

17 September 2018

Our ref: MT18-492

Food Regulation Secretariat MDP 707 GPO Box 9848 Canberra ACT 2601 AUSTRALIA

By email: FoodRegulationSecretariat@health.gov.au

Dear Sir/Madam

Labelling of sugars on packaged foods and drinks

Thank you for giving The Royal New Zealand College of General Practitioners the opportunity to comment on the labelling of sugars on packaged foods and drinks consultation.

Introduction to general practice and the College

General practice is the medical specialty that treats patients: with the widest variety of conditions; with the greatest range of severity (from minor to terminal); from the earliest presentation to the end; and with the most inseparable intertwining of the biomedical and the psychosocial. General practitioners (GPs) treat patients of all ages, from neonates to elderly, across the course of their lives.

GPs comprise almost 40 percent of New Zealand's specialist workforce and their professional body, The Royal New Zealand College of General Practitioners (the College), is the largest medical college in the country . The College provides training and ongoing professional development for GPs and rural hospital generalists, and sets standards for general practice. The College has a commitment to embed the three principles (participation, partnership and protection) of Te Tiriti o Waitangi (Treaty of Waitangi) across its work, and to achieving health equity in New Zealand.

Health equity is the absence of avoidable or remediable differences in health outcomes and access to health services among groups of people, whether those groups are defined socially, economically, demographically, or geographically (WHO). To achieve health equity, we advocate for:

- A greater focus on the social determinants of health (including labour, welfare, education, housing, and the environment).
- Funding and support to sustain the development of a GP workforce of sufficient capacity to meet population need for access to quality primary medical care, particularly in rural and high need areas.
- Sustained focus on measures to reduce smoking and to increase healthy food options for low-income families.
- Improved integration of primary, community, and secondary care health and social services which ensures the provision of high quality services.
- Universally accessible free primary health care for children and low-income families, because health inequities begin early and compound over the life course.
- A review of the funding model for primary care to ensure that resourcing is allocated equitably across diverse populations with differing needs.

Submission

The College agrees with the problem statement that "information about sugar provided on food labels in Australia and New Zealand do not provide adequate contextual information to enable consumers to make informed choices in support of dietary guidelines."

The College is aware the New Zealand Medical Association has provided a comprehensive submission and we support their main points. Including:

- The need to change the status quo.
- The need to consider the wider environmental factors which lead to over consumption of sugar.
- A preference for labelling to have an advisory warning (option 5) and a pictorial display (option 6). As these are easiest for consumers to interpret.
- The limitations of an education campaign on sugar (option 2) and linking to web-based information about added sugar content (option 7), both of which may increase health inequities.
- A preference for mandatory regulation of pictorial labelling, rather than volunteer approaches.

We hope you find our submission helpful. Should you require any further information or clarification please contact the College's policy team at <u>policy@rnzcgp.org.nz</u>.

Yours sincerely

Michael Thorn General Manager – Strategic Policy