

Public Consultation: Industrially-produced trans fats in processed foods

Overview

In August 2019 the Australia and New Zealand Ministerial Forum on Food Regulation (now the Food Ministers' Meeting) asked the Food Regulation Standing Committee to consider options to improve the composition of the food supply in relation to trans fats.

This consultation has been prepared by the Food Regulation Standing Committee (FRSC) to support consideration of regulatory and non-regulatory options for improving the composition of the food supply in relation to industrially-produced trans fats.

The desired outcome of this work is to ensure industrially-produced trans fats are eliminated or reduced as much as possible from the food supply in Australia and New Zealand to support all population groups to minimise consumption of trans fats.

FRSC has proposed three policy options (in addition to the status quo) to achieve the desired outcome. These policy options are not necessarily mutually exclusive and more than one option could be adopted.

The options are:

- Voluntary reformulation
- Regulatory limits for industrial trans fats in processed foods
- Prohibiting use of partially-hydrogenated oils in processed foods

Further information about these options is detailed in the Public Consultation Options Paper which is available to download from the 'Related' section below.

Why your views matter

Australia and New Zealand share a joint system for food labelling which is overseen by Food Ministers. Food Ministers are responsible for developing food regulation policy in the form of policy guidelines and to ensure stakeholder views are considered on appropriate policies.

Stakeholder submissions to this consultation will be used by FRSC to identify a preferred policy option to recommend to the Food Ministers' Meeting regarding potential changes to the food supply in relation to industrially-produced trans fats.

Responding to the consultation

Download and read the Public Consultation Regulation Impact Statement (available under the 'Related' section at the bottom of this page).

Respond to the questions in the online survey – the questions in the survey match the questions in the Public Consultation Regulation Impact Statement. A preview of the survey is available for download under the 'Related' section at the bottom of this page.

Please provide evidence or examples to support your comments where possible. Comments on technical issues should be based on scientific evidence and/or supported by research where appropriate. Where possible, please provide citations to published studies or other sources.

It is not necessary to provide a response to all questions.

All submissions are subject to the [Freedom of Information Act 1982](https://www.legislation.gov.au/Details/C2018C00016) <https://www.legislation.gov.au/Details/C2018C00016> in Australia and the [Official Information Act 1982](http://www.legislation.govt.nz/act/public/1982/0156/latest/DLM64785.html) <http://www.legislation.govt.nz/act/public/1982/0156/latest/DLM64785.html> in New Zealand. If you consider that all or part of your submission should not be released, please make this clear when making your submission and indicate the grounds for withholding the information.

Introductory text

This online survey contains a series of questions for stakeholders.

You may answer as many consultation questions as you like. It is not necessary to respond to all questions.

About you

Submitter information

Full name *(Required)*

Are you answering on behalf of an organisation?

*(Required)**Please select only one item*

- Yes
- No

Name of organisation

What sector do you represent? *(Required)**Please select only one item*

- Public health
- Industry
- Research/academic
- Individual (member of the public)
- Government
- Other

Which country are you responding from?

Please select only one item

- Australia
- New Zealand
- Trans-Tasman organisation
- Other
- Prefer not to say

If you selected 'other' please specify country

Please provide your email address.

An opportunity to provide any other information about your organisation you would like to provide.

If we require further information in relation to this submission, can we contact you? *(Required)**Please select only one item*

- Yes
- No

Privacy and confidential information and permissions

More Information

Privacy

Personal information provided to the Food Regulation Standing Committee (FRSC) as part of the *Industrially-produced trans fats in processed foods* public consultation will be dealt with in accordance with the **Privacy Act 1988** <http://www8.austlii.edu.au/cgi-bin/viewdb/au/legis/cth/consol_act/pa1988108/> (Cth) at www.comlaw.gov.au <<http://www.comlaw.gov.au>> and the **Australian Privacy Principles** <<https://www.oaic.gov.au/privacy/australian-privacy-principles/australian-privacy-principles-quick-reference>> at www.oaic.gov.au <<http://www.oaic.gov.au>> . The Department of Health and Aged Care's Privacy Policy is available at **Privacy policy | Australian Government Department of Health and Aged Care** <<https://www.health.gov.au/resources/publications/privacy-policy>> .

Copyright and confidentiality

Copyright in an original submission resides with the copyright owner of that submission, but the act of making a submission will grant the Australian Government and the New Zealand Government a licence to use the submission for the purpose of making a summary of the submission for the website and for future policy or standard development work.

All submissions are subject to the *Freedom of Information Act 1982* in Australia and the *Official Information Act 1982* in New Zealand, along with relevant Freedom of Information legislation in each of the States and Territories.

If you consider that all or part of your submission should not be released, please make this clear when making your submission and indicate the grounds for withholding the information.

A request made under the *Freedom of Information Act 1982* in Australia and the *Official Information Act 1982* in New Zealand for access to a submission marked confidential will be determined in accordance with that Act.

Do you want this submission to be treated as confidential?

(Required)

Please select only one item

- Yes, the entire submission
- Yes, some parts of the submission will need to be confidential
- No

If you want all or parts of this submission to be confidential, please state why.

Please note: You will be able to indicate which answers should be treated as confidential as you move through the survey.

Have you read the Consultation Options Paper?

The questions set out in the Consultation Options Paper are presented in this online consultation.

Have you read the Policy Options Paper: Improving the composition of the food supply in relation to industrially-produced trans fats?
(Please click on the link above to open the document)

(Required)

Please select only one item

- Yes
- No

Section 1: Introduction and Statement of the Problem

Questions 1 to 3 seek further information about the consumption of trans fats in Australia and New Zealand.

Page 11 of the [Public Consultation Policy Options Paper](#) provides a Statement of the Problem

1. Statement of the Problem

4. What is the problem

Trans fats (also known as trans fatty acids or TFAs) are a type of fat that occurs naturally in some animal products, or may be produced through industrial manufacturing processes.

Consumption of trans fats, even in small amounts, increases risk of coronary heart disease. The heart disease risk is higher for consumption of trans fat than other types of fat.

The WHO has had a major focus on eliminating industrially-produced trans fats from national food supplies, with the goal of global elimination by 2023. Many Governments internationally have taken action to eliminate or reduce industrially-produced trans fats in their food supply, with 60 countries having mandatory trans fat elimination policies in effect as at December 2021 [9]. Such actions have not been implemented in Australia or New Zealand and previous voluntary efforts by industry to remove or reduce industrially-produced trans fats in the food supply have been undertaken. However, some food products in Australia have been found to contain trans fats at levels above what would be permitted internationally and there is limited information or support available to consumers in Australia and New Zealand to identify foods that contain trans fats and make informed decisions about their consumption. Trans fats intakes are within recommended limits for the majority of consumers in Australia and New Zealand, however evidence indicates [5, 6] vulnerable populations in Australia (i.e. those with low income or low education) may be exceeding trans fat consumption limits.

Recent changes in the global landscape, such as limited markets in which fats and oils containing trans fats foods can be sold, economic inflation and global cooking oil shortages mean that status of trans fats in the food supply in Australian and New Zealand may be changing and previous achievements may not be sustained.

1 Are there any other estimates of the contribution of trans fat consumption to heart disease in Australia or New Zealand? Please provide references for your response.

Trans fat contribution to heart disease

Coronary heart disease is the leading cause of death worldwide, and in Australia and New Zealand [2, 32]. Excess trans fat (ruminant and industrial produced) consumption was estimated to cause 500,000 deaths worldwide each year representing 7.7% to global coronary heart disease mortality [9, 33].

The Global Burden of Disease Study reported that in 2019, diets high in trans fats accounted for 4.3% of all coronary heart disease deaths in Australia, and 3.3% in New Zealand. This is equivalent to 2,322 deaths coronary heart disease deaths in Australia and 502 coronary heart disease deaths in New Zealand. Diets high in trans fats accounted for 0.6% of the total burden of disease in Australia and 0.6% in New Zealand in 2019 [2]. The WHO ranks Australia as 16th in the proportion of coronary heart disease deaths due to trans fat intake (>0.5% energy), and New Zealand is ranked 24th [9].

Further modelling [6] has reported that 487 coronary heart disease deaths were attributed to trans fat exposure in Australia in 2010, equivalent to 1.52% of all coronary heart disease mortality.

Data on the impact of trans fats consumption amongst vulnerable population groups is limited. However, vulnerable population groups experience higher rates of coronary heart disease. For example, the aged-standardised rate of hospitalisations, deaths and total burden due to coronary heart disease were more than twice as high amongst Aboriginal and Torres Strait Islander people compared to non-Indigenous Australians [32]. Also in Australia, hospitalisations for coronary heart disease were 1.5 times higher for people in remote and very remote areas compared to major cities, and 1.3 times higher for the lowest socio-economic areas compared to the highest socio-economic areas.

In New Zealand, the 2021/2022 the New Zealand Health Survey found that ischaemic heart disease and/or heart failure was more likely for Māori and those living in the most deprived neighbourhoods compared with non-Māori and those living in the least deprived neighbourhoods respectively [34].

Please select only one item

- Yes
- No

If yes, please provide details here and justify with evidence.

Please attach a copy of any documents you wish to include to this printout.

Please attach references here

Please select radio button below if you wish to keep the response to this question confidential.

Please select only one item

- Do not publish

2 Is there further data on intake of trans fats in Australia or New Zealand, either at the population level, or population groups? Please provide references for your response.

Trans fat consumption

There is limited recent data on consumption of trans fats in Australia or New Zealand.

In a 2009 assessment by Food Standards Australia New Zealand (FSANZ) [3] the mean intake of industrially-produced trans fat was estimated at 0.6 g/day or less for New Zealand, based on intake data from the 1997 Adult National Nutrition Survey and 2002 Children National Nutrition Survey. For Australia, estimated intake of industrially-produced trans fats was 0.4 g/day, based on data from the 1995 National Nutrition Survey data and 2007 Children's Nutrition Survey. The higher intakes for New Zealanders reflected differences in trans fats in edible oil products. In both countries, mean total trans fat intakes were below 2 g/day and below 4g per day at the 95th percentile. Ruminant trans fats were the dominant source of trans fat in the diet, representing 60 to 75 percent of total trans fat intake [3].

FSANZ estimated more than 85 percent of New Zealanders and 90 percent of Australians had trans fat intakes below the WHO recommendation of one percent of total energy intake.

For New Zealand consumers with total trans fat intake exceeding 1% percent of energy, pastry products and creamy style pasta dishes, as well as cheese, popcorn, doughnuts and take away style fish products, made a disproportionate contribution to trans fat intake.

For Australian consumers with total trans fat intake above 1% of total energy, pastry products, sausages and luncheon meats and creamy style pasta dishes contributed disproportionately to their high trans fat intakes.

More recent trans fat consumption data for New Zealand is limited because the 2008/09 New Zealand Adult Nutrition Survey did not measure intake of trans fats.

In Australia, the 2011/12 National Nutrition and Physical Activity Survey reported the average consumption of trans fats in Australia (population aged 2 years and over) was 0.6 % of energy intake, below the WHO recommended limit. Main sources of trans fat intake were cereal products and dishes (24.9%), meat, poultry and game products and dishes (23.2%), and milk products and dishes (24.2%), with the latter two categories likely to be predominantly ruminant trans fats [35].

Analysis of the 2011/12 Australian National Nutrition and Physical Activity Survey by the Sax Institute reported 10% of Australians exceeded the WHO recommended trans fat limit. Modelling also identified inequalities in trans fat consumption with estimates that 14% of those with the lowest level of income and 14% of those with the lowest level of education would exceed the WHO recommended limit [5]. A separate analysis[6] also reported that education and income were significantly associated with trans fat intake. Higher education and income is associated with lower consumption of trans fats.

More recent data on consumption of trans fats in Australia will be collected through the next Australian National Nutrition and Physical Activity Survey to be conducted as part of the Intergenerational Health and Mental Health Survey.

Please select only one item

- Yes
- No

If yes, please provide details here and justify with evidence.

Please attach a copy of any documents you wish to include to this printout.

Please attach references.

Please select radio button below if you wish to keep the response to this question confidential.

Please select only one item

- Do not publish

- 3** Food manufacturers- Do you have additional data on trans fat content of foods in Australia or New Zealand? Data for individual foods and food companies will be used to inform option analysis but will not be published.

4.5 Trans fat content of foods in Australia and New Zealand

In Australia, the Sax Institute [5] reports that in 2013, seventy-five percent of processed and takeaway foods surveyed from across Australia contained less than two percent of trans fats (as a percentage of total fat) (based on FSANZ data). This level of trans fat content is commonly used as a compositional limit internationally.

Twenty-five percent of processed and takeaway foods in the survey exceeded the two percent limit (noting that some of these products contained both industrially-produced and ruminant trans fats). When products likely to contain both ruminant and industrially-produced trans fats were excluded, (i.e. the analysis only focussed on industrially-produced trans fats) fourteen percent of products surveyed exceeded the two percent limit.

The Sax Institute also compared the trans fats levels in Australian foods to international food composition data and reported that trans fat levels in products such as pastries, popcorn and baked goods were higher in Australia compared to Canada or the United Kingdom. Canada has since banned use of trans fats in the food supply, and best-practice measures to eliminate trans fats in the United Kingdom came into effect in 2021.

Table 1: International comparison of trans fats in food [5]

Product type	Australia 2013	Canada 2010	UK 2013	Netherlands 2011	Malaysia 2014
Trans fat level as a % of total fat (mean ± standard deviation (where available))					
Prepared pastry	6.3 ± 3.2	2.1 ± 8.1	na	na	na
Popcorn	6.8 ± 7.5	4.4 ± 11.8	na	na	na
Custard baked goods	4.4 ± 2.4	1.3 ± 1.4	na	na	na
Meat pies	4.4 ± 2.2	na	2.4	na	na
Sausage rolls	4.8 ± 3.0	2.5 ± 4.6	na	na	na
Croissants	4.8 ± 1.4	2.0 ± 1.2	na	na	na
Desserts	2.7 ± 1.7	1.8 ± 3.7	4.0	4.7	2.1
Margarine/spread	1.9 ± 0.7	2.7 ± 7.2	0.7	1.4	0.2

A separate analysis of the presence of trans fat containing ingredients in pre-packaged foods in Australia in 2018 reported that out of a total of 28,349 foods, 131 (0.5 percent) products contained specific ingredients indicative of industrially-produced trans fats. A further 1,626 (5.7 percent) products contained non-specific ingredients that may indicate the presence of industrially-produced trans fats. Bread and bakery products, cereal and grain products and confectionery were the top three food groups that contained specific ingredients indicative of industrially-produced trans fats [36]. This analysis indicates that a minority of products in Australian are using ingredients likely to contain industrially-produced trans fats, however, the analysis did not include unpackaged foods such as bakery products and fried foods which can also potentially contain trans fats.

In 2017, FSANZ and the New Zealand Ministry for Primary Industries provided a report to Food Ministers about trans fat levels in imported oils. The report found there had been a significant decline in the importation of vegetable fats and oils with the potential to contain trans fats into Australia and New Zealand. Levels of trans fats reported on product labels and industry specifications were also consistent with previous (2006-2013) trans fats analysis. The report concluded that this evidence indicates dietary intakes of trans fats have continued to reduce over time [37].

Recent changes in the global landscape may have also changed the level of trans fats in the food supply in Australia and New Zealand. Economic inflation as well as a shortage of cooking oil arising from the Russian and Ukrainian conflict may have led food manufacturers to source cheaper and/or alternate oils containing industrially-produced trans fats.

Stakeholders have raised concerns with the Australian Government Department of Health that foods such as margarines sold in remote community stores (predominantly attended by First Nation's Australians) are high in trans fats and have not been subject to reformulation efforts in the same way as margarines and other edible oils sold in mainstream supermarkets. The Australian Institute of Health and Welfare reports Australian First Nations populations already have greater dietary risks and higher rates of heart disease compared to non-Indigenous Australians [38], making this a key focus.

Current data

Analyses of the current market for products containing industrially-produced trans fat indicate that these products are present in the Australia and New Zealand market, albeit in small numbers.

New Zealand- Current data on foods declaring hydrogenated oils in the statement of ingredients is available for New Zealand through the GS1 On Pack Database. This database is an inventory of label information from ~ 50 000 (and counting) packaged food products that are or were available in the New Zealand market. The database predominantly includes food product information from the two major supermarket chains. The database represents over 90% of pre-packaged food retail sales from the grocery sector. It also has limited data from other retailers, such as liquor stores and specialty stores where there has been specified collection activity. Data comes into the database through the following channels:

- Physical product received by GS1 through [ProductFlow](https://www.gs1nz.org/services/product-flow/) <<https://www.gs1nz.org/services/product-flow/>>
- Through an in-market collection programme (audit or in-market collection)
- Directly from the supplier (in select cases)

In October 2022, the database was searched for all foods seen in the New Zealand market in 2022 containing hydrogenated oils in the ingredients listing. Products declaring non-hydrogenated oils in the ingredients list were excluded from the analysis. From the search 234 products contained a hydrogenated oil, of which 212 were described as hydrogenated, 10 fully hydrogenated and 13 partially-hydrogenated. The majority of hydrogenated oils were listed as coconut oil (n=131), followed by vegetable oils (n=45) and palm oil (n=25). The majority of partially-hydrogenated oils were palm oil (54%). When analysed by food category, 39% of products containing a hydrogenated oil were confectionary/sugar sweetening products; 26% bread/bakery products (biscuits, baking mixes, sweet products); and 25% prepared/preserved foods (desserts, snacks, pasta, meat substitutes).

Australia- A search of food and drink products declaring hydrogenated oils in the statement of ingredients in the Australian market was conducted using the Mintel Global New Product Database (GNPD) [39]. The search term 'hydrogenated oil' was used as a cross check to ensure all products were captured, and products containing non-hydrogenated oils were excluded from the analysis. Search dates between October 2020-2022 were selected. It is important to note that products included in this date range are only new or reformulated products. The Mintel GNPD only focuses on new products entering the market and does not have the functionality to search for products pre-existing in the market within the search dates. The Mintel GNPD focusses data collection in major cities and thus results are not reflective of the overall market of products in Australia.

149 products were identified. 33 products included a trans fat declaration in the NIP. Of these, 17 products contained trans-fat and declared the amount in the NIP and 16 products declared 0g of trans-fat in their NIP. The remaining 116 products did not include a trans-fat declaration in the NIP. Of the total 149 products identified in the search 1 product declared partly hydrogenated oil in the statement of ingredients, and 11 products declared full or fully hydrogenated oil in the statement of ingredients. The remaining 137 products did not specify level of hydrogenation and simply declared hydrogenated oil in the statement of ingredients. The most common types of hydrogenated oils declared in the statement of ingredients were vegetable oil (type not further specified) (n=54), palm oil (n=35), coconut (n=24) and palm kernel oil (n=14). Fifteen products contained a mix of hydrogenated oils such as palm kernel, palm and rapeseed oil or palm and coconut oil.

Globally: The WHO has also indicated that it has collected nutrient data for trans fats in 2020 for the five top-selling products in the world's largest food and beverage companies. Data were collected across 8 food product categories and in 14 countries, including Australia. The data collection process is ongoing with a final report with aggregate and/or anonymized company results will be published later in 2023 [9].

Please select only one item

- Yes
- No

If yes, please provide details here and justify with evidence.

Please attach a copy of any documents you wish to include to this printout.

Please attach references.

Please select radio button below if you wish to keep the response to this question confidential.

Please select only one item

- Do not publish

Section 2a: Actions underway in Australia and New Zealand to support consumers to limit consumption of trans fats

Questions 4a-4c seek further information about labelling of trans fats in Australia and New Zealand.

See Section 4.6 in the [Public Consultation Regulation Impact Statement](#)

4.6 Limitations of actions underway in Australia and New Zealand to support consumers to limit consumption of trans fats

Activities exist to support consumers in Australia and New Zealand to limit their intakes of trans fats, however these tend to focus on general healthy eating, rather than trans fats specifically. Examples include Healthy School Canteen Guidelines, social marketing campaigns and health promotion activities. Information on food and nutrition actions that more specifically relate to trans fats are provided below.

Food labelling approaches

Requirements in the Australia New Zealand Food Standards Code

Food labelling requirements are set out in the Australia New Zealand Food Standards Code (the Food Standards Code) which is maintained by FSANZ. In Australia, the Food Standards Code is enforced by state and territory governments and the Department of Agriculture, Water and the Environment for imported foods. In New Zealand, the Food Standards Code is enforced by the Ministry for Primary Industries.

On a food label, information about a food's composition is available through the Nutrition Information Panel (NIP) and statement of ingredients which is mandatory for most packaged food products.

In the NIP, mandatory declarations are required for energy, total carbohydrate, sugars, total fat, saturated fat and sodium. A declaration of trans fat content is not required in the NIP, unless the product makes a nutrition claim about cholesterol, polyunsaturated fats or monounsaturated fats in the food. Some manufacturers may also voluntarily declare trans fat content in the NIP. Consumers may also contact food manufacturers with queries about ingredients in specific foods if they have concerns.

The statement of ingredients requires ingredients to be listed in descending order by ingoing weight. The statement of ingredients must identify each ingredient, using either the common name, a name that describes the true nature of the ingredient or a generic name specified in the Food Standards Code. Under Standard 2.4.1-4 process declaration for edible oils, if a food contains edible oils, and the label lists the specific source name of the oil, and then oil has undergone a process that has altered its fatty acid composition (such as hydrogenation), then a process declaration is required on the label which describes the nature of that process. However, there is no explicit requirement to declare the degree of hydrogenation (i.e. partially vs fully hydrogenated). Consumers with high-level nutrition knowledge may be able to determine that a product is likely to contain industrially-produced trans fats by identifying ingredients such as 'partially-hydrogenated vegetable fat', 'hydrogenated vegetable oil' 'vegetable shortening', or 'blended vegetable oil'.

Some products that may contain industrially-produced trans fats, such as pastries, popcorn and fried food can be sold unpackaged and therefore not required to be labelled. For unpackaged foods, some nutrition and ingredient information may be requested from the food manufacturer. However, as trans fats are not part of the mandatory labelling declarations, manufacturers may not know this information.

This lack of information about trans fats on food labels in Australia and New Zealand makes it difficult for consumers to choose foods with low/lower trans fat levels.

Additional voluntary labelling options outside of the Code.

Voluntary labelling outside of the Code is limited in relation to trans fats. A food's trans fat content is not considered in the Health Star Rating (HSR) front of pack labelling system in Australia and New Zealand^[1].

Online provision of information on trans fats

Government information- FSANZ maintains the Australian Food Composition Database. Information on total trans fat content of foods is available on this database, determined by imputation rather than analytical methods [40]. Some of the information available is brand and product specific, for example, a specific breakfast cereal, while other information is generic, for example 'pastry, shortcrust style, commercial, baked'. The Database is generally not intended for a consumer audience and is technical in nature. As information is not available for every food on the market, the Database does not support consumers to compare products and select products with low or no trans fats.

The New Zealand Food Composition Database is jointly owned by Plant and Food Research and the New Zealand Ministry of Health [41]. The majority of the entries in the New Zealand Food Composition Database have been analysed in New Zealand with a smaller percentage of data coming from other sources, such as recipe calculations or by borrowing from other countries. Data on total trans fat content of 1,185 foods is available from this database (43% of foods in the database), brand and product specific information is available for some foods, however most of the entries are generic. Data is reported for total trans fat, rather than ruminant and industrially-produced trans fats. Similar to Australia, this does not support consumers to identify foods containing trans fats and select products with low or no trans fats.

Industry information- Food industry has previously (in 2009) reported activities to inform consumers about trans fats such as provision of nutrition information on product packaging, in stores and/or on company websites. However more recent industry activities in this area is not known.

[1] The HSR rates the overall nutritional profile of packaged food and assigns it a rating from ½ a star to 5 stars. It is designed to provide a quick, easy, standard way for consumers to compare similar packaged foods. Under the HSR system, packaged products are given a rating based on their nutritional profile, according to a strict algorithm. The algorithm considers: energy (kilojoules); risk nutrients - saturated fat, sodium (salt) and sugars; and positive components - dietary fibre, protein and the proportion of fruit, vegetable, nut and legume content.

4a Is there any data available on the number or proportion of products that declare trans fat content in the Nutrition Information Panel for Australia and/or New Zealand?

Please select only one item

- Yes
 No

If yes, please provide details here and justify with evidence.

Please attach a copy of any documents you wish to include to this printout.

Please attach references here

Please select radio button below if you wish to keep the response to this question confidential.

Please select only one item

- Do not publish

4b Is there any data available on the number or proportion of products that declare hydrogenated oils in the Statement of Ingredients for Australia and/or New Zealand?

Please select only one item

- Yes
 No

If yes, please provide details here and justify with evidence.

Please attach a copy of any documents you wish to include to this printout.

Please attach references here.

Please select radio button below if you wish to keep the response to this question confidential.

Please select only one item

- Do not publish

4c Food manufacturers- what information do you provide to consumers about the trans fat content of your food products?

Please select only one item

- Yes
 No

If yes, please provide details here and justify with evidence.

Please attach a copy of any documents you wish to include to this printout.

Please attach references here

Please select radio button below if you wish to keep the response to this question confidential.

Please select only one item

- Do not publish

Section 2b: Reformulation activities to reduce trans fat in foods in Australia and New Zealand

Questions 5a - 5b seek further information about reformulation activities in Australia and New Zealand.

4.7 Reformulation activities to reduce trans fat in foods in Australia and New Zealand

Regulatory approaches

There are no regulatory approaches in place in Australia or New Zealand to eliminate partially-hydrogenated oils or reduce trans fats in the food supply.

Part 2.4 of the Australia and New Zealand Food Standards Code relates to edible oils (Part 2.4.1) and edible oils spreads (Part 2.4.2). Under this part of the Code there are compositional requirements for edible oils spreads to contain vitamin D (applies to Australia only), however, there are no compositional limits for trans fats.

Voluntary reformulation

In Australia and New Zealand there is a history of non-regulatory efforts to work with food industry to voluntarily reduce industrial trans fat in the food supply. The Australia and New Zealand Collaboration on Trans Fats was established in 2007 to support and broaden existing initiatives to manage trans fats in the food supply. The Collaboration included membership from Government, food industry and public health groups in Australia and New Zealand.

Activities undertaken by the Collaboration included roundtables on trans fats in quick service restaurants, with the broad aim to minimise use of trans fats in quick service meals while not inadvertently impacting saturated fat content. In 2009, FSANZ undertook surveys with Australian and New Zealand quick service restaurants to measure progress in voluntarily reducing trans fats in the food supply. The survey indicated that the quick-service industry (and their stakeholders such as suppliers of products such as oils and chips) had been proactive in reducing the levels of trans fats in their products. Several Australian companies reported they had reduced trans fat levels to less than 0.5g per 100g of food. The main approaches used by the quick-service industry to reduce trans fats were eliminating or reducing the use of hydrogenated fats or oils, substituting oils high in trans fats with oil blends containing very low levels of trans fats, using oven-baking rather than deep-frying for cooking, and increasing education and awareness about how ingredient manufacturers can reduce trans fats in their products.

The survey identified the higher costs of oils low in trans fats was a barrier to some companies reducing trans fat in their products. The survey also identified progress in moving towards healthier oil solutions had been hampered by the 2007-08 world economic crises, and that in times of economic downturn, voluntary initiatives such as trans fat reduction may not be prioritised due to the higher costs of low trans fat oils. This finding is relevant to consider in relation to the current economic impacts of the COVID-19 pandemic and inflationary pressures. In fact, one major driver of increased food prices has been increased cooking oil prices caused by oil shortages associated with war (Ukraine and Russia supply most of the world's sunflower oil) and supply shortages associated with impacts of COVID-19.

In 2009, FSANZ reviewed the outcome of non-regulatory measures to reduce trans fats. The 2009 review found that intakes of trans fats from manufactured sources had decreased in Australia and New Zealand by around 25 to 45 per cent since 2007, reflecting changes in industry practice. This decline is equivalent to around 0.1 per cent of total energy intake. FSANZ recommended to Food Ministers that non-regulatory measures to reduce trans fats in the food supply should continue [42]. This recommendation was based on evidence of the effectiveness of non-regulatory approaches in leading to a decline in intakes of trans fats from manufactured sources in both Australia and New Zealand, and that mean consumption of trans fats in the Australian and New Zealand populations was within WHO recommendations.

It is not clear whether the industry efforts made over 2007-2009 to reduce trans fats have been sustained. Trans fat reformulation is not included in the Australian Healthy Food Partnership reformulation program or the New Zealand Heart Foundation's reformulation program.

More recent surveys of food industry practices have been undertaken through the INFORMAS network, a global network of public-interest organisations and researchers that aim to monitor, benchmark and support public and private sector actions for establishing healthy food environments. A survey [43] of nineteen of Australia's largest food and beverage companies identified that sixteen companies had reported some action or made some commitments to reformulate their products to reduce levels of nutrients of concern (as at 31 December 2017). Across the food companies assessed, the most common reformulation targets were for a reduction in sodium and saturated fat (8 out of 16 companies), trans fat (7 out of 16 companies), sugar and portion size of single-serve products (6 out of 19 companies).

The same survey was undertaken amongst Australian quick-service restaurants [44] and supermarkets [45] where lower levels of commitment to reformulation were identified. Amongst quick-service restaurants, five out of eleven restaurants were identified as having taken some action to reformulate menu items to reduce levels of nutrients of concern (as at 31 December 2017). The most common areas for reformulation were sodium (five out of eleven companies), fat and sugar (five out of eleven companies), followed by trans fat (three out of eleven companies).

This survey was also undertaken with New Zealand food and beverage manufacturers, supermarkets and quick service restaurants [46]. The results reported that five out of twenty five companies (including three quick service restaurants) had not set reformulation targets for any nutrient. Only one company had set SMART[1] <#_ftn1> reformulation targets for all nutrients of concern (sodium, saturated fat, trans fat and added sugars). The report of the survey did not detail how many companies had set reformulation targets for trans fats.

[1] <#_ftnref1> SMART targets are specific, measurable, achievable, relevant and time-bound.

5a Food manufacturers- what reformulation activities have you undertaken in the last 10 years to reduce the use of trans fats/partially-hydrogenated vegetable or fish oils?

Please select only one item

- Yes
- No

If yes, please provide details here and justify with evidence.

Please attach a copy of any documents you wish to include to this printout.

Please attach references here

Please select radio button below if you wish to keep the response to this question confidential.

Please select only one item

- Do not publish

5b Food manufacturers- What has been the impact of cooking oil price increases and supply shortages on your products? What alternate oils are being used?

Please select only one item

- Yes
- No

If yes, please provide details here and justify with evidence.

Please attach a copy of any documents you wish to include to this printout.

Please attach references here

Please select radio button below if you wish to keep the response to this question confidential.

Please select only one item

- Do not publish

Section 3: Objectives

Why is Government action needed?

Government consideration of this issue is important to improve health outcomes in an equitable way and bring Australia and New Zealand into line with achievements made internationally in relation to eliminating industrially-produced trans fats

The sections above identified that industry actions have largely been effective in reducing trans fat levels in the Australian and New Zealand food supply. Despite these actions, some foods continue to have high levels of trans fats and vulnerable population groups are at greater risk of excess trans fat consumption.

Government action on this issue is needed to:

protect population groups vulnerable to higher intakes of trans fats;
 cement and sustain reformulation achieved through industry efforts;
 reach foods/manufacturers where voluntary industry efforts have not been realised;
 create a level playing field between industry sectors who have and have not taken efforts to remove trans fats from their products;
 prevent 'dumping' of products high in trans fats on Australia and New Zealand, due to manufacturers being unable to sell these products in other markets.

5.1 Objectives

Under the Overarching Strategic Statement for the Food Regulatory System, the aims of the food regulatory system are:

Protecting the health and safety of consumers by reducing risks related to food;
 Enabling consumers to make informed choices about food by ensuring that they have sufficient information and by preventing them from being misled;
 Supporting public health objectives by promoting healthy food choices, maintaining and enhancing the nutritional qualities of food and responding to specific public health issues; and
 Enabling a strong sustainable food industry to assist in achieving diverse, affordable food supply and general economic benefit.
 Improving the composition of the food supply in relation to trans fats is related to the first and third objective of the Food Regulatory System.

Taking into account the description of the problem outlined above and the aims of the food regulation system, FRSC proposes objective of this work is as follows:

Industrially-produced trans fats have been eliminated or reduced as much as possible from the food supply in Australia and New Zealand to support all population groups to minimise consumption of trans fats.

6 Do you agree with the proposed objective of this work?

Please select only one item

- Yes
 No

If not, what is your proposed alternative?

Please attach a copy of any documents you wish to include to this printout.

Please attach references here

Please select radio button below if you wish to keep the response to this question confidential.

Please select only one item

- Do not publish

Section 4: Options

Four options are presented on pages 27 to 33 of the [Public Consultation Options Paper](#)

Policy Options

To achieve the desired outcome, the following policy options have been considered. These options are not necessarily mutually exclusive, more than one option could be pursued.

Voluntary reformulation
 Regulatory limits for industrial trans fats in processed foods
 Prohibiting use of partially-hydrogenated oils in processed foods

These policy options, including strengths and weaknesses (compared to the status quo) and risks and limitations are described in detail below. It is relevant to note that this paper is only focussing on options for policy approaches. Implementation details for the preferred policy option would be determined in due course.

7 Are there additional policy options that should be considered? Please provide rationale and the benefits and risks of your suggested option.

Please select only one item

- Yes
 No

Please provide rationale and the benefits and risks of your suggested option.

Please attach a copy of any documents you wish to include to this printout.

Please attach references here

Please select radio button below if you wish to keep the response to this question confidential.

Please select only one item

- Do not publish

Section 4.1: Policy Option 1 - Status Quo

Questions 8a to 8b seek further information on the risks and limitations of maintaining the status quo.

See page 27 of the [Public Consultation Options Paper](#).

Status Quo

Description

Section 4.6 and 4.7 describes the status quo in relation to government and industry action on trans fats in Australia and New Zealand. Essentially, there are no regulatory actions on trans fats and limited information available to consumers on the trans fat content of foods. Voluntary actions to reduce trans fats is undertaken by industry. However, voluntary industry action has not been co-ordinated or monitored in some time and it is not known whether voluntary efforts initiated pre-2010 have been sustained.

Strengths and weaknesses compared to status quo

N/A

Risks and limitations

Maintaining the status quo confers the following risks:

With economic impacts associated with COVID-19 restrictions and inflation, businesses may seek to use cheaper oil alternatives which contain trans fats.

Some products on the market in Australia and New Zealand may continue to have trans fats content above international limits, with consumers unable to make informed choices about these foods due to lack of label information.

Sectors of the population may continue to exceed WHO recommendations for consumption of trans fats.

With increasing legislative action internationally to eliminate industrially-produced trans fats from foods, there is the potential that countries such as Australia and New Zealand with no legislative action, no labelling of foods' trans fat content, and no monitoring of trans fats in foods, become saturated with ingredients or products that cannot be sold in other markets.

8a Are the risks and limitations associated with the status quo described appropriately?

Please select only one item

- Yes
 No

If no, please provide details here and justify with evidence.

Please attach a copy of any documents you wish to include to this printout.

Please attach references here

Please attach references here

Please select radio button below if you wish to keep the response to this question confidential.

Please select only one item

- Do not publish

8b Are there additional risks that have not been identified?

Please select only one item

- Yes
 No

If yes, please provide details below.

Please attach a copy of any documents you wish to include to this printout.

Please attach references here

Please attach references here

Please select radio button below if you wish to keep the response to this question confidential.

Please select only one item

- Do not publish

Section 4.2: Policy Option 2 - Voluntary reformulation

Questions 9a to 9e seek further information on Policy Option 2 - Voluntary Reformulation.

See pages 28 - 29 of the [Public Consultation Options Paper](#).

6.2 Voluntary reformulation

Description

Under this option, voluntary reformulation targets for industrially-produced trans fats or use of partially-hydrogenated oils could be established through existing reformulation programs such as the Healthy Food Partnership in Australia (Government led). Reformulation to reduce trans fat content of food does not change its taste or cost [10].

Targets could be established for specific food categories that are high in trans fats, reflecting the nature of the food (for example foods that predominantly contain industrially-produced trans fats). Targets could be set on international limits to support trade, for example ≤ 2 g of industrially-produced trans fat per 100 g of total fat in the food.

This option can specifically target foods categories that are potentially high in industrially-produced trans fats, including foods that do not require a label.

Industry could be invited to commit to meeting these targets over a specified period of time, e.g. 2-4 years. Consideration would need to be given to establishing a combined trans fat and saturated fat reformulation target for specific food categories to ensure that trans fats are not replaced with unhealthy saturated fats.

Success of this option relies on strong industry participation, otherwise consumers may still be exposed to trans fats through foods that have not been reformulated. If widespread reformulation occurs, then consumers would have access to the reformulated products without needing to change their behaviour.

As with other current reformulation programs, this option would likely focus on domestic manufacturers and is unlikely to engage international manufacturers who import foods or edible oils into Australia and New Zealand. It has been predicted that voluntary reformulation approaches may have a modest impact on reducing inequalities [14].

Monitoring would likely rely on industry reporting. Unless trans fat/partially-hydrogenated oils were declared on a food label or chemical analysis of foods was commissioned (which would not be able to separately quantify industrially-produced vs ruminant trans fats) it would be difficult to independently monitor whether industry is meeting the voluntary reformulation targets.

Compared to legislative approaches, this option would be simpler to implement because legislative change is not required. This approach is also more flexible than legislative approaches, with the potential to easily update reformulation targets if required. Unlike legislative approaches, there are no trade implications associated with this option.

International examples

Voluntary reformulation efforts in Canada, the United Kingdom and the Netherlands have contributed to reductions in population trans fat consumption. However, certain segments of the population continued to consume trans fats above the recommended levels [56] and these countries have since implemented mandatory limits for trans fats in oils and all foods.

Countries reported to have voluntary reformulation for trans fats in 2022 include Azerbaijan, Republic of Korea, Oman, Jordan, Brunei Darussalam, Tajikistan and Tunisia [9].

Strengths and weaknesses compared to status quo[1]

Strengths	Weaknesses
Can re-ignite efforts established previously through the Australia and New Zealand Collaboration on Trans Fats.	Burden on Government to establish and maintain reformulation targets, engage industry and monitor implementation.
May achieve reductions in trans fat content for reformulated foods.	Industry may replace partially-hydrogenated oils with saturated fats, unless appropriate saturated fat targets accompany the trans fat reformulation targets. Burden on industry to reformulate their products, and analyse trans fat content of foods in order to report on whether reformulation targets have been achieved.

Risks and limitations

Commitment to voluntary reformulation targets may not reach desired levels. Resulting in minimal impact on trans fat levels in foods.

The current supply chain constraints coupled with the financial climate post COVID-19 may impact manufacturers' ability and appetite to reformulate to lower trans fats options and may mean more affordable and available oil alternatives (which contain trans fats) will be used .

Potential that reformulation in response to trans fat labelling requirements could see trans fats being replaced with saturated fats. While saturated fats are less dangerous than trans fats, it is still recommended that consumption of saturated fats be limited. However, healthier options to replace trans fats exist and are being used by industry [10].

Not all food manufacturers may commit to voluntary reformulation. In this case, consumers would not be able to identify foods that have lower levels of trans fats unless this option was accompanied by labelling approaches.

Does not avoid the potential for the Australia and New Zealand markets to become saturated with ingredients and products high in trans fats that cannot be sold in other markets.

[1] Note these are strengths and weaknesses compared to the status quo, not compared to other options.

9a Are the risks and limitations associated with Option 6.2 described appropriately?

Please select only one item

- Yes
- No

If no, please provide details here and justify with evidence.

Please attach a copy of any documents you wish to include to this printout.

Please attach references here

Please select radio button below if you wish to keep the response to this question confidential.

Please select only one item

- Do not publish

9c Food manufacturers- How likely are you to be involved in this voluntary reformulation program? How many products are likely to be reformulated?

Please provide details below.

Please attach a copy of any documents you wish to include to this printout.

Please attach references here

Please select radio button below if you wish to keep the response to this question confidential.

Please select only one item

- Do not publish

9d Food manufacturers- how would this option impact you (include cost estimates where available)? What would be a suitable time frame for this option to be implemented in your organisation.

Please provide details below.

Please attach a copy of any documents you wish to include to this printout.

Please attach references here

Please select radio button below if you wish to keep the response to this question confidential.

Please select only one item

Do not publish

9b Are there additional risks and limitations that have not been identified?

Please select only one item

Yes

No

If yes, please provide details below.

Please attach a copy of any documents you wish to include to this printout.

Please attach references here

Please select radio button below if you wish to keep the response to this question confidential.

Please select only one item

Do not publish

9e What implementation issues need to be considered for this option?

Please provide details below.

Please attach a copy of any documents you wish to include to this printout.

Please attach references here

Please select radio button below if you wish to keep the response to this question confidential.

Please select only one item

Do not publish

Section 4.3: Policy Option 3 - Regulatory limits for industrially-produced trans fats in processed foods

Questions 10a to 10e seek further information on Policy Option 3 - Regulatory limits for industrially-produced trans fats in processed foods.

See pages 30 - 31 of the [Public Consultation Options Paper](#).

6.3 Regulatory limits for industrially-produced trans fats in processed foods

Description

Under this option, a mandatory limit such as 2g of industrially-produced trans fats per 100g total fat could be introduced for all foods. This would effectively minimise or eliminate industrially-produced trans fats from the food supply and reduce consumption to non-significant levels[57].

The approach is considered by the WHO to be one of the best practice policies for eliminating industrially-produced trans fats from the food supply.

This option is feasible given healthier replacement oils are available, and are reported not to change the taste of the food or the cost to the consumer and food manufacturers have been successfully removing trans fats from their products in international markets [10].

This would support equity as it can reach groups of the population at greater risk of exceeding recommendations for consumption of trans fats. This option does not require consumer behaviour change, or consumers having the knowledge and skills necessary to identify foods containing industrially-produced trans fats and make healthy informed choices. Compared to voluntary approaches, mandatory product reformulation has been predicted to have the greatest benefits for equity [14, 15].

As the majority of products in the food supply contain no or low levels of trans fats, this regulatory change would be expected to affect a minority of manufacturers. This will help to create a level playing field and cement the achievements made by many manufacturers in reducing trans fats in foods.

This option would need to be accompanied by industry education to support industry to reformulate their products in order to meet the new regulations and ensure industrially-produced trans fats are replaced with healthier alternatives.

Trade implications would need to be considered, however international examples such as the actions of the WHO REPLACE program provide precedence.

Consideration would need to be given to methods to support enforcement approaches for foods containing both industrially-produced and ruminant trans fats, due to difficulties in differentiating between ruminant and industrially-produced trans fats through analytical methods.

International examples

A mandatory limit on industrially-produced trans fats (2g of per 100g total fat in all foods) is in place in countries including Denmark, Italy, Spain, Austria, Ireland, Sweden, Chile, Poland, South Africa, Croatia, Norway, Malta, Iceland, Finland, Luxembourg, Bulgaria, Romania, France, Portugal, Hungary, Brazil, Germany and the Netherlands [9].

Strengths and weaknesses compared to status quo[1]

Strengths	Weaknesses
Would drive reformulation of foods containing industrially-produced trans fats.	Burden on Governments to amend regulations and enforce new requirements.
Equitable, all consumers would be protected from trans fats, including vulnerable groups.	Burden on industry to change product composition. However, likely to only affect a minority of manufacturers who have not already taken action to reduce or eliminate trans fats.
Prevents Australia and New Zealand from increase in ingredients or foods high in trans fats that cannot be sold in other markets	Potential trade implications.
Australia and New Zealand would meet 'best practice' for trans fats as outlined by the WHO and be eligible for certification by WHO.	

Risks and limitations

Potential that reformulation in response to regulatory limits could see trans fats being replaced with saturated fats. While saturated fats are less dangerous than trans fats, it is still recommended that consumption of saturated fats be limited. However, healthier options to replace trans fats exist and are being used by industry [10].

Prices of reformulated foods may increase, however, WHO reports that replacing partially-hydrogenated oils with healthier oils does not increase costs to the consumer.

This option poses enforcement difficulties, as chemical analysis may be unable to distinguish between industrially-produced and naturally occurring trans fats. Chemical analysis is also a costly enforcement method.

Unless well designed regulatory limits are introduced this option may disadvantage certain product groups such as dairy and meat products due to the inherent existence of ruminant trans fats in dairy and meat which cannot be reformulated and are not in scope of this work.

[1] Note these are strengths and weaknesses compared to the status quo, not compared to other options.

10a Are the risks and limitations associated with Option 6.3 described appropriately?

Please select only one item

- Yes
- No

If no, please provide details below.

Please attach a copy of any documents you wish to include to this printout.

Please attach references here

Please select radio button below if you wish to keep the response to this question confidential.

Please select only one item

- Do not publish

10b Are there additional risks that have not been identified?

Please select only one item

- Yes
- No

If yes, please provide details below.

Please attach a copy of any documents you wish to include to this printout.

Please attach references here

Please select radio button below if you wish to keep the response to this question confidential.

Please select only one item

- Do not publish

10c Food manufacturers- how would this option impact you (include cost estimates where available)? How many SKUs would be affected? What would be a suitable time frame for this option to be implemented in your organisation.

Please attach a copy of any documents you wish to include to this printout.

Please attach references here

Please select radio button below if you wish to keep the response to this question confidential.

Please select only one item

Do not publish

10d What implementation issues need to be considered for this option?

Please attach a copy of any documents you wish to include to this printout.

Please attach references here

Please select radio button below if you wish to keep the response to this question confidential.

Please select only one item

Do not publish

10e Food manufacturers- what oils you most likely to use in place of partially hydrogenated oils?

Please attach a copy of any documents you wish to include to this printout.

Please attach references here

Please select radio button below if you wish to keep the response to this question confidential.

Please select only one item

Do not publish

Section 4.4: Policy Option 4 - Prohibiting use of partially-hydrogenated oils in processed foods

Questions 11a to 11e seek further information on Policy Option 4 - Prohibiting use of partially-hydrogenated oils in processed foods

See pages 31 - 33 of the [Public Consultation Options Paper](#).

6.4 Prohibiting use of partially-hydrogenated oils in processed foods

Description

Under this option, use of partially-hydrogenated oils in processed foods would be prohibited. Healthier replacement oils are available, and are reported not to change the taste of the food or the cost to the consumer [10].

The approach is considered by the WHO to be one of the best practice policies for eliminating industrially-produced trans fats from the food supply.

This would support equity as it can reach groups of the population at greater risk of exceeding recommendations for consumption of trans fats. This option does not require consumer behaviour change, or consumers having the knowledge and skills necessary to identify foods containing industrially-produced trans fats and make healthy informed choices. Compared to approaches, mandatory product reformulation has been predicted to have the greatest benefits for equity [14, 15].

As the majority of products in the food supply do not use hydrogenated oils, these regulatory changes are expected to affect a minority of manufacturers. This will help to create a level playing field and cement the achievements made by many manufacturers in reducing trans fat in foods.

This option would need to be accompanied by industry education to support industry to reformulate their products in order to meet the new regulations and ensure industrially-produced trans fats are replaced with healthier alternatives.

Compared to Option 6.3 this option may be easier to enforce because enforcement activities can be based on reviewing the food's statement of ingredients rather than compositional analysis of the food (minor changes to existing requirements in the Code for declaring oils in the statement of ingredients would be necessary to assist with enforcement). This option also does not inadvertently discriminate against products with ruminant trans fats such as meat or dairy because it is focussed only on industrially trans fats which are produced through partial hydrogenation of oils.

Trade implications would need to be considered, however international examples such as the actions of the WHO REPLACE program provide precedence.

International examples

A ban on partially-hydrogenated oils is in place in countries including the United States of America, Canada, Peru, Thailand and Singapore [9].

Strengths and weaknesses compared to status quo[1]

Strengths	Weaknesses
Would drive reformulation of foods containing industrially-produced trans fats.	Burden on Governments to amend regulations and enforce new requirements.
Equitable, all consumers would be protected from trans fats, including vulnerable groups.	Burden on industry to change product composition. However, likely to only affect a minority of manufacturers who have not already taken action to reduce or eliminate trans fats.
Prevents Australia and New Zealand from increase in ingredients or foods high in trans fats that cannot be sold in other markets	Potential trade implications.
Australia and New Zealand would meet 'best practice' for trans fats as outlined by the WHO and be eligible for certification by WHO.	

Risks and limitations

Potential that reformulation in response to prohibition of partially-hydrogenated oils could see trans fats being replaced with saturated fats. While saturated fats are less dangerous than trans fats, it is still recommended that consumption of saturated fats be limited. However, healthier options to replace trans fats exist and are being used by industry [10].

Prices of reformulated foods may increase, however, WHO reports that replacing partially-hydrogenated oils with healthier oils does not increase costs to the consumer. Global supply shortages in cooking oils may limit availability of healthier oil alternatives. Products unable to be produced without partially-hydrogenated oils may be removed from the market.

[1] Note these are strengths and weaknesses compared to the status quo, not compared to other options.

11a Are the risks and limitations associated with Option 6.4 described appropriately?

Please select only one item

- Yes
- No

If no, please provide details below.

Please attach a copy of any documents you wish to include to this printout.

Please attach references here

Please select radio button below if you wish to keep the response to this question confidential.

Please select only one item

- Do not publish

11b Are there additional risks that have not been identified?

Please select only one item

- Yes
- No

If yes, please provide details below.

Please attach a copy of any documents you wish to include to this printout.

Please attach references here

Please select radio button below if you wish to keep the response to this question confidential.

Please select only one item

- Do not publish

11c Food manufacturers- how would this option impact you (include cost estimates where available)? How many SKUs would be affected? What would be a suitable time frame for this option to be implemented in your organisation.

Please attach a copy of any documents you wish to include to this printout.

Please attach references here

Please select radio button below if you wish to keep the response to this question confidential.

Please select only one item

Do not publish

11d What implementation issues need to be considered for this option?

Please attach a copy of any documents you wish to include to this printout.

Please attach references here

Please select radio button below if you wish to keep the response to this question confidential.

Please select only one item

Do not publish

11e Food manufacturers- what oils you most likely to use in place of partially hydrogenated oils?

Please attach a copy of any documents you wish to include to this printout.

Please attach references here

Please select radio button below if you wish to keep the response to this question confidential.

Please select only one item

Do not publish

Section 4.5: Options considered but not pursued

Question 12 seeks your input on other options which were considered but not pursued.

See pages 33 - 35 of the [Public Consultation Options Paper](#).

6.5 Options considered but not pursued

Education

The option of delivering education campaigns and materials was considered but not pursued. Education campaigns could inform consumers about the recommendations to limit trans fat consumption and the types of foods to avoid to limit trans fat consumption (particularly industrially-produced trans fats). However, without label changes, it may be difficult for consumers to apply the messages in consumer education as they may be unable to identify foods containing trans fats. Education campaigns could also (or instead) be delivered to industry on the importance of removing industrially-produced trans fats from their products and about healthier oil and fat alternatives to use in food manufacturing, however there would be little incentive for industry to apply the education messages, and the education would only be focussed on domestic food producers and not reach international manufacturers.

This option was not seen to adequately achieve the desired outcome because there is insufficient evidence [14] that public health education campaigns are effective for vulnerable populations groups [16] such as those with lower socio-economic status and lower-education levels at (those at higher risk of exceeding trans fat intake recommendations). There also insufficient evidence on the effectiveness of education campaigns to change dietary behaviours [16, 58]. Mass media based campaigns may have an effect on intermediate outcomes, such as knowledge and attitudes, but may not necessarily influence behaviour change [16, 59]. Difficulties in sustaining education campaigns also limit the potential of this option.

Import restrictions

The option of restrictions on the importation of partially-hydrogenated oils was considered but not pursued for this work. Restrictions on imported foods is implemented through the *Imported Food Control Act 1992* and the *Imported Food Control Regulations 2019* in Australia which is administered by the Department of Agriculture, Forestry and Fisheries (DAFF). Under this legislation, DAFF inspects imported food to check it meets food safety requirements and to ensure it complies with the Food Standards Code. Biosecurity restrictions are also in place for foods such as meat, fruit, eggs, vegetables and dairy products from certain countries.

In New Zealand, food safety requirements are set under the *Food Act 2014*. These include: the safety and suitability of food to be imported, requirements for safe handling, storing and transporting of food, record keeping, food recalls. Food imported must also meet the requirements of the Food Standards Code.

Therefore in order to impose an import restriction for partially-hydrogenated vegetable or fish oils, the oils must either be prohibited through the Food Standards Code, or pose a food safety or biosecurity risk.

Prohibiting partially-hydrogenated oils through the Food Standards Code is being considered through Option 6.6 and therefore if this option was implemented import restrictions would also apply. While partially-hydrogenated oils are a health risk, they may not be considered to pose a microbiological, chemical food safety risk, or biosecurity risk and therefore not be restricted from importation on these grounds.

Fiscal measures

The option of fiscal measures such as taxes to encourage industry to reformulate their products to reduce or remove industrially-produced trans fats was considered but not pursued.

Taxes could be based on a food's trans fat content with a higher tax applying to foods with higher trans fat content. The tax could either be applied to consumers (i.e. increase the purchase price of the product) or industry (i.e. industry would determine whether to pass on the tax to consumers).

Reasons that this option is not appropriate include the fact that there are no analytical methods available to differentiate between ruminant and industrially-produced trans fats which result in foods containing ruminant trans fats being unfairly targeted. Products containing ruminant trans fats such as dairy and meat are unable to be reformulated to reduce trans fat content and these foods (low fat and lean varieties in particular) are recommended in Dietary Guidelines in both Australia and New Zealand.

Industry would be required to calculate the trans fat content of their products in order to determine whether and how much the fiscal measure applies, and this would introduce an additional burden on the food industry.

This option may not be effective because some manufactures may choose not to reformulate their products and instead pay the tax. This has been observed in response to taxes on sugar in beverages [60].

Under this option, vulnerable population groups may continue to be exposed to foods high in trans fats and may also experience increased costs for foods.

Labelling

Changing food labelling regulations to provide information to consumers about the trans fat content of the food was considered but not pursued. Labelling approaches considered were either requiring a mandatory declaration of ingredients containing industrially-produced trans fats (e.g. partially-hydrogenated oils); and/or requiring mandatory declaration of trans fat content in the Nutrition Information Panel (this would likely require a declaration of total trans fat content, as it is not possible to quantify industrially-produced trans fats separately).

This option was considered to not adequately achieve the desired outcome because it would only apply to packaged foods, and unpackaged foods likely to contain trans fats such, such as popcorn at a cinema, pies and pastries at a bakery etc would not be affected. Depending on the approach taken, this option could have a high burden on industry as all foods would need to change their labels (if a declaration in the NIP as required), not just those containing trans fats.

It is possible that labelling may drive industry reformulation to reduce or remove trans fats from their foods, however there are other options that can more effectively achieve this. Because it is not possible to quantify ruminant and industrially-produced trans fats separately, requiring a declaration of a foods trans fat content in the NIP may disadvantage certain industry sectors, such as dairy and meat, as these foods contain ruminant trans fats which are unable to be reduced through reformulation activities.

In relation to protecting vulnerable populations this option was considered to be insufficient because labelling interventions have been predicted to have minimal impact on reducing inequalities [14, 18]. Not all consumers use food/nutrition label information (or use it correctly) [61] when selecting foods to purchase or consume. Older consumers, or those with lower levels of education and income (i.e. those with higher consumption of trans fats) have the greatest difficulty interpreting nutrition labels [62]. For labelling to be effective it would rely on consumers knowing that trans fats are unhealthy and prioritising this knowledge when making food decisions.

12 Do you agree that these options should not be pursued further?

Please select only one item

- Yes
- No

Please provide details below.

Please attach a copy of any documents you wish to include to this printout.

Please attach references here

Please select radio button below if you wish to keep the response to this question confidential.

Please select only one item

- Do not publish

Section 5: Impact analysis (costs and benefits)

Pages 38 to 39 of the [Public Consultation Options Paper](#) discuss the likely net benefit of the options.

Related Information

In order to determine the likely net benefit of the proposed options, this section considers the costs and benefits of the proposed options, including groups in the community that would be affected by each option and the economic, social and environmental impacts on them. At this point these costs and benefits are not quantified, and information is sought through this consultation paper to assist in quantifying costs and benefits where possible.

Costs

Aside from the status quo, all of the proposed policy options have costs associated with them. Costs are born by Government and industry. Consultation questions to gather information on the costs of the proposed options have been included against each option.

It is expected that costs to industry would be limited to minority of the industry and only affected manufacturers would bear this cost. For example, regulatory limits for industrial trans fats in processed foods (Option 6.3) and prohibiting use of partially-hydrogenated oils (Option 6.4) would only affect manufacturers that produce products containing industrially-produced trans fats. Based on analysis of available information from the New Zealand GS1 database and Mintel GNPD, it is considered that only a minority of products would be impacted.

Other options may only have costs to industry who voluntarily chose to participate. For example, if there would be costs to manufacturers who chose to voluntarily reformulate their products as part of an organised voluntarily reformulation program (Option 6.2).

Costs to Government(s) would include the work involved in changing regulations and administrating and enforcing the regulations (for example Option 6.3, 6.4), operating a voluntary reformulation program (Option 6.2) and delivering industry education (relevant to all options). As the Australia and New Zealand Food Regulation System involves multiple levels of Government, several Governments may be impacted.

Benefits

Reducing or eliminating industrially-produced trans fats in the food supply offers important health benefits to the population. These include reduced health care costs and productivity gains. The benefits of the proposed options are dependent on the extent to the option successfully reduces or eliminates industrially-produced trans fats and how well the option protects vulnerable consumers.

The WHO reports that elimination of industrially-produced trans fats can save 17.5 million lives globally over the next 25 years and prevent avoidable suffering. It will also reduce healthcare costs by preventing heart attacks, which require costly care and reduce inequalities in health [10].

A modelling study published in late 2020 [17] reported that in Australia, around 400,000 coronary heart disease deaths could be prevented, and around 100,000 health-adjusted life years could be gained over the population's lifetime if a legislative ban on industrial trans fats was introduced (i.e. Option 6.3 or 6.4). The researchers predicted that the benefits of the legislative ban would be greater among socioeconomically disadvantaged groups and Australians living outside of major cities. The researchers estimated that a legislative ban on industrial trans fats would be cost saving or highly cost effective and could reduce health inequalities in the first 10 years after implementation. This conclusion took into account the costs to Government and industry for implementing the legislative ban and the fact that preventing coronary heart disease would increase the older population and associated health care costs.

Similarly, a 2015 modelling study [18] examining the equity and health benefits from different trans fat policies in the England reported that a total ban on trans fats in processed foods (i.e. Option 6.3 or 6.4) could prevent or postpone about 7200 (2.6%) of deaths from coronary heart disease from 2015-2020 and reduce inequalities in mortality from coronary heart disease by approximately 3000 deaths. In comparison, labelling policies or actions to remove trans fats from restaurants/fast food outlets were half as effective, saving between 1800 and 3500 coronary heart disease deaths, and reducing inequalities by 600 to 1500 deaths. This analysis reported that a total ban on trans fats could also provide net savings of £265m, or if reformulation costs were incurred outside the normal reformulation cycle, the net saving would be £64m.

A 2017 modelling study [19] reported similar findings for England and Wales, predicting that elimination of industrial trans fats could result in approximately 1600 fewer deaths per year (between 2011-2020), 4000 fewer hospital admissions; and gain approximately 14 000 additional life years. This study reported that health inequalities would be substantially reduced and that elimination of trans fats would be 'extremely cost-effective' (a WHO definition for policies costing less than per capita GDP), and even more cost effective than statin medication for preventing coronary heart disease deaths. In both studies, savings included direct health care costs, productivity costs averted and informal care costs.

To put these United Kingdom Studies into context, Australia and New Zealand are reported to have a higher proportion of coronary heart disease deaths associated with trans fats- 4.27% for Australia, 3.25% for New Zealand and 3.06% for the United Kingdom in 2019 (prior to the ban on industrially-produced trans fats being introduced in the United Kingdom in 2021) [9].

Other positive benefits from reducing trans fats in the food supply have been reported for New York State where restrictions on use of ingredients containing trans fats in fast-food outlets were associated with a 4.5% reduction in cardiovascular disease mortality or thirteen fewer cardiovascular disease deaths per 100,000 persons per year [63]. Counties in New York State with restrictions on industrially-produced trans fat recorded a 7-8% greater decrease in hospital admissions for heart attacks between 2007 and 2013 than counties without trans fat restrictions [48].

10. Preferred policy option

This consultation will help to inform and identify the preferred policy option(s) to recommend to Food Ministers. The preferred policy option(s) will be the option likely to have the highest net benefit, giving consideration to how well the proposed options achieve the objective of the work.

Based on the analysis undertaken in this document, prohibiting use of partially-hydrogenated oils (Option 6.4) has the greatest potential to achieve the objective, however further evidence and costings are required before this option is recommended to Food Ministers.

14a Do you agree with the description of the possible benefits associated with the proposed options?

Benefits

Reducing or eliminating industrially-produced trans fats in the food supply offers important health benefits to the population. These include reduced health care costs and productivity gains. The benefits of the proposed options are dependent on the extent to the option successfully reduces or eliminates industrially-produced trans fats and how well the option protects vulnerable consumers.

The WHO reports that elimination of industrially-produced trans fats can save 17.5 million lives globally over the next 25 years and prevent avoidable suffering. It will also reduce healthcare costs by preventing heart attacks, which require costly care and reduce inequalities in health [10].

A modelling study published in late 2020 [17] reported that in Australia, around 400,000 coronary heart disease deaths could be prevented, and around 100,000 health-adjusted life years could be gained over the population's lifetime if a legislative ban on industrial trans fats was introduced (i.e. Option 6.3 or 6.4). The researchers predicted that the benefits of the legislative ban would be greater among socioeconomically disadvantaged groups and Australians living outside of major cities. The researchers estimated that a legislative ban on industrial trans fats would be cost saving or highly cost effective and could reduce health inequalities in the first 10 years after implementation. This conclusion took into account the costs to Government and industry for implementing the legislative ban and the fact that preventing coronary heart disease would increase the older population and associated health care costs.

Similarly, a 2015 modelling study [18] examining the equity and health benefits from different trans fat policies in the England reported that a total ban on trans fats in processed foods (i.e. Option 6.3 or 6.4) could prevent or postpone about 7200 (2.6%) of deaths from coronary heart disease from 2015-2020 and reduce inequalities in mortality from coronary heart disease by approximately 3000 deaths. In comparison, labelling policies or actions to remove trans fats from restaurants/fast food outlets were half as effective, saving between 1800 and 3500 coronary heart disease deaths, and reducing inequalities by 600 to 1500 deaths. This analysis reported that a total ban on trans fats could also provide net savings of £265m, or if reformulation costs were incurred outside the normal reformulation cycle, the net saving would be £64m.

A 2017 modelling study [19] reported similar findings for England and Wales, predicting that elimination of industrial trans fats could result in approximately 1600 fewer deaths per year (between 2011-2020), 4000 fewer hospital admissions; and gain approximately 14 000 additional life years. This study reported that health inequalities would be substantially reduced and that elimination of trans fats would be 'extremely cost-effective' (a WHO definition for policies costing less than per capita GDP), and even more cost effective than statin medication for preventing coronary heart disease deaths. In both studies, savings included direct health care costs, productivity costs averted and informal care costs.

To put these United Kingdom Studies into context, Australia and New Zealand are reported to have a higher proportion of coronary heart disease deaths associated with trans fats- 4.27% for Australia, 3.25% for New Zealand and 3.06% for the United Kingdom in 2019 (prior to the ban on industrially-produced trans fats being introduced in the United Kingdom in 2021) [9].

Other positive benefits from reducing trans fats in the food supply have been reported for New York State where restrictions on use of ingredients containing trans fats in fast-food outlets were associated with a 4.5% reduction in cardiovascular disease mortality or thirteen fewer cardiovascular disease deaths per 100,000 persons per year [63]. Counties in New York State with restrictions on industrially-produced trans fat recorded a 7·8% greater decrease in hospital admissions for heart attacks between 2007 and 2013 than counties without trans fat restrictions [48].

Please select only one item

- Yes
 No

Please provide details below.

Please attach a copy of any documents you wish to include to this printout.

Please attach references here

Please select radio button below if you wish to keep the response to this question confidential.

Please select only one item

- Do not publish

14b Are there additional benefits associated with all or some of the proposed options that have not been captured? Please provide references for your response.

Please select only one item

- Yes
 No

Please attach a copy of any documents you wish to include to this printout.

Please attach references here

Please select radio button below if you wish to keep the response to this question confidential.

Please select only one item

- Do not publish

15 Are there additional costs associated with all or some of the proposed options that have not been captured? Please explain your rationale and your calculations.

Costs

Aside from the status quo, all of the proposed policy options have costs associated with them. Costs are born by Government and industry. Consultation questions to gather information on the costs of the proposed options have been included against each option.

It is expected that costs to industry would be limited to minority of the industry and only affected manufacturers would bear this cost. For example, regulatory limits for industrial trans fats in processed foods (Option 6.3) and prohibiting use of partially-hydrogenated oils (Option 6.4) would only affect manufacturers that produce products containing industrially-produced trans fats. Based on analysis of available information from the New Zealand GS1 database and Mintel GNPD, it is considered that only a minority of products would be impacted.

Other options may only have costs to industry who voluntarily chose to participate. For example, if there would be costs to manufacturers who chose to voluntarily reformulate their products as part of an organised voluntarily reformulation program (Option 6.2).

Costs to Government(s) would include the work involved in changing regulations and administrating and enforcing the regulations (for example Option 6.3, 6.4), operating a voluntary reformulation program (Option 6.2) and delivering industry education (relevant to all options). As the Australia and New Zealand Food Regulation System involves multiple levels of Government, several Governments may be impacted.

Please select only one item

- Yes
 No

If yes, please explain your rationale and your calculations.

Please attach a copy of any documents you wish to include to this printout.

Please attach references here

Please select radio button below if you wish to keep the response to this question confidential.

Please select only one item

- Do not publish

Section 6: Preferred option

Preferred policy option

This consultation will help to inform and identify the preferred policy option(s) to recommend to Food Ministers. The preferred policy option(s) will be the option likely to have the highest net benefit, giving consideration to how well the proposed options achieve the objective of the work.

Based on the analysis undertaken in this document, prohibiting use of partially-hydrogenated oils (Option 4) has the greatest potential to achieve the objective, however further evidence and costings are required before this option is recommended to Food Ministers.

16 What do you consider to be the preferred policy option(s) to recommend to Food Ministers? Please explain your rationale.

Please select all that apply

- Status Quo
- Voluntary reformulation
- Regulatory limits for industrial trans fats in processed foods
- Prohibiting use of partially-hydrogenated oils in processed foods

Please explain your rationale

Please attach a copy of any documents you wish to include to this printout.

Please attach references here

Please select radio button below if you wish to keep the response to this question confidential.

Please select only one item

- Do not publish

Section 7: Implementation and review

Implementation and review

Unless the preferred option is to maintain the status quo, implementation of the preferred policy option(s) would be undertaken by Government and/or industry depending on the nature of the option.

Technical implementation issues and monitoring approaches would be considered once a preferred policy option has been identified and further consultation and regulatory analysis may be required.

17 Do you have any other comments on this document?

Please attach a copy of any documents you wish to include to this printout.

Please attach references here

Please select radio button below if you wish to keep the response to this question confidential.

Please select only one item

- Do not publish