

Proposal P1050 – Submission Template

Please use the template below to provide your submission to Proposal P1050 – Pregnancy warning labels on alcoholic beverages. Please submit this to FSANZ as a word document (if required, a pdf of the submission may also be provided in addition to the word document).

For information about making a submission, including what your submission should include, visit the FSANZ website at [information for submitters](#).

Submission to Proposal P1050 – Pregnancy warning labels on alcoholic beverages

A. Name and contact details (position, address, telephone number, and email address):

Dietitians Association of Australia
1/8 Phipps Close, DEAKIN ACT 2600

B. For organisations, the level at which the submission was authorised:

Executive Manager of Policy and Professional Services

C. Summary (optional but recommended if the submission is lengthy):

DAA supports the implementation of a mandatory pregnancy warning label, including the features of a pictogram, signal words, and the combination of red, black and white colouring. DAA recommends that the minimum text size on the smallest label size should be increased to 3mm in height.

Comments to specified sections of P1050 Call for Submissions (CFS) report:

D. Literature review on the effectiveness of warning labels (section 3.1.1 of CFS)

DAA recognises the literature review conducted by FSANZ. The review provided in SD1 is systematic in its approach (as per the PRISMA flow chart in Figure A1) and the inclusion of grey literature compliments the peer-reviewed scientific literature, particularly in circumstances where a lack of empirical evidence exists. DAA notes that the review identified that the text size in the warning label should be large but this is not reflected in section 3.2.2.4 or Attachment A of the proposal. DAA recommends that FSANZ consider seeking peer review of the literature review.

E. Consumer testing of warning statements (section 3.1.2)

Although a between-subjects design was employed that results in reduced power for the study, DAA finds the methodology of the consumer testing of warning statements to be reasonable. However, while the data provided indicates the mean results for the messages, DAA suggests

that variability data (i.e. standard deviations or 95% Confidence intervals) is also indicated in the results of the summary report.

F. Pictogram (section 3.2.2.2)

DAA supports the use of the pictogram in conjunction with a warning statement. The pictogram displayed is recognisable and conveys the message that alcohol should not be consumed during pregnancy. DAA acknowledges the feedback FSANZ received from Indigenous stakeholders regarding the wine glass not being a recognisable vessel for some people in Indigenous communities and recommends further discussion with relevant stakeholders regarding this point.

G. Warning statement (section 3.2.2.3)

DAA agrees that the statement “It’s safest not to drink while pregnant” does not specifically convey government advice (outlined in the FRSC, 2018 and Australia and New Zealand Ministerial Forum on Food Regulation, 2018 communique) for pregnant women not to consume any alcohol. The statement “Any amount of alcohol can cause lifelong harm your baby” was shown by consumer testing (Tables 1-3, 5 of FSANZ proposal P1050) to convey a much stronger message that is consistent with public health recommendations and the six principles for warning messages. Furthermore, results from consumer testing of the various proposed warning statements suggests this statement performed well in conveying the message to the target population.

DAA does not see any justification in the proposal for the omission of “cause lifelong” in this statement to shorten it to “Any amount of alcohol can harm your baby”. DAA recommends that FSANZ considers the strength of the full statement as demonstrated in consumer testing and whether there is evidence that the shortened statement is as powerful.

H. Design labelling elements (section 3.2.2.4)

Signal words – DAA agrees the signal words “Health Warning” should be used for labelling, as these are more meaningful than alternatives such as “Warning” or “Government Health Warning”, as identified in the FSANZ report. DAA also recognises the lack of empirical evidence supporting the credibility of other signal words such as “Pregnancy Warning”.

Warning label size – DAA supports the minimum warning label sizes proposed by FSANZ for outer package labelling and for containers >800 mL. Warning labels on containers ≤800 mL should be large enough to include font size of 3 mm in height, as required by Standard 1.2.1 of the Food Standards Code (FSC) for other warning labels. Research from Germany suggests that optimal font size for legibility by consumers is a minimum of 9 point (3.2 mm)¹ and USA research suggests that the optimal size is 10 point (3.5 mm).² Warning labels with font size smaller than 10 point (3.5 mm)³ are less likely to be read by consumers.

Location and label orientation – Although FSANZ propose not to regulate the location of the warning, DAA advocates that the warning is placed on the front of labels, as these are more noticeable than those printed in any other location.⁴ Indeed, placement of the warning on the back of products near other label features (e.g. barcode and ingredients list) will reduce the visibility of the warning and obscure the information conveyed.⁵ Warnings printed on the front of alcohol labels are more noticeable than those printed in any other location.⁴

DAA supports the use of a border around the pictogram so the meaning of the warning is not diminished by proximity to other statements or logos on the label.

Colour and contrast – DAA supports the use of the colour red in the circle, strikethrough and signal words to draw attention to the label and aid its recognition as a warning message. Specification of Pantone 485 is supported by DAA to show consistency between labels and jurisdiction requirements. Specification of a white background within the border and other features as black provides the high contrast necessary to optimise prominence of the warning.

References

1. Fuchs J, Heyer T, Langenhan D, Hippus M. New font size requirements in package inserts of medicines. *Pharm Ind.* 2008; 70(5):584-592.
2. Sheedy JE, Subbaram MV, Zimmerman AB, Hayes JR. Text legibility and the letter superiority effect. *Human Factors.* 2005 Dec;47(4):797-815.
3. Braun CC, Silver NC, Stock BR. Likelihood of reading warnings: The effect of fonts and font sizes. *Proc Hum Factors Ergon Soc Annu Meet.* 1992;36(13):926-930.
4. Laughery KR., Young SL, Vaubel KP, Brelsford Jr JW. The noticeability of warnings on alcoholic beverage containers. *J Public Policy Mark.* 1993;12(1):38-56.
5. Coomber, K., Hayley, A., & Miller, P. G. (2018). Unconvincing and ineffective: Young adult responses to current Australian alcohol product warnings. *Australian Journal of Psychology*, 70, 131-138.

I. Summary of proposed pregnancy warning label design (section 3.2.2.5)

DAA supports the pictogram, signal words, statement, border, background colour and clear space outside the border of the warning label. DAA also supports the font and total warning label sizes proposed for packages containing individual portions and for outer packaging. DAA acknowledges the limited space available on packaging for containers ≤200 mL and supports the use of only the pictogram under these circumstances.

DAA advocates that the font size of warning labels for containers >200 mL up to ≤800 mL, and for containers >800 mL should be a minimum of 3 mm. This is consistent with the minimum size for warning statement in the Food Standards Code and with recommendations from other public health stakeholders.

J. Beverages to carry the pregnancy warning label (section 3.2.3)

DAA advocates that option 2 is adopted as opposed to option 1. The safe level of alcohol consumption during pregnancy is unknown and in keeping with the warning message proposed that “Any amount of alcohol can harm your baby” or the consumer tested message “Any amount of alcohol can cause lifelong harm to your baby”, option 2 better reflects this as a consistent message. Labelling only beverages with ≥1.15% ABV does not address the risks associated with consuming alcohol from products that contain between 0.5% and 1.15% ABV, which are not labelled as alcoholic beverages, but are labelled as containing a percentage of alcohol as per Food Standards Code standards 1.2.1-8(1)(w) and 2.7.1-3(3).

K. Application to different types of sales (section 3.2.4)

DAA supports the FSANZ proposal regarding specific types of sales of packaged alcoholic beverages.

L. Application to different types of packages (section 3.2.5)

DAA supports the FSANZ proposal, specifically that all layers of packaging for a given product (should it include multiple layers) require the warning label.

M. Consideration of costs and benefits (section 3.4.1.1 of CFS)

DAA considers that in the best case, worst case and base scenarios, the benefits of implementing mandatory warning labels outweigh the costs to the community and strongly supports option 2 (mandatory labelling).

N. Transitional arrangements (section 4.1 of CFS)

DAA supports a one-year transition period for implementation of mandatory pregnancy warning labelling. This period should be sufficient to allow sales of products with containers or labels printed prior to the implementation of mandatory labelling.

O. Draft variation to the Australia New Zealand Food Standards Code (Attachment A of CFS)

DAA supports the structure of the draft variation and notes the use of tables as an effective and clear method of communication of requirements.

DAA reiterates previous comments regarding warning label font size and beverages to carry the label as stated above in sections H, I and J.

P. Other comments (within the scope of P1050 – see section 1.5 of the CFS)

DAA considers it important that government agencies implement a comprehensive program to disseminate information to consumers and industry about requirements for pregnancy warning labels on alcoholic beverages.

DAA would like to see a comprehensive evaluation of this labelling regulation. This might include research targeted at women of childbearing age about the guidelines around alcohol consumption during pregnancy and behaviours around consumption of alcohol.