

Response to FSANZ proposal to consider amending the Australia New Zealand Food Standards Code

Submission to Food Standards Australia New Zealand

The George Institute for Global Health

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About The George Institute for Global Health

At The George Institute, we believe that everyone has the right to a healthy life, so we are finding solutions to some of the world's biggest health challenges, working with partners and communities across the world, to conduct rigorous, high-quality research. With major centres in Australia, the UK, China and India, we have over 400 active projects in more than 60 countries, making a real difference to people's health, particularly those facing the most barriers. The George Institute for Global Health acknowledges the traditional owners of the lands on which we work, and in particular the Bedegal people, on which our Sydney office is situated. We pay our respects to Elders past, present, and future. We value and respect the ongoing connection of Aboriginal and Torres Strait Islander peoples to Country and seek to work in partnership with communities to deliver better health outcomes.

Overview

The George Institute for Global Health welcomes Food Ministers' decision to request Food Standards Australia New Zealand (FSANZ) to develop a proposal to mandate the Health Star Rating (HSR) system.

After more than a decade of voluntary implementation, selective and insufficient uptake has limited the system's ability to support informed consumer choice and improve population health. Mandating HSR is the single most important step that can be taken to strengthen its public health impact, ensure consistent and transparent nutrition information across the packaged food supply, and create a level playing field for industry and consumers.

Australians and New Zealanders deserve honest information about what is in their food. Mandating HSR on packaged foods will cut through selective labelling practices and give consumers 'at-a-glance' information to make informed decisions for themselves and their families.

Proposal P1067 represents a critical opportunity to strengthen nutrition labelling in Australia and New Zealand and contribute to meaningful improvements in population diets and health. Our key positions for this 1st Call for Submissions are outlined below, and full responses to the consultation questions follow.

Mandating the system without delay is the single biggest improvement that could be made to strengthen Health Stars' public health impact.

After more than a decade of voluntary implementation, the HSR system has not achieved its potential public health and consumer impacts due to poor and selective uptake by industry. Health Stars are still on less than 40% of eligible products, with uptake skewed towards higher scoring products while thousands of low-scoring products remain unlabelled. This missing information undermines the HSR system's core purpose: allowing consumers to make quick, simple comparisons between similar products.

Mandating the system without delay is the single biggest improvement that could be made to strengthen Health Stars' public health impact. Universal application will ensure that all consumers have access to consistent, transparent, and easily understandable nutrition information across the packaged food supply. It will also create a level playing field for industry, recognising the efforts of those already displaying HSRs across their ranges.

Additional measures to strengthen a mandatory HSR

The George Institute supports significant elements of the implementation model proposed by FSANZ, including the scope of products required to display the HSR, the move to a simplified "stars-only" format, inclusion of new requirements to substantiate nutrition information relied upon to generate a HSR 'score', and commitment to ensuring placement on the front-of-pack. These elements will collectively enhance the usability and visibility of the system and must be incorporated into draft legislation to mandate Stars.

Beyond the elements of FSANZ's current proposal, there are also several options explored by FSANZ in supporting documents that we believe should also be adopted and progressed now as part of the mandating process. These include:

- Stronger requirements for consistent and prominent placement of the HSR graphic on the front-of-pack, including specifying position (i.e. top half of the pack) – with the majority of products not yet displaying a HSR label, now is the ideal time to introduce this change
- A change to V points to remove eligibility for non-concentrated FVNL for dried potato crisps and similar vegetable or legume type foods, as well as removing eligibility for concentrated FV points in most categories [DM1.1] (except foods that were >95% dried fruits or vegetables, as tested)

Finally, The George Institute recommends further improvements to the HSR system be considered once the system becomes mandatory. These considerations are in line with global best-practice, including:

- Incorporation of interpretive colours into the HSR graphic to enhance usability. Further consideration of colour should draw upon evidence from current practice globally (e.g. Nutri-Score, traffic light labels in UK and elsewhere), which importantly include colours which steer consumers away from less healthy options and not simply signal healthier choices.
- Improved linkages of HSR with initiatives beyond food labelling, for example, integration with marketing requirements for food (e.g. requiring all product advertising to display the HSR for that product, restricting advertising of low-scoring foods to children), or including HSR thresholds in nutrition standards for public procurement of foods (e.g. as done in NSW Healthy Food and Drink in NSW Health Facilities for Staff and Visitors Guidelines).

An independent algorithm review is needed after mandating HSR

The George Institute supports FSANZ's proposal to prioritise mandating the HSR system ahead of undertaking a comprehensive review of the underlying algorithm. This is a pragmatic approach to avoid further delays in delivering public health and consumer benefits.

However, we note that the HSR algorithm was last reviewed in 2019 and should be reviewed soon to reflect updated nutrition science and address known limitations. We urge Food Ministers to outline a clear timeframe and process for conducting an algorithm review under a mandatory system. This review should occur following the release of the updated Australian Dietary Guidelines and be supported by strengthened governance arrangements that align with WHO guidance on the importance of algorithm development being conducted by an independent scientific committee to ensure scientific integrity and public trust. This approach appropriately balances the need for urgent policy action with the importance of ongoing system integrity and continuous improvement.

A two-year transition period, plus one year stock in trade period, is appropriate

The George Institute recommends a clear and reasonable transition period that recognises the extended period industry has already had to display HSR and the industry's ability to quickly apply Country of Origin labels when required by regulation (3). A two-year implementation period, plus one-year stock in trade period, is appropriate.

A simple and targeted communications campaign will ensure ongoing consumer trust and enhance the public health benefit of the HSR

Finally, a mandatory HSR should be accompanied by complementary measures, including public education and ongoing monitoring. This will ensure the system is well understood and effective across diverse population groups, and support necessary future evaluations and reviews of the system.

A communications campaign for HSR should focus on public health benefits and provide real-life examples of how consumers can use HSRs effectively when comparing products on a shelf. This should include dedicated outreach to healthcare professionals, to support them in encouraging use of HSR amongst their patients, as well as integration into school curricula to capitalise on the potential simplicity of HSR as a tool used by even young children.

Communications should keep messages simple, avoid technical detail, and ensure messages are appropriate across diverse audiences. This includes positive messaging around food, i.e. focusing on positive health outcomes of eating well, rather than "loss" framing, that may be less inclusive and contribute to weight or health stigma. However, it will also be essential to communicate the value of HSRs in warning consumers away from unhealthy options. This builds on evidence that front-of-pack nutrition labels that provide both positive and negative nutritional cues have the strongest results in terms of encouraging healthier food choices.

1. Do you support FSANZ's assessment that mandating the HSR system would better support healthier food choices than a voluntary system (see section 4.1 of this report)? Why/why not?

The George Institute strongly supports FSANZ's assessment that mandating the HSR system would better support healthier food choices than maintaining a voluntary system.

Voluntary implementation has not achieved uptake targets to maximise public health benefit

There is clear and consistent evidence that voluntary implementation has failed to achieve the uptake necessary to allow consumers to make meaningful comparisons between packaged products. In 2025, more than a decade after the system was first introduced, fewer than 40% of products displayed the label: government monitoring found uptake of 39% in Australia and 36% in New Zealand (1), while independent monitoring conducted by The George Institute found HSR was displayed on 37% of products (2).

This is far below the uptake target of 70% by November 2025 agreed by Food Ministers. The George Institute independent monitoring indicates that display of the labels plateaued and subsequently declined following uptake targets being set by Food Ministers in 2020 (3).

Voluntary implementation of HSRs has allowed the food industry to promote higher-scoring products, while withholding the rating on unhealthy foods. In Australia, The George Institute found only 24% of products scoring ≤ 3.0 HSR displayed the label in 2023 compared to 53% of products ≥ 3.5 HSR (4). Uptake was lowest on products scoring 0.5 (16%), and highest on products scoring 5.0 (61%). In New Zealand, The University of Auckland found that products displaying the label had a higher mean HSR (2.9) than those that did not display the label (2.6) in 2023 (5). Selective uptake has undermined the credibility and effectiveness of HSR, restricting consumers' ability to compare product healthiness and compromising its core policy objective.

Mandating HSR will also ensure that labels are not removed when they no longer suit companies' economic or reputational interests. A recent international example provides an important lesson in this regard: following an independent review of the algorithm underpinning the Nutri-Score front-of-pack label system in Europe, large manufacturers who had previously adopted the label, such as Danone and Kellogg's, removed them where scores had been reduced (6).

A mandatory system is therefore essential to ensure broad label uptake and enable consumers to consistently compare similar products. Mandating HSR is the most important step that can be taken now to improve its public health and consumer impact.

Consumers support and expect mandatory HSRs

Consumer sentiment also favours the adoption of mandatory HSR. More than 82% of Australians support mandatory HSR on all packaged foods (7). FSANZ's consumer research, noted in SD2, reinforces this: "Participants also noted they expected universal (mandatory) application of the HSR

symbol would support both use and understanding of the system. They commented it would allow more comparisons to be made between similar foods than is currently possible.”

Changes to labelling can be made quickly when required

The food industry has demonstrated that it can rapidly apply labels when required by law, and poor voluntary HSR uptake can be compared with rapid uptake of mandatory Country of Origin Labels. The George Institute found these were applied to 93% of products within three years of legislation being introduced in 2018, with most products updating their packaging to display Country of Origin but not HSR at the same time (3). This highlights the necessity of labelling being required by law.

International precedents support mandating HSR

The food industry may argue that mandatory front-of-pack labelling could raise trade-related concerns, including claims that mandatory labels might operate as a barrier to the free movement of foods across international borders. However, international practice and international food standards demonstrate the feasibility and legitimacy of mandatory labels. At least 19 other countries now have mandatory front-of-pack nutrition labels (8,9). The Codex Alimentarius, which sets out international food standards and is designated as the relevant standard-setting organisation by the World Trade Organization for the purposes of harmonising regulations, explicitly recognises that “FOPNL can be voluntary or mandatory in line with national legislation” in Annex 2 (Guidelines on Front-of-Pack Nutrition Labelling) of the Guidelines on Nutrition Labelling (10). These Guidelines also note that “FOPNL should be implemented in a way that facilitates the broad availability of FOPNL for consumer use.” This supports mandating HSR as a measure to protect public health while meeting relevant obligations of international trade law (11).

2. Do you support FSANZ’s proposed approach for the application of the HSR symbol to specific types of sales, including food for retail sale (see section 4.2 of this report and section 2 of SD5)? Please provide reasons and describe any practical or implementation issues FSANZ should consider.

The George Institute supports FSANZ’s proposed approach. This is guided by the principle that where a Nutrition Information Panel (NIP) is required, a HSR should generally also be provided to interpret that information for consumers, except for select types of products that should be explicitly prohibited from displaying a HSR. This is consistent with Codex guidance that “FOPNL should be implemented in a way that facilitates the broad availability of FOPNL for consumer use” (10).

We support the mandatory display of HSR on foods for retail sale where a NIP is required. This includes products that do not vary in nutrient composition and imported products. Products that are usually exempt from displaying a NIP but which carry a nutrition or health claim, as well as packaged water, should also be required to display a HSR.

A HSR could be voluntarily provided on packaged products that are not required to display a NIP but elect to do so, including brewed soft drinks and food in hampers. We also support the voluntary display of HSR on fresh and minimally processed fruit and vegetables, and on unpackaged products where a NIP is voluntarily provided.

General prohibitions on use of HSR

The George Institute supports FSANZ's approach to foods which would be prohibited from displaying a HSR, including formulated meal replacements and formulated supplementary foods. Although this change affects a relatively small number of products, it includes several high-profile examples, such as Milo and Up&Go, that have attracted significant media and public health scrutiny and have undermined consumer confidence in the system. On balance, we support removing HSR from these products for this reason.

However, these products are often marketed, positioned and consumed as everyday foods, alongside similar products that are not regulated as special purpose foods. There is also potential for manufacturers to use special purpose foods as ingredients in other products to circumvent HSR requirements. For example, some breakfast cereals and muesli bars use Milo as an ingredient and report this as a "Formulated Supplementary Food Base" in the ingredients list. FSANZ should therefore provide clarity about whether these foods are in or out of prohibitions, and closely monitor implementation of this exemption to ensure it does not create a loophole that enables widely consumed everyday products to avoid displaying a mandatory HSR.

We strongly support FSANZ's approach to prohibit HSR on alcohol and no/low alcohol products to ensure that HSR does not convey that there are 'healthier' versions of these drinks. We acknowledge the thorough review of health evidence and global guidance in SD5 that supports this position.

Considerations for foods for infants and young children

The George Institute also supports the prohibition on the use of HSR on foods for infants (children under 12 months of age). The current exemption from the HSR that applies to foods for infants should continue under a mandatory system. Infants have specific nutritional and feeding requirements, and these products are subject to some compositional requirements, therefore it is not appropriate to apply HSR to those foods.

Without a definition for foods for young children (>12 months) in the Food Standards Code, it is difficult to prohibit these products from displaying a HSR. However, we note significant issues with foods for young children over 12 months of age, as highlighted in the March 2025 policy paper prepared by the Food Regulation Standing Committee on commercial foods for infants and young children (12), and that work to consider improving regulatory requirements for these products is currently underway.

To ensure that the HSR on foods for young children genuinely supports healthy choices rather than creating a 'health halo', regulations to improve the composition, labelling, format and marketing of these foods must be comprehensive; the appropriateness of HSR in this category depends on these broader reforms. Public messages around the application of the HSR to commercial foods for young children must be paired with communication that these products should not displace whole foods in the diet.

Use of HSR in advertising

The George Institute supports preventing the use of HSR in advertising of products that are prohibited to display a HSR, as per the above.

We support FSANZ's proposal to require any HSR displayed in advertising to be calculated and presented in accordance with the prescribed requirements. We also strongly recommend that products subject to mandatory HSR display requirements be required to include the HSR in all advertising materials.

Manufacturers frequently feature the HSR in marketing when products receive high ratings, demonstrating its value as a promotional tool. In contrast, products with lower ratings rarely display the HSR in advertising. Consumers should have access to this important health information wherever purchasing decisions are influenced, including in marketing and advertising.

As an initial measure, FSANZ could require that any image of product packaging used in advertising clearly displays the HSR as it appears on the product at the point of sale. This would help ensure consistent and transparent communication of product healthiness across consumer touchpoints.

3. Are there specific foods for which there would be space limitations in fitting a legible HSR symbol on the label (beyond small packages <100 cm²) (see section 2.2.6.3.6 of SD5)? Please provide examples and outline any practical solutions or approaches to address these challenges.

The George Institute supports FSANZ's position that mandatory application of the HSR should extend to the majority of packaged foods. The guiding principle should be maximising coverage and consistency. Any exceptions to this must be clearly defined, narrowly applied, and supported by strong, practical evidence. Expanding exemptions for size further risks creating gaps in coverage, particularly for unhealthy product categories where smaller packaging formats are common (e.g. confectionery, snack foods).

The proposed exemption threshold of <100 cm² total surface area is appropriate and should not be expanded. However, while this retains alignment with other provisions in the Food Standards Code, we note that this threshold is already relatively permissive when compared with international benchmarks. For example, the Codex Alimentarius General Standard for the Labelling of Pre-Packaged Food defines "small units" as products with a largest surface area of <10 cm² (13), Canada's recently introduced mandatory front-of-pack labelling system exempts foods in "very small packages" with a surface area of <15 cm² (14,15), and the European Union exempts "packaging or containers the largest surface of which has an area of less than 10 cm²" from displaying all mandatory labels (16). This demonstrates that the current threshold adopted for HSR is generous and provides sufficient flexibility for industry without undermining policy objectives. Proposed changes to HSR to focus on the "Star" graphic only should also make it easier for HSR to be applied to small packages. In sum, we strongly support FSANZ's position and justification for not adjusting the definition of small package size for the HSR system.

4. Do you support FSANZ's proposed overall approach with respect to calculating the HSR (see section 4.3.1 and Attachment C of this report)? Please provide reasons for your response, including any specific aspects of the proposed approach that you consider problematic or could be improved.

The George Institute supports FSANZ's proposed overall approach, particularly the decision to prioritise mandating the HSR system before undertaking a comprehensive review of the algorithm. This will support timely approvals and limit further delays to HSR being displayed on all products.

Without a mandatory framework, any review of the HSR algorithm may also discourage voluntary uptake, as recently seen with the Nutri-Score system in Europe. An algorithm review under

voluntary conditions may also be prone to resulting in relatively ‘weak’ changes, as demonstrated by HSR’s own algorithm review during the previous five-year review (17).

However, we note that the HSR algorithm was last reviewed in 2019 and should be reviewed in the near future to address known limitations. We urge FSANZ and Food Ministers to outline a clear timeframe and process for conducting an algorithm review under a mandatory system. This review should be triggered by the release of the updated Australian Dietary Guidelines. To ensure scientific integrity and promote public trust, this process must be led by an independent scientific committee (see further below).

Key evidence supporting the overall validity of the HSR algorithm

The George Institute commends the analytical work undertaken by FSANZ to assess the current performance of the HSR algorithm. The dataset used, mostly collected by FSANZ after industry failed to provide this information voluntarily, is a significant improvement from the data available during HSR’s five-year review.

We consider FSANZ’s focus on overall alignment with dietary guidelines to be reasonable at this stage. The purpose of HSR is to guide consumers towards healthier choices, with the system designed to complement rather than replicate dietary guidelines which are intended to promote overall dietary patterns. The available evidence indicates that the HSR algorithm is functioning broadly as intended, although some limitations that warrant future refinement are noted.

The overall validity of HSR’s algorithm is supported by epidemiological evidence indicating that dietary patterns comprising a higher proportion of foods with higher HSR scores are associated with reduced risk of all-cause and cardiovascular mortality (18). While there have been few detailed assessments of the HSR algorithm, numerous studies assessing the validity of the closely-related Nutri-Score algorithm also demonstrate associations with improved health outcomes (19).

FSANZ’s analysis indicates alignment with dietary guidelines in approximately 79% of cases overall, suggesting that the system provides generally appropriate guidance to consumers. However, FSANZ also found lower alignment for discretionary foods (approximately 73%), a key concern for public health stakeholders given that these foods account for around one-third of dietary energy intake despite dietary guidelines recommending that their consumption be strongly limited.

Rationale for an algorithm review

The evidence that the HSR algorithm generally aligns well with the Australian Dietary Guidelines means the few “outliers” or “anomalies” seen are unlikely to significantly shift the healthiness of the dietary pattern overall. However, even a relatively small proportion of outlier products can undermine consumer confidence in the integrity of the system. Instances where products high in saturated fat, sodium and added sugars receive high scores have attracted significant public and media attention and risk undermining consumer trust in the system. This reinforces the importance of moving forward, under a mandatory system, with a clear public commitment to a forthcoming process to consider and address these issues.

To ensure HSR continues to guide consumers towards genuinely healthier choices and away from unhealthy options, the algorithm must be regularly reviewed and updated in line with evolving nutrition science and changes in the food supply. Other long-standing FoPNL policies worldwide have conducted such reviews approximately every five years (9,20).

Instituting a mechanism for a review

A formal, government-led process for periodic algorithm reviews must be established. International best-practice and guidance from UNICEF (21), and the World Health Organization (WHO) (22), highlight the importance of safeguarding this specific process from commercially conflicted interests. For example, WHO guidance states that “government should have the ultimate responsibility and authority for the nutrient profile model that underpins the FOPL system. This government-led process will facilitate the adoption of credible nutrient profiling criteria that is based on authoritative scientific information, reflects national dietary guidelines and eating habits of the population, and is free from commercial and other vested interests.” Relevant Codex Guidelines highlight that FOPNL should be developed ‘in consultation with’ but importantly, not in collaboration with, all relevant stakeholders. This text (revised from earlier drafts after discussion around commercial conflicts of interest) supports FSANZ and Food Ministers implementing necessary safeguards and arrangements in the next iteration of the HSR algorithm’s refinement (10).

Independent scientific committees, free from industry representatives, are commonly used to review nutrient profiling systems, with recent examples including Nutri-Score (23) and the United Kingdom’s nutrient profiling model (24). The HSR system is one of the very few front-of-pack labels worldwide that have allowed industry to directly influence setting the underlying nutrient profiling model (9,20).

Genuine independence of the algorithm review process will be essential to support consumer trust, which is sensitive to perceived industry involvement. FSANZ’s own research indicates that such perceptions can reduce confidence in HSR (see SD1).

We note that the consultation paper suggests that future changes to the HSR algorithm could be managed through standard FSANZ proposal and application processes. Given the importance of the HSR algorithm as a public health and consumer empowerment tool, The George Institute considers that a specific review mechanism is warranted and that further consideration and direction from Food Ministers is warranted. Key features should include:

- An independent scientific committee free from commercial conflicts of interest – consideration should be given to arrangements similar to those used by the National Health and Medical Research Council in the review of the Australian Dietary Guidelines, or by government agencies regarding tobacco control policy (in accordance with Article 5.3 of the World Health Organization’s Framework Convention on Tobacco Control (25)). We also note there is precedent in the FSANZ Act for FSANZ to accept decisions made by other bodies for incorporation into food standards (e.g. in relation to variations to the Maximum Residue Limits Standard).
- Clear rules governing engagement and transparency (e.g. public consultation with any/all stakeholders alongside protected scientific deliberation)
- Pre-defined objectives or indicators of ‘improvement’ to guide decision-making and promote committee consensus

As stated previously, The George Institute supports deferring a full algorithm review until the HSR system is mandated. This staged approach appropriately balances the need for urgent policy implementation with ongoing improvement and system integrity.

Key areas of focus for an algorithm review to improve public health outcomes

Based on current evidence and known limitations, priority areas for consideration in a future algorithm review should include:

- Rebalancing positive and negative components, to ensure that beneficial attributes cannot excessively offset harmful nutrients, as is currently the case. In line with approaches in the Nutri-Score algorithm, the weighting and eligibility criteria for positive components should be reassessed.
- Strengthening penalties for sodium and added sugars, aligned with current evidence on health risks.
- Incorporating treatment of non-sugar sweeteners to prevent products with non-sugar sweeteners from receiving high ratings, consistent with approaches used in Nutri-Score.
- Exploring the role of ultra-processing (26), in light of emerging evidence, with a view to incorporating this factor in an evidence-based manner.
- Improving scaling of ratings, with the conversion of underlying algorithm scores to HSRs reviewed to enhance discrimination across the food supply, which will help address consumer confusion about how to use and interpret the label.

5. Do you support FSANZ's proposed approach with respect to the categorisation of foods for the algorithm (Categories 1, 2, 3, 1D, 2D, and 3D) (see section 4.3.2 of this report and section 3.1 of SD5)? Please provide reasons for your response.

The George Institute supports FSANZ's proposed approach to food categorisation within the HSR algorithm, including the treatment of Categories 1, 2, 3 and dairy-specific subcategories. However, any substantial changes to category definitions or classifications should be considered as part of the next comprehensive review of the algorithm, rather than through piecemeal adjustments.

Categorisation has historically been an area where industry stakeholders have sought to influence outcomes, including through anomaly requests aimed at achieving more favourable scores for specific products via 'category shopping' (e.g. dairy, olive oil). We note specific attention has been given by FSANZ in the current proposal to definitions of categories 1D, 2D and 3D. We support further investigation of potential changes to those categories only to the extent necessary to translate current voluntary guidance into a mandatory system.

6. What are your views on the approaches considered by FSANZ for accounting for milk powder in foods in the dairy categories, including how these approaches address reconstitution and the application of the 75% rule (section 3.1.4.4.5 of SD5)? Please describe any alternative approaches that may better address the issues identified.

The George Institute supports the option under which milk powder must be reconstituted to its original water-to-milk-solids ratio to qualify as a dairy food. This approach ensures that products classified within the dairy categories are genuinely dairy foods and therefore appropriately receive the treatment afforded to dairy products under the HSR system. It also helps ensure that products are neither advantaged nor disadvantaged relative to comparable foods.

While FSANZ notes that determining the level of reconstitution in mixed foods may be difficult, similar challenges arise under alternative approaches and can be addressed by requesting supporting information from manufacturers.

We do not support the alternative approach whereby any ratio of milk powder to water would qualify as a dairy food for HSR purposes. Under this approach, products containing only negligible amounts of dairy could be classified as dairy foods despite bearing little resemblance to reconstituted milk. Given that milk powder is typically reconstituted at ratios closer to 1:2, this could create a substantial loophole, allowing products with minimal dairy content to benefit from the more favourable treatment afforded to dairy as a core food group. It may also enable products with less favourable nutritional profiles, such as high added sugar content, to derive an unwarranted health halo while disadvantaging genuine dairy products.

Although FSANZ expects many such products would be excluded due to low calcium content, this safeguard may be open to interpretation and exploitation. FSANZ also notes potential enforcement challenges under this approach, but these could similarly be addressed through requests for information from manufacturers.

Finally, we do not support the option of recognising only dry milk powder as the qualifying dairy component. This approach would fail to recognise that milk powder, when reconstituted to its original composition, is nutritionally equivalent to milk and serves as an important source of dairy for many consumers.

7. Do you support FSANZ's proposed approach with respect to the form of the food used when calculating the HSR (see section 4.3.3 of this report and section 3.3 of SD5)? Please provide reasons for your response, including any specific aspects of the proposed approach that you consider problematic or could be improved.

The George Institute supports FSANZ's proposed approach to calculating HSRs based on the form of the food, and notes the detailed consideration given to this matter by FSANZ as well as the significant resources and time dedicated to investigating and resolving the issue previously.

This largely represents a continuation of existing rules, adopted by Food Ministers after considerable public concerns with earlier "as prepared" rules undermined consumer trust and confidence in the HSR system. Those rules allowed some products (e.g. sugary drink powders, burger seasoning mixes) to achieve inappropriately high HSRs through the hypothetical addition of other ingredients in particular quantities (e.g. milk, vegetables).

The proposed approach, of generally requiring HSR to be calculated on an 'as sold' basis except for limited and clearly defined exceptions (reconstituting with water, draining before consumption), continues to address the main public health and consumer concerns raised. This will help ensure alignment with consumer expectations, transparency and interpretability of HSRs, and consistency across product categories.

We also support FSANZ's proposal to require clear on-pack wording in cases where HSR is calculated on a reconstituted or drained basis, to ensure consumers understand how the rating has been calculated.

8. Do you support FSANZ's proposed approach with respect to FVNL content used when calculating the HSR (see section 4.3.4 of this report and section 3.4 of SD5)? Please provide reasons for your response, including any specific aspects of the proposed approach that you consider problematic or could be improved.

The George Institute supports FSANZ's proposal to combine concentrated and non-concentrated FVNL into a single category. As noted in SD5, determining whether FVNL content should be classified as non-concentrated or concentrated is complex. This information is not provided elsewhere on product packaging, meaning it is difficult to understand how this provision has been applied in practice and verify its appropriate use. We agree that combining these into one category would simplify the definition, implementation, monitoring and enforcement of the use of V points. It would also align with the approach taken by similar algorithms e.g. Ofcom in the United Kingdom and Nutri-Score in the European Union, which do not include a 'concentrated FVNL' category.

Modelling conducted by FSANZ indicates that the proposed changes would primarily affect dried fruit (generally decreasing by 0.5 HSR), and muesli bars and snacks (decreasing by up to 2.0 HSR). This is an appropriate and reasonable outcome, given the latter are generally discretionary products and the former is only conditionally recommended in the Australian Dietary Guidelines.

In addition, we also support uptake of two other options explored by FSANZ in SD3 and 3.1.2.3. These are:

- Removal of non-concentrated FVNL points for dried potato crisps and similar vegetable or legume type products, so that they no longer score V points; and
- Removal of eligibility for FV points for concentrated sources of fruit and vegetables, except for foods that are >95% dried fruits or vegetables.

Many of the products impacted by this change have been identified as outliers receiving disproportionately favourable scores (e.g. corn-chips, extruded legume snacks). This adjustment would improve alignment with consumer expectations and dietary advice. Public health and consumer groups believe any improvement in scoring of discretionary products is important given the high proportion of discretionary products receiving high HSRs. The impact at category-level is also important; for instance, removing the ability of concentrated fruit and vegetables to receive V points would improve alignment in toddler foods (from 53% currently and 56% under FSANZ's current proposal, to 58% incorporating this option). The change to V points for chips and similar products would improve alignment for snack foods (73% currently, 73% under FSANZ's proposed model, and 75% with this sole change), as outlined in SD3.

9. Do you support FSANZ's proposed approach with respect to algorithm overrides (see section 4.3.5 of this report)? Please provide reasons for your response, including any specific aspects of the proposed approach that you consider problematic or could be improved.

The George Institute supports FSANZ's approach to retaining the three existing overrides (e.g. plain water, unsweetened water-based flavoured beverages, and minimally processed fruit and vegetables). We also support not introducing any further algorithm overrides. This maintains simplicity and avoids introducing opportunities for unintended consequences.

10. Do you support FSANZ's proposed approach regarding layers of packaging, multipacks, individual portion packs and multicomponent foods (see section 4.3.6 of this report and section 3.2 of SD5)? Please provide reasons for your response.

The George Institute supports FSANZ's proposed approach to products with multiple layers of packaging, i.e. that the HSR must be displayed on one layer of packaging only, under the condition that that HSR is visible to the consumer at the point of sale. Requiring display of the HSR on at least one layer that is visible to consumers is appropriate and ensures that the label fulfils its purpose in guiding purchase decisions.

For variety packs, we strongly support the proposal allowing use of a single HSR representing the lowest-scoring product within the pack. This is a prudent and consumer-protective approach, as it avoids the risk of overstating the overall healthiness of the package and thereby misleading consumers.

We also support FSANZ's proposed approach to multi-component foods.

These approaches reflect a consistent principle of ensuring that consumers are informed and not misled, while maintaining practical feasibility.

11. Do you support FSANZ's proposed approach for the HSR symbol to be the stars element only (see section 4.4.1 of this report and section 1.1 of SD4)? Please provide reasons for your response, including any evidence on consumer use or implementation considerations.

The George Institute strongly supports FSANZ's proposal to allow only the "star" format as the single, standardised and mandatory format on the front of the pack. The consistent use of this simple summary indicator will more effectively support consumer decision-making.

FSANZ's data indicates that most products (71%) already use the stars-only format, indicating strong industry familiarity and feasibility. Evidence from FSANZ's own evaluations indicates that the additional information permitted to be displayed to date causes confusion and impairs understanding.

This change will improve consistency, recognisability and use by consumers, reduce complexity for industry, and facilitate monitoring and enforcement.

12. Do you have any information or evidence to inform the consideration of colour including as it relates to supporting consumption of foods identified in Guideline 2 of the ADGs and Eating Statement 1 of the NZEAG? Please provide any consumer evidence and/or information on implementing the use of colour in the HSR symbol.

The George Institute supports future consideration of the use of colours to improve visibility and facilitate quicker, easier interpretation of HSR. However, the options tested in any future consideration of colour must be better aligned to the global evidence base.

We do not support the current proposal to use colour to highlight 'core' foods. This approach has not been consumer tested, and appears contrary to global evidence that interpretive labels that signal unhealthiness are more effective than positive signposts (21,27,28,29,30). Furthermore, clear definitions of 'core' and 'discretionary' (or their NZ equivalents) are not available, providing a significant barrier to adoption.

Global best practice in front-of-pack labelling does support the use of colours, applied to all products, to strengthen visibility and usability. HSR is the only interpretive front-of-pack label in use worldwide that does not specify any colour requirements. Including colours, such as traffic light colours or block colours for impact, improves salience and assists understanding (9,20,31,32,33). The most relevant example, providing a clear indication of how mandatory colours can be implemented for HSR, is the spectrum of colours used in the Nutri-Score label.

Given the evidence that interpretive labels that indicate unhealthiness perform best (21,27,28,29,30), the inclusion of colours that better warn consumers about unhealthy products is our priority recommendation. However, evidence-based approaches to mandating colour specifications should only be considered in the next phase of mandatory implementation.

13. Do you support FSANZ's proposed approach for the location of the HSR symbol on a package of food (see section 4.4.2 of this report and section 1.2 of SD4)? Please provide reasons for your response, including any evidence on consumer use or implementation considerations.

The George Institute supports FSANZ's requirement for front-of-pack placement, which is essential for ensuring the HSR is visible and usable at the point of purchase. However, we recommend strengthening the proposal by requiring more consistent placement through specifying a required location on the front-of-pack, such as the top half. Evidence suggests that consistent placement improves speed of recognition, comprehension, and accessibility for consumers with lower health literacy. It also reduces the risk of placement that diminishes consumer access to the label.

As noted in SD4, front-of-pack placement is more likely to be noticed, understood and used, while it also supports faster, at-a-glance decision-making. FSANZ found that 97% of products displaying HSR already place it on the front-of-pack, demonstrating the feasibility of this approach. This is also consistent with Codex Alimentarius guidance (10), which emphasises that front-of-pack labelling should be presented in a manner that is clear, prominent and readily understandable to consumers, supporting informed purchasing decisions at the point of sale.

More specific placement requirements to support visibility and use

The George Institute recommends strengthening the current proposal by requiring more consistent placement through specifying a required location on the front-of-pack, such as the top half. Evidence suggests that consistent placement improves speed of recognition, comprehension, and accessibility for consumers with lower health literacy. It also reduces the risk of placement that diminishes consumer access to the label.

FSANZ reports that 90% of products currently displaying a HSR place it on the bottom half of the pack (SD4). While this reflects industry preference, it is not aligned with international best-practice and may obscure the label, undermining visibility and use. FSANZ also notes evidence to suggest there may be some advantages of consistent positioning of front-of-pack labels, particularly in the top half of the package, with benefits including reduced time to understand the label, and slightly faster identification of the presence of the label. One study (SD4, p. 15) found that a consistent location caused a small increase in understanding of the label for participants with lower health literacy, suggesting this factor may be important for equity.

Other countries specify uniform placement requirements for front-of-pack labelling. This includes Canada's label (top half) (14,15) and Nutri-Score (bottom third) (34). The current draft label

proposed by the US Food and Drug Administration would require placement of the label in the top third of the packaging, based on evidence showing this would improve consumer attention, reaction time, and label understanding (35).

We recommend that FSANZ prescribe placement of HSR on the top half of pack. Given the majority of products are still not displaying HSR under the current voluntary system, this is an ideal opportunity to correct current HSR practices towards international best-practice. Products currently displaying HSR on the bottom half of the pack will have a sufficient implementation period to make this update.

Avoiding loopholes that undermine visibility

Clear requirements around placement on the front or principal display panel are important to ensure the symbol remains prominent, easily accessible and identifiable across all packaging formats. Evidence from the implementation of a front-of-pack label in Mexico indicates that gaps in specifications and monitoring can be used to reduce the visibility and impact of labels (36). The creation of loopholes, or ability to use perceived loopholes as a defence against non-compliance, must be avoided.

While allowing the use of over-stickered labels for imported foods is a practical approach that supports the provision of HSRs, we remain concerned that the current proposal allows for HSRs to effectively not function as a front-of-pack label in many instances. We recommend that FSANZ reconsider this approach, and require the HSR to be a front-of-pack label under all circumstances.

Online and digital labelling

Finally, while online and digital labelling is beyond the scope of the current work, we strongly recommend that any HSR requirements for physical labelling be applied to online retail environments, and that HSRs be required to be displayed to consumers on physical product packaging rather than through digital platforms only. These two stipulations are important to ensure accessibility of HSRs, supporting the intent and effectiveness of front-of-pack labelling.

14. Do you support FSANZ's proposed approach for the presentation and legibility of the HSR symbol (see section 4.4.3 of this report and section 1.3 of SD4)? Please provide reasons for your response, including any evidence on consumer use or implementation considerations.

The George Institute supports FSANZ's proposed requirements, but recommends strengthening them to address current limitations and improve visibility, consistency and effectiveness. We support measures to standardise design and layout, ensure strong contrast and readability, and limit competing information near the label. Strengthening design requirements and guidance as mandatory HSR is implemented should help ensure consistent and effective implementation across the food supply. Requiring use of the trademarked design and compliance with legibility provisions also supports regulatory clarity, and reduces the risk of applications that may undermine consumer visibility and comprehension.

Clear, legible and prominent front-of-pack labelling is essential to support informed consumer choice and improve dietary outcomes. FSANZ's research indicates that consumers rely on the label to make quick decisions, reinforcing the need for strong legibility and prominence on pack. If the label is not easily seen or used, then it cannot have an impact.

Consistent with its role as a simple summary indicator, the effectiveness of the HSR label relies on it being clearly visible and easy to interpret at a glance. As outlined in SD1, a substantial proportion of consumers report the HSR is easy to understand, but fewer report that it strongly captures their attention, indicating that visibility and salience remain critical issues. SD4 further notes that around 1 in 4 products (27%) are not fully compliant with current presentation and legibility specifications. Most inconsistencies arise from stylised or altered presentations, including issues with layout, spacing and typeface, indicating that current flexibility can be used in ways that reduce clarity.

We strongly recommend that the HSR label be required to be applied on the top half of packages, to improve alignment with international best-practice and improve salience for consumers, particularly those with lower health literacy. Please note our fuller response on this issue in Q13.

Variability in colour, background contrast and surrounding imagery can reduce visibility, prominence and effectiveness of the symbol, even when minimum requirements are technically met. The presence of competing information, such as nutrition claims or marketing material, placed near the HSR can also contribute to confusion or dilute its impact. Strong colour contrast and clear differentiation from packaging are critical to ensuring the label is visible and readable; please also note our recommendations regarding colour in response to Q12. Salience can also be improved through measures such as minimum size requirements.

Requirements for consistent presentation support faster recognition and understanding, particularly for consumers with lower health literacy. Less prescriptive approaches can allow variation that reduces the effectiveness of the label in practice, as demonstrated in Mexico (36).

Finally, we note that including a visible indicator of government endorsement within the label design may further strengthen consumer trust. This has been adopted in many other front-of-pack labels worldwide (e.g. 'Ministry of Health' in Chile, 'Health Canada' in Canada's warning label, 'FDA.gov' in the USA's proposed label). We suggest FSANZ consider this option for potential future improvements to the HSR label graphic alongside consideration of interpretive colour.

15. Do you support FSANZ's proposed approach for the declaration of algorithm components (see section 4.5 of this report and section 4 of SD5)? Please provide reasons for your response including any implications for transparency, enforcement or cost.

The George Institute strongly supports FSANZ's proposed approach as a critical measure to enhance transparency and accountability, and to support monitoring and enforcement. Requiring disclosure of inputs used to calculate HSR will enable verification by regulators, reduce opportunities for manipulation, and ultimately increase confidence in the system.

Importantly, the proposal maintains flexibility for industry, as manufacturers may choose not to claim certain positive points if providing supporting data is burdensome.

The requirement for manufacturers to provide information on the application of the 75% rule for determining eligibility for the dairy or dairy analogue categories to enforcement agencies on request is also reasonable, given the advantages conferred by being included in those categories.

16. Have all the major impacts to industry, consumers and government from the proposed options been identified in Table 1 of SD6? Please provide evidence (where possible) to support the inclusion and magnitude of other impacts.

The George Institute supports the overall approach to calculating the costs and benefits of the proposal, and to doing so for only two options (the status quo, and amending the Code to mandate).

While the identified key impacts to industry, consumers and government are largely appropriate, we do not believe that subsequent voluntary actions taken by food companies in response to the introduction of a mandatory HSR (e.g. reformulating) should be considered as regulatory costs (as currently indicated in Tables 1 and 2 in document SD6).

We also believe the analysis could be strengthened through the inclusion of effects on diet-related risk factors/health conditions beyond overweight and obesity.

17. Do you have information to provide to assist FSANZ in quantifying the costs and benefits currently identified as unquantified in Table 2 of SD6? Please provide data and evidence to support the inclusion of such information.

The George Institute recommends strengthening the analysis by incorporating more up-to-date and comprehensive data.

For example, the break-even analysis derives its estimate of overweight and obesity-related health costs in Australia from a report that is now 11 years old. More recent Australian Institute of Health and Welfare estimates place the direct healthcare costs of overweight and obesity at approximately \$7 billion annually (37).

We also emphasise that the impacts of improved dietary patterns, prompted by mandatory HSRs, extend beyond overweight and obesity to include a wide range of diet-related conditions (e.g. cardiovascular disease, hypertension, diabetes). As such, the true benefits of mandating HSR are likely to be significantly higher than indicated by the current estimates reported in the consultation documents; for example, a New Zealand study has estimated the impact of mandatory HSR on health and health sector costs (38). The full cost-benefit analysis that will be conducted for the regulatory proposal therefore should consider a wider range of benefits derived from improved diets.

18. Do you agree with the assumptions proposed to be used to estimate the costs to industry in SD6? Please provide data and evidence to support the inclusion of alternative assumptions.

The George Institute notes that current assumptions are based on limited evidence, and are at best indicative. The proposal to use an updated cost-benefit model for the next phase of work further makes it challenging to comment on the appropriateness of the assumptions at this stage.

These assumptions should be refined in future analysis. In particular, we support a principles-based approach that includes all public health benefits that can be attributed to improved dietary patterns as a result of mandatory HSR, and that allows for efficiencies that could be achieved by companies in updating all affected labels at once.

Assertions of costs and time should be supported by robust evidence, given the potential for strategic bias. For example, we suggest that estimated time costs for HSR calculation may be overstated, given the actual inputs required, tools for calculating HSR already available, and

potential for bulk processing across product portfolios. Many products already frequently change product packaging to update marketing, which must also be a relevant consideration.

As noted previously, evidence of the feasibility of rapid implementation is demonstrated by the adoption of the mandatory Country of Origin label in Australia (3).

Finally, we reiterate that a food business choosing to reformulate under a mandatory HSR must not be counted as a cost. Any reformulation undertaken by industry because of mandatory HSR reflects a positive market response to transparency and should be treated as a public health benefit not a regulatory burden.

Conclusion

Proposal P1067 provides a significant opportunity to deliver a stronger, more effective and more equitable front-of-pack nutrition labelling system in Australia and New Zealand. The evidence is clear that voluntary implementation has failed to achieve the uptake necessary to maximise public health benefits, while mandatory HSR would provide consumers with consistent and accessible information to support healthier food choices.

The George Institute urges Food Ministers and FSANZ to proceed with mandating the HSR system without delay, while incorporating measures that strengthen its visibility, consistency, transparency and public health impact. This should be accompanied by a clear commitment to an independent future review of the HSR algorithm, effective monitoring and evaluation, and complementary public education initiatives. Together, these actions will help ensure the HSR system fulfils its potential as a trusted tool for improving diets and reducing the burden of diet-related disease.

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