for allergy labeling of foods that currently do not require labels needs to be established e.g. fish and some small goods can contain known allergens, lactose, gluten bearing grains and additives such as sulphur that can cause anaphylaxis or lesser allergic reactions. Such information is necessary and needs to be available at the point of sale.
- Information related to product ID, batch etc are essential for food audits and need to be retained as part of label requirements;

Health Safety

Q 7. In what ways can these misunderstandings and disagreements be overcome?

A survey of allergy sufferers needs to be conducted to ensure the current list of allergens is adequate for labeling needs. This should be carried out via some individuals, organisations such as support groups that deal with sufferers of food allergy and food related diseases, specialists and specialty organisations e.g. allergists/immunologists, gastroenterologists, endocrinologists, dietitians. Quite often support groups will have information related to their members special needs or could survey the membership if required.

Health Promotion

Health departments can and do campaign to encourage the population to make healthier food choices in order to prevent chronic diseases. This is a desirable and legitimate health promotion exercise for government.

Q 8. In what ways can food labeling be used to support health promotion initiatives?

• Food labels should not contain information related to health claims. This is something the food industry can choose to promote in their off label advertising campaigns;

Food labels should contain information about nutritional substances added for which they
currently make health claims. This is important as many individuals do not tolerate
nutritional substances such as fish oil which is now commonly added to processed foods
with health claims; also calcium for teeth and bones. Some individuals do not metabolise
calcium properly and would not want to ingest added calcium in their food;

Q 9. In what ways can disclosure of ingredients be improved?

- Either use common names of additives/processing aids or additive code numbers.
- It is important that common additives such as artificial colours and flavours that are present in many processed foods are clearly identified because these are generally consumed in higher doses in multiple products
- Food labels could contain symbols that do not take up much label space;
- There should always be a list of additive code numbers easily accessible at the point of sale;
- Food information sheets or some other source of information that is accessible at the point of sale could provide more data for consumers about their food sources if label space is inadequate.
- Websites and 1800 numbers for food manufacturers should be clearly displayed with information re manufacturer and contact details.
- Removal of the 5% labelling loophole as 5% of some ingredients can be too much for highly allergic/sensitive individuals e.g. SO2.
- Advertising space on labels should be reduced to name of product and address and contact details of the manufacturer with the majority of the space taken by contents information;

Q 10 To what extent should health claims that can be objectively supported by evidence be permitted.

- Not on food labels;
- Health claims re nutritional components can be found from other sources; there are other sources of advertising of health claims e.g. journal articles, electronic and print media advertising, websites.

Q11. What are the practical implications and consequences of aligning the regulations relating to health claims on foods and complementary medicine products?

• Health claims should not appear on food labels. Such information is available from other sources. The issue of health claims on complementary medicine products is a separate issue.

Q 12. Should specific health warnings and related health consequences be required e.g. high levels of fat, sugar, salt.

- High levels of ingredients such as fat, sugar, salt, that appear on labels in panels could be shown in bold print in their usual place. In this way it would stand out without the need for a warning statement to be printed on a label.
- Advertising to reflect this could be done via electronic and print media.
- A wider range of warning statements developed for food components and additives e.g. may affect attention, behaviour and learning, provoke allergy/intolerance symptoms.

Child health and safety must have a higher level of protection than currently is the case. In recent years science has been expanding to open up new fields. We now know more about sciences such as endocrine disruption, neurotoxicology, child absorption of toxic substances and the special vulnerabilities of children. Some toxins can cross the placenta and affect the foetus in utero, which in turn can set the stage for a lifetime of chronic ill health. Infants can be very vulnerable at various stages of development. This can continue through to puberty when the sex organs mature, yet little consideration is given to teenage exposures. Some substances in the food supply can affect behaviour and learning and need special attention in research, regulation and enforcement. Many unlabelled flavourings will fall into this category. Such substances require a warning label.

Consumer Information

Q 13, To what extent should the labeling requirements of the Food Standards Code address additional consumer-related concerns, with no immediate public health and safety impact?

The food standards code should address consumer-related concerns, as consumers are not confident of the current assessment process of what is a public health and safety threat, whether short or long term. Consumers of food products are major stakeholders in the food supply and should have significant input into all issues relating to food. The food industry has a duty of care to consumers to ensure a safe and nutritious food supply, while government has a duty of care to ensure that the food industry provides food that will not produce ill health and is transparent and accountable for its products and behaviour. More effort needs to be made by FSANZ to survey individuals with special food needs to better serve them in the regulatory system.

- Food labels should be responsive to consumer concerns. For years the debate over genetically modified foods and ingredients has not been resolved. The food industry and FSANZ have allowed such technology to be included in our food regardless of our objections e.g. ingredients such as GE corn syrup, corn starch, maize starch, soy lecithin, soy oil, corn oil, everything that could come from GM soy, corn, canola or cottonseed, and even perhaps sugar beets will not be labelled – yet consumers are expected to purchase (in our view) tainted food of unproven safety;
- The same concerns have arisen in relation to irradiation and trans-fats with industry and FSANZ showing exactly the same disregard for consumer concern. Currently, food is known to cause obesity, diabetes, hypertension and cardiac disease, and tooth decay. In countries where there are low levels of tooth decay there is not commercially produced food with a high level of sugar (World Health Organisation. 2004);
- More recently we have seen similar concerns over nanotechnology, forced on us without adequate proof of public health and safety. Like gene technology, these are substances that have previously not been encountered by the human body and there is not data to support that these are safe in the short or long term;
- The AMA has repeatedly called for trans fats to be completely phased out but FSANZ has not banned trans fats and has resisted pressure for mandatory labelling.

The precautionary principle needs to be more stringently applied in the interest of human health and safety.

ASEHA finds the inclusion of the statement 'with no immediate public health and safety impact?' a statement which implies FSANZ are not able to fulfill their duty to consumers to provide assurances that food is safe in the short and long term. If this is not possible, then FSANZ should err on the side of safety There are many data gaps in scientific information and FSANZ is assuming there is no immediate public health and safety impact of gene technology, nanotechnology, irradiation, trans fats, contaminants in food processing aids that the community is concerned about and does not support e.g. butylated hydroxy anisole (320) which is reasonably anticipated to be a carcinogen by the American government and erythrosine which has been linked to thyroid tumours in rats.

Q 14. What criteria should be used to determine the inclusion of specific types of information?

Food labels should primarily be there to identify the product and inform the consumer about ingredients. They should not be considered as advertising space. Protection of human health and safety should be the main concern when determining label information on food additives and aids. Individuals with food intolerances, sensitivities, food allergies etc need to be protected, by ensuring certainty in food choices in order to protect their ongoing health and wellbeing. The provision of clear and honest information about a product is essential to allow a consumer to make an informed choice

This can only be resolved by adequate and appropriate surveys of the population to ascertain their needs. The surveys will act as an evidence base to enable labeling regulations to be developed.

Q 15. What criteria should determine which, if any, foods are required to have country of origin labeling?

A consumer has a fundamental right to know where their food comes from so all foods should have country of origin labeling, including fresh foods to enable consumers to make informed decisions about their purchases.

Part transcript from ABC Radio National Background Briefing 18 April 2010

Stephen Crittenden: Hello from Stephen Crittenden. Welcome to Background Briefing on ABC Radio National.

Food is a red-hot issue at the moment. Thanks to free trade, we're sourcing more of our food from overseas than ever before. But we're also paying more attention to where our food comes from and how it's produced.

Now there's an inquiry into food labelling in Australia, chaired by former Federal Health Minister, Dr Neal Blewett. Already he's received more than 6,000 written submissions on an almost overwhelming variety of issues.

Neal Blewett: There are concerns with health safety, there's pressure from health authorities for preventive health measures - you know, healthier eating. And then there are a whole range of consumer information issues, issues about genetic engineering, issues about nanotechnology, issues about animal welfare, a lot of concern about the inadequacy of labelling, the difficulty of reading the labelling, the fact that some of it was so complex that you looked as though you needed a degree to understand some of the nutrition panels for instance.

'Stephen Crittenden: One of the hottest issues the Blewettt Inquiry will be expected to grapple with is the widespread public anger about country of origin labelling. New South Wales Liberal Senator, Bill Heffernan, has long campaigned about this issue and late last year he introduced a bit of 'show and tell' to the hearings of the Senate Economics Committee.

Bill Heffernan: This is made in Australia Seaport Frozen Seafood. Made in Australia. This came from a restaurant in Canberra that for five years was selling its prawns as Southern Queensland farmed prawns in the restaurant. And I went there and I said, 'Well I'll have the prawns, thanks, if you can tell me which farm they came from.' So they came back and said, 'We can't'. So I said, 'I'll have them anyhow, they look pretty good.' And at 10 o'clock the chef came back and said, 'Look, I went out to the garbage and got the packet.' He had been buying them for five years. These are Indonesian prawns, 'made in Australia'. Even the shop thought they were buying Australian farmed prawns, they were selling them on the menu as Australian farmed prawns. So that's ridiculous. This bottle of water, it has on it, 'Aqua, proudly Australian'. Bottle of water. Tip it on its side, 'Product of China'. We import Chinese bottled water. This is water from China. I rang up the mob that on here, and I said, 'What's Chinese about your water: the bottle, the cap?' They said, 'It's wholly imported from China'. It comes in at 28-cents - so this is a couple of years ago - and wholesales for 38-cents as a loss leader and retails for \$2.50. Bottled water from China, proudly Australian. This bottle here is called 'New Water', a product of PUB: 'Water for All: Conserve, Value, Enjoy.' It's actually recycled sewage water from Singapore.

Stephen Crittenden: Under existing regulations approved by the ACCC, the meat pie you buy is allowed to carry a Product of Australia label if at least 50% of the cost of producing it was incurred in Australia, and that's even if all the ingredients have come from overseas. Late last year, Independent Senator for South Australia, Nick Xenophon, introduced a Truth in Labelling Bill, which is also being sponsored by Greens Senator, Bob Brown, and Nationals Senator, Barnaby Joyce. The plan is that only products made in Australia from 100% Australian ingredients will be permitted to say 'Product of Australia' on the label. Australia's powerful Food and Grocery Council is opposing the plan'.

Many in the population do not want to purchase foods produced overseas because the standards in various countries such as China or other Asian countries are not as high as ours. There is particular concern because of contaminated food from China e.g. the melamine incident which affected foods world wide and more recently high iodine levels in soy milk. We are also uncertain of the integrity of many packaged products from overseas.

Q 16. How can confusion over this terminology in relation to food be resolved?

Product of Australia made from 100% Australian produced goods, manufacturing and packaging is all that is acceptable. Everything else should be labeled according to which country the components were from. Currently, the way food is labeled is deceptive and must cease as soon as possible so that Australians can have certainty in their choices and adequate information to make a choice. The extent of foods covered by this should be all foods including fresh meats, small goods, fruit and vegetables, dairy foods, baked goods....

Q 17. Is there a need to establish agreed definitions of terms such as natural, lite, organic, free range, virgin, kosher or halal? If so should these definitions be included or referenced in the food standards code?

There is a need to establish agreed definitions of terms used on labels as these can be deceptive and are often rorted to increase product sales. Standards need to be developed for all such terms so that consumers can either have confidence in what they mean or know to avoid them. It is vitally important for those with chemical and food sensitivities to be able to have confidence in selecting foods that they find compatible with their particular situation. These definitions should be included in the food standards guide to provide guidelines and maintain consistency across products.

- The term 'lite' can mean anything at all for any component of the product It is misleading, unhelpful and should be banned;
- The term 'natural' is a word that may convey deception as e.g. a bottle of natural mineral water can come from any source. The sparkling 'natural' mineral waters are carbonated when one would anticipate that the water was from a spring in the ground not the local water supply; and is naturally sparkling not carbonated;
- 'Virgin' olive oil should have a standard so that people are not deceived;
- Kosher and halal should have a standard as these are important for cultural and religious reasons and need to be protected;
- AS 6000-2009 Organic and biodynamic products outlines the minimum requirements to be met by growers and manufacturers wishing to label their products 'organic' and 'biodynamic'. The Australian Standard, which is currently voluntary, is based on the Australian Quarantine and Inspection Service (AQIS) National Standard for Organic and Bio-dynamic Produce, Edition 3.3, which governs the export industry. Such foods should be free from chemical inputs and not contain additives/processing aids. However these could be referenced in the Food Standards Code.
- Free range, barn laid and cage free must be clearly defined so that consumers know exactly what they are getting. RSPCA defines these in voluntary codes why not FSANZ in legislated label requirements?
- Fair trade and sustainable palm oil are other issues that need to be defined.

Words have meanings and need to be defined for consumer confidence in FSANZ and the food industry. The food industry must not be engaged in the debate over terms allowed for use on food labels.

Q 18. What criteria should be used to determine the legitimacy of such information claims for the food label?

Any claims must comply with the definition and standards established for those claims in regulation. This should not be allowed as a self-regulatory process. Standards must be developed and monitored by an independent third party audit process.

Also we can no longer ignore the growing footprint of food on the environment is major as foods are transported all over the world and in reality are best fresh, unprocessed and less than 200 km from where they are grown. This is a climate change issue that must be addressed as part of stated claims.

Q 19. In what ways can information disclosure about the use of technological developments in food production be improved given the available state of scientific knowledge, manufacturing process involved and detection issues.

The basic information that needs to be disclosed on a label is whether or not the product contains any GE created ingredients or nanoparticles, which could be identified by food icons, discussed in

the next section. This would not take up much space and would allow the consumer to identify and chose whether or not to purchase these products. The ability to choose fresh produce not created by GE manipulation is also important.

In relation to GM, irradiation and nanotechnology ASEHA's view is that there is no place for them in the food supply. Consumers may not want to eat foods that utilise these technologies and must be pre-warned of their usage. They may not want to eat food containing any levels of these technologies e.g. enzymes. This can easily be done using symbols that utilise little space.

Any new technologies that flout consumer concerns and have data gaps, or are new science that can not be adequately tested to gain consumer confidence, should not be used in the food supply. Food should be sacrosanct. We are currently seeing children with chronic diseases as a result of poorly regulated food. The cost of these is already high and will escalate as they become adults with chronic diseases. This puts a high impost of health care on the population and is particularly repugnant and disgusting because it is totally and unnecessarily avoidable.

- The precautionary principle should apply to the safety assessment and labeling of all food ingredients produced using nanotechnology or GM;
- Labeling all food ingredients produced using nanotechnology or genetic modification (GM) is important for public health, safety and consumer choice;
- The United Kingdom's Royal Society and Royal Academy of Engineering recommended that given the emerging evidence of serious toxicity risks, nano-ingredients should be subject to new safety assessments and face mandatory product labeling;
- The European Union's Food Safety Authority recognises that some nanomaterials can pose serious new health and environmental risks, although there are still many serious knowledge gaps;
- The "Scientific American Magazine" recognised in its August 2009 editorial that big GM corporations such as Monsanto, Pioneer and Syngenta have effectively prevented independent scientific assessment of their GM products, meaning that few safety studies have been published and peer-reviewed;
- Surveys have shown that accurate food ingredient labelling, including in relation to nanotechnology and GM, is very important to Australians;
- GM and nano-ingredient labelling must include all foods, additives and processing aids (including refined oils and sugars), animal products and foods prepared at the point of sale.

PART 4: FOOD LABELING PRESENTATION

Readability

Q 21. Should minimum font sizes be specified for all wording?

Yes. All font sizes should be readable with consideration to those with visual disability. Consumers should not have to carry a magnifying glass to read essential information on food labels. The ingredients with most potential for harm and present in many products could be in a larger font size -i.e additives such as colours, flavours, preservatives.

Q 22. Are there ways of objectively testing legibility and readability – to what extent should this be required.

As labels are there for all food consumers (which are all of us) access to label information for all is vitally important. Labels should take into account visual disabilities.

Comprehensibility

Q23. How best can the information on food labels be arranged to balance the presentation of a range of information while minimizing information overload

There is no question as to the range of consumers taken into account in label regulations. Label information must extend to ALL consumers. It is not ethical to minimize the range of consumers for whom information on labels is given.

- Consistency in presentation in the listing of ingredients;
- Allergen identification (processed peanut, lupin, soy);
- Additives list, with those with most potential to cause adverse reactions listed first in large font and bolded colours, flavours and preservatives, etc;.
- GE food labeled;

- Nanotechnology labeled;
- Country of origin;
- Irradiation labeled;
- Non-nutritious processing additives labeled;
- Packing materials labeled, chemicals leaching from some plastics can affect the developed of children from in utero through early childhood.

Posters and pamphlets that introduce consistency in labeling presentation could be displayed at the point of sale.

Q24. In what ways can consumers be best informed to maximize their understanding of the terms and figures used on food labels

Pictorial icons could provide a way of maximizing information on labels without giving information overload e.g. an icon for GM with a slash through it can indicate no GM components effectively. Such a process could be applied to technologies such as irradiation and nanotechnology.

Posters and pamphlets at point of sale that explains various components of labels. This would require consistency in product information labels.

Government Education program designed to inform consumers about food ingredients and potential reactions such as asthma from sulphite preservatives.

Q25 What is the appropriate role for government in relation to use of pictorial icons on food labels.

Pictorial icons could be developed and regulated by government in consultation with consumers and the food industry. If these icons were related to information for health safety – eg Asthma - a particular icon for foods containing additives such as SO2 and allergens (peanuts, soy etc).

Information format:

Q26 What objectives should inform decisions relevant to the format of front-of-pack labeling

Wider consultation with consumers should inform this debate. With regard to nutrient labeling Rosemary Stanton on ABC Radio 18 Apr 2010 stated that *'in the absence of any rules we have an absurd situation at the moment where food products on the front of the pack have up to 12 little symbols telling you the percentage of the daily intake of a series of nutrients. This is based on the manufacturer's own definition of what a serving is, which obviously can be manipulated. For some things, such as protein, it may relate to the recommended dietary intake of that nutrient. For things like sodium it relates to the upper limit of safety - so not a desirable limit. For things like sugar it's a totally made up figure because we have no recommendation. For things like energy, the kilojoules, the figure taken is for a non-overweight male. Now only one third of Australian males aren't overweight, so it's a minority group among males, it's totally unsuitable for females, and of course ridiculous for children. So this huge mess of figures which tells you that the product has 2.8% of this, and 14.3% of that, of your 'needs' in inverted commas. Frankly, I've been a nutritionist for 45 years and that information does not tell me whether this is a product that I should eat, or that I should not eat, or I should eat less often.'*

The traffic light system should be widely trialled and public education undertaken to inform Australians as to their application. This should assist parents to make healthier food choices for their families.

Q 27. What is the case for food label information to be provided on foods prepared and consumed in commercial (e.g. restaurants, take away shops) or institutions (schools, preschools, worksites) premises? If there is a case, what information would be essential?

Ingredients of foods eaten on premises should be available on request. This should include additives/processing aids e.g. full disclosure of SO2 (including hidden sources). This is particularly essential in the case of consumers with food allergy/intolerance. Food for children should not contain agricultural chemical residues, additives/processing aids, or high levels of fat, salt, sugar, caffeine i.e. should be pure foods. Full disclosure of ingredients is essential in all cases.

Q 28 To what degree should the food standards code address food advertising

No misleading information or claims should be allowed in advertisements. Any claims re the health benefits of specific foods must be backed up with good science.

Because obesity and other chronic diseases in children has reached epidemic proportions ASEHA is concerned that the marketing of unhealthy food and drinks to children contributes to the problem. Children must be better protected from unhealthy food and drink marketing. ASEHA expects government to take a lead role in this.

Q 29. In what ways can consistency across Australia and New Zealand in the interpretation and administration of food labeling standards be improved?

Harmonisation of food labels provided there has been significant consumer education, consultation and input into the process. It is preferable to have food standards harmonized and not spread across state and federal jurisdictions. One national body is needed to take responsibility for standards and enforcement. This should simplify the complaints process, protecting consumers from receiving the bureaucratic merry-go-round.

PART 5. ADMINISTERING AND ENFORCING FOOD LABELING STANDARDS

Q 30. In what ways can consistency, especially in Australia, in the enforcement of food labeling standards be improved?

Currently, the onus for enforcement is spread across various bodies and states. One national body is needed to take responsibility for labelling standards and enforcement which should simplify the system.

- Consistency in labelling such as additive numbers instead of the full name of additive common names only may be used - no chemical terms used that people cannot understand;
- "Labels are the major interface between consumers, governments and industry". Labels should be regulated to ensure that essential information is disclosed and label regulations are enforceable at law. Penalties should apply if necessary information is not forthcoming or an audit of a product for hidden ingredients or sources cannot be performed;
- "Food labels are consequential on other standards" Improvement to the standards that will
 reduce the amount and types of additives allowed that are known to impact on individuals
 with food intolerance, some of which have been banned or restricted in other countries.
 Food additives and other substances used in food processing should be subject to a more
 rigorous safety assessment process. This should especially focus on those already
 suffering allergy/food sensitivities, other food related diseases, children and the foetus. Any
 substances that impact on child health, behaviour and learning should be banned;
- Food labels should be legal documents that are enforceable by law. The labels should identify the product, the manufacturer and contact details, full ingredient listing and nutritional components;
- Additives known to cause reactions must be flagged;
- Any products of gene technology clearly displayed including source of gene utilised.

Q31. What are the strengths and weaknesses of placing the responsibility for the interpretation, administration and enforcement of labelling standards in Australia with a national authority applying Commonwealth law and with compatible arrangements for New Zealand?

One national body responsible for food labelling standards and enforcement would simplify the process, administration and enforcement. It should also simplify harmonisation with New Zealand.

A national approach to food standards, regulation and enforcement would provide a more consistent approach to enforcement of label requirements. Since the move to less proscriptive government regulation and industry self-management, or good manufacturing practice, we have seen a consistent drop in the quality of our food supply with an increase in the use of food additives. In some cases the regulated use of food additives has been abandoned for good manufacturing practice (GMP) and this is totally unacceptable. The primary focus of the government regulatory system should be human health and safety. Consumers need to be able to have confidence in labels along with the knowledge that sound science and the precautionary principle have been appropriately applied to protect human health and safety.

Labelling policy should be focused on human health and safety ahead of industry good manufacturing practice and industry profits. Human health and safety should always be the main priority of government who has a duty of care to ensure a safe and nutritious food supply that will support good health and good quality of life.

Currently, getting action on problems related to food labelling is complex and often consumers are frustrated by finding the appropriate body to make their claim. They get on the bureaucratic merry-go-round, are passed from one department to another with each disclaiming responsibility and eventually walk away from taking any action and the accuracy of food labels is then not tested or corrected.

Q33. If such an approach was adopted, what are appropriate mechanisms to deal with the constitutional limits to the Commonwealth's powers?

States would need to enable the commonwealth to take the lead agency role.

Q34. What are the advantages and disadvantages of retaining governments' primary responsibility for administering food labelling regulations?

Food regulation should remain the responsibility of government because:

- government has a duty of care to consumers;
- government is responsible for ensuring that human rights are observed;
- government is better placed to regulate food labels and ensure breaches are prosecuted;
- government's priority is assumed to be for the protection of human health and safety;
- food industry priority is producing product at the lowest possible cost.

Q35. If a move to either: self regulation by industry of labelling requirements; or coregulation involving industry, government and consumers were to be considered, how would such an arrangement work and what issues would need to be addressed?

- industry self regulation or a co-regulatory approach between government and industry is unacceptable to ASEHA as industry is controlled by profits and public health and safety has a low priority. Already we have seen the quality of our food diminished by deregulation/co-regulation and current industry practices;
- industry codes of practices are not enforceable at Law.

Q36. In what ways does such split or shared responsibility strengthen or weaken the interpretation and enforcement of food labelling requirements?

One agency responsible for food labelling standards and for enforcement of these is a solid approach to the problem. Currently responsibility is split between various state and federal bodies and is a piecemeal approach that has proven unsatisfactory.

Q39. Should food imported through New Zealand be subject to the same AQIS inspection requirements?

Imported foods coming through New Zealand should be subject to the same level of inspection as those that are directly imported from the country of origin. Free trade agreements must not weaken our food labelling laws or food standards. FSANZ must uphold the highest possible food standards and must not be engaged in the promotion of commerce and international trade. This is a conflict of interest within the FSANZ Act (ABC. 18 Apr 2010).

Conclusion:

FSANZ is governed by an Act of Parliament which sets out three main tasks:

- promoting public health and safety,
- providing consumers with adequate information to enable them to make informed choices,
- preventing deceptive or misleading conduct.

ASEHA would like to see that consumers have:

- a voice in food regulation
- a voice in policy development
- that decision makers prioritise consumer interests and public health over the interests of the food industry

• each FSANZ committee has two consumer representatives, one to represent special needs.

Better engagement of consumers during the development of food regulation will assist FSANZ to meet the three objectives of food regulation.

Individual consumers are only able to input food regulation/policy by making written submissions at the time of formal public consultations. In some cases the consultation process is only open to industry and consumers are locked out of the process. It is unfortunate that very few consumers have the capacity to provide submissions for food reviews, or even know the review is under way. This is why we need consumer representatives on FSANZ boards and committees.

Food Regulators should engage consumers in ways other than their consultation process and this can be done via consumer research or consumer advisory panels. This is essential in order for consumers to have meaningful input. Consumers need to be represented on all FSANZ boards and committees with a minimum of two consumer representatives with one of those to represent consumers with special food needs.

ASEHA would like to see an open and transparent process for developing food policy and standards. Stakeholders including consumers with special needs, support groups and other public health groups should have input into decision-making and the assessment of evidence that is the basis for FSANZ decisions. This will enhance consumer confidence in food regulation and the ability of food regulation to protect public health and safety and provide consumer information. ASEHA would like to see a greater commitment to consumer engagement in the area of food standards and policy developments. The development of a consumer engagement committee made up entirely of consumers and FSANZ staff could ensure adequate consumer input.

Government must regulate the food industry better than currently is the case and harsh penalties should apply for breaches of food labeling law. Deregulation, Co-regulation, Industry Codes of Practice or Good Manufacturing Practice is not protecting the community from a food supply that can be making them ill and reducing human quality of life and the lifespan. Good governance is essential as our inferior food supply is adding to the cost of health care.

RECOMMENDATIONS:

Deregulation like privatisation has now been shown not to work in the public interest. The food supply and food labels must be regulated and legislated to protect public health and safety. FSANZ should be funded by government and not answerable to the food industry. FSANZ should not have to deal with commerce and international trade. Government must ensure that the safety of our food supply is a health issue and should be above deregulation, privatisation, commerce and international trade.

The FSANZ Act should be amended to ensure that FSANZ looks after only public health and safety matters, and does not consider trade and commerce e.g. GM crop safety assessments from FSANZ will include issues about trade and commerce in a safety assessment document i.e. how things might affect the free trade agreement. This is not acceptable to ASEHA. FSANZ safety assessments should simply be a safety assessment document.

Inconsistencies in governance need to be removed e.g. *'reduce the regulatory burden without compromising public health and safety'*. Industry cannot be trusted to regulate itself to protect public health and safety, profits will always be their focus. Government must regulate food for public health and safety.

Studies into which contaminates/substances are found in food as a result of agricultural practices, food additives/processing aids, leachate from packaging etc need to be done to inform the discussion on food safety and food labeling. We do not know what the long term/chronic effect of ingestion this cocktail of chemicals is on human health. This urgently needs to be studied to ensure that civil society is not eating a toxic cocktail that will cause chronic health problems.

Flow-on studies should include testing the body burden of Australians to see if they are carrying a body burden of food additives, contaminants and food packaging materials. This should also assist to build an evidence base to ensure an effective regulatory framework.

Food for children and pregnant women should not contain food additives, contaminants, leachate from packaging.

Health promotion in the form of a public education campaign needs to be undertaken by FSANZ to alert consumers to labeling regulations, the use of food additives and other chemicals used in food production, the toxicology of these and how they can affect human health. Some promotional work on diseases that are caused or impacted upon by foods is also necessary to educate consumers about how labels work to protect them from hidden sources of food chemicals and foods they need to avoid.

FSANZ needs to take a lead on bans of unsafe substances in food e.g. trans-fats and the Southampton Colours. It is not acceptable for FSANZ to claim that we ingest less than other countries or that our usage patterns are different. A health risk is a health risk is a health risk and must not be ignored. Sulphur additives 220-228 are risky in the food supply and should be banned. FSANZ should take a lead role in this. We should at least have the same protection of consumers in place as does the European Union.

Ensure that the special need of those with food allergy/sensitivity is adequately accommodated in food labeling. According to Queensland Health up to 25% of the population has some kind of food allergy. This is a significant percentage of Australians who deserve their disability/special need to be included in food labeling regulations and legislation (Queensland Health). www.health.qld.gov.au/ph/Documents/ehu/2784.pdf

Accountability mechanisms need to be put in place to evaluate current performance and studies done to ascertain the following to inform the food labeling review into the future. This is important as many have unmet need and suffer food related reactions that would be unnecessary if food labels were adequate and accurate. These groups include:

- Allergy/sensitivity
- Coeliac disease
- Phenylketonuria
- Lactose intolerance
- Salicylate/amine/MSG sensitivity
- Other food related disorders

Questions that need to be asked include:

- how many are affected;
- the degree of food safety for this population/group;
- appropriateness of labeling for them
- the effectiveness of current food label regulation

FSANZ should be entirely funded by government and should distance itself from the food industry.

References

ABC. 18 April, 2010. Background Briefing. Food fears

Al-Jamali AF, Bani Hari JT. 2007. Improving Postharvest Strawberry Fruit Quality With Carbon Dioxide And Nitrous Oxide At High Ambient Temperatures. ISHS Acta Horticulturae 741: I International Symposium on Fresh Food Quality Standards: Better Food by Quality and Assurance

Allen KJ, Koplin JJ, Gould C, Osborne NJ. 2007. Prevalence of self-reported allergies to food in Australia as assessed by Internet-based questionnaires. MJA 2009; 190 (1): 46-47

Daniel, Otto et al. 1999. Selected phenolic compounds in cultivated plants: Ecologic functions, health implications and modulation by pesticides. *Environmental Health Perspectives 107 (Suppl. 1): 109-114. US National Institutes of Environmental Health Sciences.*

Loblay, R and Swain, A. 1986. Food intolerance. In Recent Advances in Clinical Nutrition. 2: 169-177. Libby & Co, London.

NEW SOUTH WALES, Health. Department of. 2002. NSW Adult Health Survey.

Queensland Health. Public Health Guidance Note. Food allergy food intolerance.

World Health Organisation. Public Health Nutrition, Vol 7, No. 1(A), Supplement 1001, February 2004

http://www.who.int/nutrition/publications/obesity/PHNvol7no1afeb2004/en/index.html

Prepared for ASEHA Qld Inc and National Toxics Network Inc by Dorothy M Bowes May 12, 2010

The **National Toxics Network (NTN)** is a community based network working to ensure a toxic-free future for all. NTN was formed in 1993 and has grown as a national network giving a voice to community and environmental organisations across Australia, New Zealand and the South Pacific. NTN is the Australian focal point for the International POPs Elimination Network (IPEN) and works towards the full implementation of the Stockholm Convention on Persistent Organic Pollutants (POPs) 2001 and other global chemical conventions. NTN is a member of the NGO delegation to the POPs Review Committee which is the UN scientific committee assessing new POPs' nominations.

NTN represented Australian and global NGOs at the OECD Chemical Joint Meetings and was actively involved in the Intergovernmental Forum on Chemical Safety (IFCS), providing an Australian focal point for their INFOCAP information and capacity building program. NTN participates in the Strategic Approach to International Chemical Management and is part of the NGO delegation to the negotiations for a Mercury treaty.

NTN support communities involved in hazardous waste management, pesticides and environmental health issues. Our committee members are involved in a range of national advisory bodies including the Hazardous Waste Reference Group, the Stockholm Stakeholders Reference Group, the National Industrial Chemicals Notification Assessment Scheme (NICNAS) Community Engagement Forum and Australian Pesticides and Veterinary Medicines Authority committees. We also participate in related technical advisory panels.