



Queensland  
Government

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Standards Management Officer  
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Dear Sir / Madam

### **Submission – Proposal P274 – Minimum Age Labelling of Foods for Infants**

Thank you for the opportunity to provide a submission on the call for submissions regarding Proposal P274 - Minimum Age Labelling of Foods for Infants.

This submission provides technical advice and comments by officers of the Queensland Department of Health. The submission does not represent a Queensland Government position, which will be a matter for the Queensland Government when notification is made by the FSANZ Board to the Legislative and Governance Forum on Food Regulation.

The previous submission on the Preliminary Final Assessment Report for Proposal P274 in 2008 provided figures on the introduction of solids from the 2003 and 2008 Queensland Infant and Child Nutrition Surveys (Queensland Health 2005 and 2009). A comparison of these figures showed a decrease in the percentage of infants introduced to solid foods by 4 months from 49.7% in 2003 to 31.3% in 2008. However the 2010 National Infant Feeding Practices Survey indicated that 42.3% of Queensland infants were introduced to solid foods by 4 months of age (Australian Institute of Health and Welfare 2011). The next Queensland Infant Survey is planned for 2014.

The minimum age labelling of infant foods should be changed to 'around six months'. It is considered important that food labelling information supports and reinforces the Australia and New Zealand infant feeding guidelines so that inappropriate early introduction of solids is discouraged.

The consultation paper poses one subset of questions for the food industry and four subsets of questions for all stakeholders. This submission focuses on the four subsets of questions for all stakeholders.

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## Section 4.1.1.2 of Supporting Document 2: Food intended as a first food

### 1. Is the concept and definition of first food a useful way to apply certain labelling and formulation requirements?

The concept of defining 'first food' in Standard 2.9.2 is useful as an alternative to specifying ages, particularly as 'around 6 months' can be interpreted by infant food manufacturers in a variety of ways. However, there are a number of issues in using this concept and defining first food in the Food Standards Code.

- (1) As some infant food manufacturers use 'stage 1' or equivalent labelling to identify first foods, consideration of the allowable use of these other terms is needed. Some manufacturers already use 'first food' on products marketed as 4+ months (smooth range) and 6+ months (puree range).
- (2) The use of the word 'weaning' in the draft definition is potentially confusing. The use of this terminology was considered in the review of the Infant Feeding Guidelines (NHMRC 2013) and the Food and Nutrition Guidelines for Healthy Infants and Toddlers (Ministry of Health 2008). Both guidelines noted that 'weaning' was associated with stopping breastfeeding and the introduction of other foods. However, the introduction of first foods should not suggest that breastfeeding be ceased. Both the Australian and New Zealand guidelines recommend exclusive breastfeeding to around 6 months of age and to continue breastfeeding while introducing appropriate solid foods until 12 months and beyond. The timing of the introduction of solid foods is the same for formula-fed infants as for breast-fed infants. To avoid confusion and use of 'weaning' in various contexts the Infant Feeding Guidelines use the term 'introduction of solid foods' rather than weaning and the New Zealand Food and Nutrition Guidelines for Healthy Infants and Toddlers use the term complementary feeding. These guidelines define complementary feeding 'as the gradual introduction of solid food and fluids along with the usual milk feed (breast milk or infant formula) to an infant's diet.'

Therefore it is recommended that the definition of first food be amended to use the introduction of solid foods and complementary feeding, e.g. *'first food means a food for infants that is intended for use in the introduction of solid foods to (or complementary feeding of) an infant.'* The use of first stage which is discussed below would not be required for this definition.

- (3) While it is important to qualify that first foods should be given at around six months, it would be difficult to include a more specific meaning of 'first stage', as the duration that first foods are given to infants varies, there is no particular order that foods should be introduced to infants, and age-specific development cues are a guide only. The most appropriate method of determining the 'first stage' may be by texture and consistency. The draft Standard 2.9.2 already includes a new clause that 'a first food must have a soft and smooth consistency'. Rather than a separate clause, it may be more efficient to include a texture component within the definition of first food.
- (4) Further guidance on the types of appropriate first foods would be beneficial as the draft definition is broad and could allow commercial infant foods that do not align with infant feeding guidelines. It is particularly important that iron-containing nutritious foods are included as first foods, as well as other foods from the five food groups. Foods with high levels of saturated fat, added sugars (including honey), and added sodium are not appropriate for infants. Some of the commercial infant foods currently marketed for infants as 'first foods' may not fit the definition of a first food. Juices, sugar sweetened drinks, cow's milk, soy and other nutritionally incomplete alternate milks or milk substitutes are not appropriate for infants.

## **2. Is the definition of ‘first food’ enforceable?**

The proposed definition of ‘first food’ in the draft variation is potentially confusing and may not be clear enough for enforcement purposes, primarily because ‘weaning’ is not defined. As discussed above, the Infant Feeding Guidelines (NHMRC 2013) and the Food and Nutrition Guidelines for Healthy Infants and Toddlers (Ministry of Health 2008) both associate ‘weaning’ with the process of stopping breast feeding and the introduction of other foods, which may include baby formula. Furthermore the Macquarie Concise Dictionary (Fifth edition) defines wean as ‘to accustom (a child or animal) to food other than its mother’s milk.’

In addition, as already discussed, it may be difficult to attribute a specific meaning to ‘first stage’.

In relation to the suggested definition in this submission, i.e. *‘first food means a food for infants that is intended for use in the introduction of solid foods to (or complementary feeding of) an infant’*, the term ‘complementary feeding’ may need to be defined or included within the definition.

It is noted the definition includes words ‘food for infants’, which is defined in clause 1 of Standard 2.9.2. This should be kept in the definition because it clarifies that the requirements related to first foods do not apply to infant formula products, formulated meal replacements and formulated supplementary foods and unprocessed fruit and vegetables, which is appropriate.

### **Section 4.1.1.3 of Supporting Document 2: Impact of labelling on other infant foods**

#### **1. Should the use of the age/number 6 on labels of infant food be prohibited, other than in conjunction with the word around? Please explain your view.**

The use of the age/number 6 without ‘around’ as a qualifier should be prohibited on labels of infant food to ensure consistent messaging and reduce confusion for consumers. Both the Australian and New Zealand infant feeding guidelines recommend that solid foods be introduced to infants at ‘around 6 months’ and food labelling should support these national guidelines to provide consistent messages to consumers.

For non-first foods, the use of ‘from around 6 months +’ is not sufficiently different ‘from around 6 months’ for first foods. This could confuse consumers and distract from the message that solid foods should be introduced around six months.

There is already confusion within the consultation paper, where in the diagram (page 14) for first food, the wording ‘around 6 months+’ is given as an example although first foods are designed to be consumed around six months. Likewise, in the diagram for non-first food, the wording ‘from around 6 months’ is confusing as non-first foods are intended for consumption by older infants.

It is considered that other labelling requirements will need to be considered to distinguish non-first foods/late stage foods.

### **Section 4.1.2 of Supporting Document 2: Mandatory advisory statements**

#### **1. Do the changes to the wording of the warning statements change the intent of these statements? If so, please explain why.**

The revised wording of the warning statements is not considered to change the intent. ‘Not before 4 months of age’ should remain a deterrent for carers to introduce foods before 4 months. Likewise, ‘Not before 6 months of age’ for foods containing more than 3g/100kJ of protein should also be a deterrent for carers to not introduce higher protein foods before 6 months.

It is not clear in the drafting of the proposed subclause 5A(2) whether a statement is required that incorporates the warning statement or whether the statement referred to is the actual warning statement as shown. As such consideration should be given to amending the drafting to remove any ambiguity.

Consideration may need to be given to expanding the warning statements 'Not before 4 months of age' and 'Not before 6 months of age' because the terms do not include a subject and are not sufficiently descriptive. As currently worded, the terms could potentially be confusing if reproduced on their own without any supporting information. Phrases such as 'not to be consumed before 4 months of age' or 'not to be fed to infants before 4 months of age' or 'do not feed to infants younger than 4 months of age' are stronger and more meaningful and less likely to be undermined.

**2. Should the 'not before 4 months of age' statement only apply to first food represented for infants 'around 6 months' of age? If not, please describe which foods should carry this warning statement, and the reasons why.**

The statement should apply to all foods intended for infants. It is not known what proportion of carers who commence solids before four months, use infant foods labelled with a higher minimum age. There are potential adverse risks associated with giving any food before 4 months of age. Only including the 'not before 4 months of age' statement on first food for infants 'around 6 months of age' increases the risk that carers may perceive that other food for older infants may be fed to all infants. Including this warning statement on all foods intended for infants would protect infant health and safety; prevent confusion when it comes to enforcing this regulation; and prevent confusion for consumers.

**Section 4.1.3 of Supporting Document 2: Location of mandatory statements on infant food labels**

**1. Is it important for minimum age to be always displayed on the front of a product? Please give your reasons. If not, are there any other labelling measures that should be mandated?**

Having this key message on the front of the product will ensure that this is the predominant message received by consumers, providing clear advice to consumers, which is consistent with the current Australian and New Zealand infant feeding guidelines. If placement is not prescribed and the messages placed on the back of a package, there is likely to be an increased risk that inappropriate food will be fed to babies.

Parents of young infants may have less time to focus on labelling messages than typical shoppers and may benefit from being able to more easily identify this information and make faster purchasing decisions.

Consideration should be given to mandating the display of warning statements, such as the minimum age statement, on online shopping sites because consumers do not have direct access to the label to read such important safety information.

**2. Will the removal of the association between the relevant minimum age statement and the 4-month warning statement reduce the risk of caregiver confusion on the age of introducing solid food?**

Based on the results of FSANZ's consumer research on this issue, consumers will more easily identify which foods are appropriate for each age if the warning statement is not co-located with the minimum age statement.

## Further comments

### Association between introduction of solid foods and breastfeeding

FSANZ concluded from their 2013 Risk Assessment that *'the timing of 'around 6 months' as the appropriate age for the introduction of solid food to infants, would have minimal effect on the risk of adverse health outcomes, when compared to 'from 4 months' of age.* (Consultation Paper, p. 3) FSANZ also state that *'The health benefits of breastfeeding (exclusive or mixed with formula-feeding) for infants up to 6 months of age are well recognised and will not be addressed'* (Supporting Document 1, p. 2). It appears that there has not been a sufficient recognition of the connection between introducing solid foods to infants earlier than the recommended 'around 6 months' and the negative impact on breastfeeding. There is also concern that the infant food industry and clinical immunologists will criticise the proposed change from four to around six months if there is minimal risk of adverse outcomes by delaying solid foods. It is important to emphasise that while there are minimal adverse outcomes associated with delaying solids from four to six months, there are a number of adverse outcomes from the early introduction of solids.

Exclusive breastfeeding to around 6 months is associated with the lowest short, medium and long-term risk of morbidity and mortality among infants (NHMRC 2013, p. 11). The recommendation for exclusive breastfeeding and delay in introduction to solids until around six months is based on a broad range of recognised health benefits associated with breastfeeding and have been developed for the protection of the health and safety of the infant population as a whole. When complementary foods are introduced to the infant's diet, exclusive breastfeeding is compromised (i.e. not exclusively breastfed); therefore the health and safety risks associated with not exclusively breastfeeding to around 6 months should be acknowledged in the FSANZ Risk Assessment.

It should also be acknowledged that there are potential negative impacts on health outcomes if labelling remained 'from 4 months', especially with regard to nutritional adequacy, food preferences, infectious morbidity; and risk of allergy, including:

- if less time is spent on the breast, maternal milk production may decline because of reduced stimulation;
- if solid foods are introduced while the tongue-extrusion reflex is still strong, the infant will reject the spoon (a hard object) – the mother might then feel that the infant is rejecting the food, when in fact he or she is rejecting the object in the mouth;
- exposure to pathogens present in foods can cause increased rates of diarrhoeal diseases; and
- exclusive breastfeeding for at least 6 months reduces food allergies (NHMRC 2013, p. 86).

### Texture and consistency

As already noted, the draft Standard 2.9.2 includes a new clause that 'a first food must have a soft and smooth consistency'. The Australian infant feeding guidelines outline that infants should be given a texture and consistency appropriate for their development stage, moving from purees, to mashed, and then to chopped. The New Zealand guidelines also identify the specific stages that each of these textures should be introduced (puree 6-7 months; mashed 7-8 months; chopped 8-12 months).

It is noted that many infant foods state that the texture is smooth on their labels. These foods are not restricted to first foods and even include foods for infants up to 12 months. It would be beneficial if the terminology on infant food labels aligned with the terminology in the infant feeding guidelines. It is important that infants are exposed to foods with consistency and texture appropriate to their age or stage.

### Other amendments to Standard 2.9.2

It is noted that on page 12 of the consultation paper, the permissions for addition of vitamins and minerals to cereal-based food will need to be amended. In the current Standard 2.9.2, there is

permission for those foods suitable for infants from four months, and those foods suitable for infants over six months.

In [2.8] and [2.9].of the Draft Variation to Standard 2.9.2 FSANZ proposes:

- Changing subclause 3(1) from 'is promoted as suitable for infants over the age of 6 months' to 'is claimed to be suitable for infants over the age of around 6 months'
- Removing subclause 3(2), which is the permission for foods 'promoted as suitable for infants from 4 months of age'

This does not provide for permissions for foods for infants from around 6 months. However in item [2.8] in Attachment B - Draft Explanatory Statement it appears that the intention is to provide for the requirements in subclause 3(1) to apply to food for infants from around 6 months of age rather than for those over the age of 6 months.

Therefore there is inconsistency between the drafting of the variation to the standard and the intention of the variation.

### **Placement of warning statements**

Often other warning statements prescribed by the Food Standards Code are printed on the back of a package in capitals in amongst other legally required statements or information, which may make them harder for consumers to notice and read. In the following hypothetical example, the warning statement may potentially be confused with the statement about no colours or flavours and the best before date.

MADE IN AUSTRALIA FROM IMPORTED AND LOCAL INGREDIENTS. PROCESSED IN A FACILITY THAT PACKAGES PEANUTS. NO ARTIFICIAL COLOURS OR FLAVOURS. NOT BEFORE 4 MONTHS OF AGE. BEST BEFORE 20 APRIL 2014
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It would assist users if the wording of the draft was amended to make it clearer within Standard 2.9.2 that 'Not before 4 months of age' and 'Not before 6 months of age' are warning statements. This is because it is likely a significant number of users of the Food Standards Code will not be aware that the definition of 'Warning statement' in Standard 1.1.1 makes it a warning statement and thus triggers the legibility requirement in Standard 1.2.9. For example, proposed 5A (2) could be reworded as 'A first food must have a warning statement on the package of the food ...'.

### **References**

Australian Institute of Health and Welfare (2011) *2010 Australian national infant feeding survey*. Canberra: AIHW.

Ministry of Health (2008) *Food and Nutrition Guidelines for Healthy Infants and Toddlers (Aged 0–2): A background paper*. Wellington: Ministry of Health.

National Health and Medical Research Council (2013) *Infant Feeding Guidelines: information for health workers (2012)*. Canberra: NHMRC.

Queensland Health (2005) *Infant and Child Nutrition Survey 2003*. Brisbane: Queensland Health.

Queensland Health (2009) *Infant and Child Nutrition Survey 2008*. Brisbane: Queensland Health.

Should you require further information in relation to this matter, please contact Food Safety Standards and Regulation, Health Protection Unit, Department of Health on (07) 3328 9310 or at [foodsafety@health.qld.gov.au](mailto:foodsafety@health.qld.gov.au)

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