Dear Minister,

Re: Health star ratings

The Public Health Association of Australia, Queensland Branch, writes to ask you to support the strengthening of the Health Star Rating (HSR) system at the upcoming meeting of the Australia and New Zealand Ministerial Forum on Food Regulation.

Nutrition, obesity and cancer

Collectively, the independent risk factors of overweight and obesity, physical inactivity, and inadequate diet are second only to tobacco as modifiable risk factors for cancer. Research shows that there are 13 types of cancer that are linked to being an unhealthy weight, and a quarter of cancers can be prevented through healthy eating and physical activity.

Addressing these risk factors is an important objective for reducing Queensland’s cancer burden and will support the objectives in Our Future State: Advancing Queensland’s Priorities.

The HSR is an important tool that enables consumers to make more informed choices about packaged foods as part of broader nutrition and obesity prevention strategies.

Retaining and strengthening the HSR

The HSR must be retained and strengthened to maximise its public health benefit. The system should be strengthened by:

- improving the algorithm to ensure the HSR promotes food choices consistent with the Australian Dietary Guidelines (see attachment);
- reforming the governance of the HSR to ensure independence and transparency; and
- making the HSR system mandatory to achieve its objective to support consumers to make healthy choices.

Australia has demonstrated global leadership in the development of an interpretive front of pack labelling scheme. There is evidence that the system is well used, recognisable and can assist consumers to make healthier choices when buying packaged foods and beverages.

We urge you to support these improvements to the HSR at the Ministerial Forum to ensure the system meets its objectives to support consumers to make healthy choices.

Yours faithfully,

Letitia Del Fabbro
PHAA Qld Branch President
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Attachment: Proposed improvements to the Health Star Rating System

The Public Health Association of Australia, Queensland Branch, supports the following changes to the algorithm that determines how the HSR is calculated:

- An automatic 5-star rating for fresh and minimally processed fruits and vegetables.
- Added sugars be incorporated into the algorithm. If that isn’t possible because it is not yet part of the Nutrition Information Panel we recommend the sugar points table be extended to 30 points to receive equal treatment to saturated fat and sodium.
- Sodium sensitivity should be improved. Reducing the upper limit of the table to 30 points for sodium content >2,700mg/100g would produce results only for very salty foods. A better solution would be to update the entire sodium points table to align with the updated sodium Nutrient Reference Value. This would increase the incentive for the 93% of food products with sodium <900mg/100g to reformulate.
- A protein tipping point of 11 baseline points to prevent foods relatively high in risk nutrients obtaining high HSRs from adding unnecessary protein.
- Rescale Category 3 upwards and set the saturated fat level for an HSR of 5 at 15-20% to better align with the evidence base for healthier oils within a healthy eating pattern.
- Improvements to the method of assigning HSR to non-dairy beverages. Presently, the HSRs for some beverages do not adequately reflect dietary guidance and their relative nutritional value. We are particularly concerned with the high rating some fruit and vegetable juices would receive and the definition of a new category, unsweetened flavoured water, exempt from the algorithm.

These recommendations were not reflected in February’s Draft Review Report despite being broadly consistent with the position expressed by State and Territory governments in earlier consultations. We believe this makes it even more important for recommendations on HSR’s governance to be adopted to ensure independence and transparency.

We support the call for the system to be made mandatory in order to meet its objective to support consumers to make healthy choices. Under the current voluntary approach, uptake by the food industry is poor and inconsistent across the food supply. If a voluntary approach is retained, we call for clear targets and timelines, e.g. mandatory participation to be implemented if targets of 90% compliance are not met by 2021.