

CODEx ALIMENTARIUS COMMISSION



Food and Agriculture
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Organization

Viale delle Terme di Caracalla, 00153 Rome, Italy - Tel: (+39) 06 57051 - E-mail: codex@fao.org - www.codexalimentarius.org

Agenda Item 8

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CODEx COMMITTEE ON FOOD LABELLING

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Labelling of alcoholic beverages

(Comments from WHO)

WHO

Introduction

1. Alcohol is a psychoactive, toxic and dependence-producing substance with a considerable global health burden. Alcohol is outside the scope of obligations in international conventions to control psychoactive substances. Alcoholic beverages are also typically exempted from many requirements of national legislation governing food labelling. However, alcoholic beverage labels are the primary source of information for consumers at the point of purchase and consumption and, consequently, an essential upstream intervention.
2. There are ongoing efforts to develop national regulations on alcoholic beverage labelling. In 2022, WHO Member States agreed on the need to develop guidance on this matter. Several existing Codex texts include alcoholic beverages in their scope, and Codex has already begun progressing work in this area. Advancing standardisation on alcoholic beverage labelling can help inform consumers and protect health as part of a comprehensive strategy to reduce the harm caused by alcohol consumption while reducing regulatory fragmentation.

Background

3. WHO raised alcohol labelling at the 73rd Session of the Executive Committee of the Codex Alimentarius Commission (CAC) and 40th Session of the CAC, during which several Members indicated developments at the national level to address alcohol consumption and suggested the possibility of developing international guidance on this matter.
4. At the 44th Session of the Codex Committee on Food Labelling (CCFL), the WHO emphasized the unique potential of alcoholic beverage labelling to provide consumers with information about their choices and protect consumers' health at the points of sale and consumption. Under Future Work and Direction for CCFL, Canada noted that one of the primary objectives of Codex standards is the protection of health and stressed the importance of considering such matters in the Codex labelling framework. The Committee identified alcohol labelling as an area for potential work and noted broad support from Member States. The Committee further noted that any work to be undertaken should be within the purview of CCFL and that information on the existing state of play would be needed. It was agreed that the Russian Federation, with the assistance of the European Union, Ghana, India and Senegal, would develop a discussion paper on alcoholic beverage labelling.
5. A circular letter issued in April 2018 (CL 2018/24-FL) requested responses to questions about current practices, pending issues and the potential role of the CCFL on this topic. At CCFL45, the Russian Federation,

the European Union, Ghana, India and Senegal presented a discussion paper (CX/FL 19/45/10) summarising the responses to CL 2018/24-FL. The discussion paper also requested the CCFL to consider five recommendations: (1) initiate new work on a new Codex standard on labelling of alcoholic beverages; (2) initiate new work to provide clarity of two existing texts on their applicability to alcoholic beverages and to consider revisions of these for alcohol content and nutritional information including energy value; (3) initiate new work to provide clarity of two existing texts on their applicability to alcoholic beverages and to consider revisions of these for alcohol content; (4) initiate new work to provide clarity of two existing texts on their applicability to alcoholic beverages; or (5) not initiate new work related to the labelling of alcoholic beverages.

6. At CCFL45, the Committee also agreed to issue a new circular letter requesting comments on the discussion paper CX/FL 19/45/10. The Committee also agreed that the Russian Federation, the European Union and India would prepare a new discussion paper based on the comments received, comments made at CCFL45, written comments in CRDs submitted to CCFL45 and further notes made by the Codex Secretariat for consideration by CCFL46.
7. In December 2019, a new circular letter CL 2019/86-FL invited Members to comment on the discussion paper CX/FL 19/45/10. In particular, guidance was sought about: (i) whether alcoholic beverages fall under the Codex definition of food as stated in the Procedural Manual and the Codex Standard on Labelling of Prepackaged Food; (ii) views on the recommendations provided in CX/FL 19/45/10 and the rationale; and (iii) responses to CL 2018/24-FL if these had not already been shared.
8. At CCFL46, the Russian Federation indicated that responses to CL 2019/86-FL showed common ground for proceeding with the work and a divide on whether alcoholic beverage labelling requires specific guidance or standards in Codex. The Russian Federation expressed willingness to continue developing the discussion paper and, based on the replies received to CL 2019/86-FL, proposed to request further information through a new circular letter to assist in the work. The Committee agreed that the Russian Federation, the European Union and India, with assistance from WHO and EUROCARE, would prepare a discussion paper for consideration by CCFL47; however, COVID-19 hindered the development of the discussion paper.

Recent evidence and Member initiatives

9. There is mounting evidence that any level of alcohol consumption is associated with health risks. Overall, consumers have an inaccurate perception of the levels and patterns of alcohol consumption and associated risks. Alcohol beverage labelling increases awareness of health risks and product composition. There is increasing evidence of the positive effects of alcoholic beverage labelling on consumption and on consumer behaviours, including slowing down alcohol use, lessening alcohol consumption events and decreasing the likelihood of purchasing occasions. Experimental studies indicate that labels impact self-reported intention to reduce consumption. Alcoholic beverage labelling enjoys a high level of support among the public. However, there is also consensus that the effect of alcoholic beverage labelling is optimized when reinforced by other policies that curb alcohol consumption.
10. Despite this evidence, there is considerable regulatory divergence among countries concerning alcohol beverage labelling. There are different label requirements and applicability types, mandatory or voluntary, due to national regulations and commitments derived from regional trade and customs agreements.
11. According to WHO 2019 data, out of 154 responding countries, 68% required information about alcohol content on the label of alcohol containers. Health warning labels on alcohol bottles or containers are increasingly being required for pregnancy (14%), drink-driving (14%), underage drinking (18%) and cancer (5%). Information may also be required on other information, such as standard drinks. The specific requirements and design of different forms of labelling vary considerably across jurisdictions. For instance, pregnancy warnings have been mandatory in France since 2007, and the Food Standards Australia New Zealand Code mandated a pregnancy warning on all beverages with over 1.15% alcohol by volume in 2020. In 2018, Ireland passed legislation to allow mandatory labelling on grams of alcohol, energy value in kilojoules and kilocalories, and warnings related to pregnancy, liver disease and cancer. In 2021, Chile amended its law on the sale and consumption of alcoholic beverages to mandate beverages with over 0.5% alcohol by volume to carry a clear, precise and visible warning covering at least 15% of the label surface regarding the consequences of harmful consumption.
12. Voluntary comprehensive labelling tends to be present on a small proportion of products. In 2021, in the European Union, 29.6% of store-bought alcoholic beverages included ingredient labelling, 21.6% energy

labelling and 2.5% full nutritional information. Also, in 2021, only 19.8% of the beverages' in-store audits in Australia presented no nutrition information. The differences in take-up of voluntary labelling also result in an uneven playing field for manufacturers.

Rationale for continuing international standardisation

13. One of the primary objectives of the CAC is to protect the health of consumers and promote the coordination of all food standards work undertaken by international governmental and non-governmental organizations. CAC has a unique mandate to protect consumer health and ensure fair practices in the food trade. Alcoholic beverage labelling is significant for CAC Strategic Goal 1 to address timely current, emerging and critical issues; Goal 2 to develop standards based on science and Codex risk-analysis principles and Goal 3 to increase impact through the recognition and use of Codex standards.
14. Alcohol use is associated with well-documented health risks, so label standardisation based on a high level of health protection contributes to pursuing CAC objectives. Displaying information on labels also supports the efforts by Member Countries and Member Organizations to strengthen consumer protection as mandated in over 50 national constitutions and statutory laws in over 100 countries. The United Nations Guidelines for Consumer Protection define access to information as one of the objectives of consumer protection rules and stress the importance of access to adequate information for consumers making informed choices. Consumer protection and truthful information are the principles of the Codex Standard for Food Labelling of Prepackaged Food and the Codex Guidelines on Nutrition Labelling. Moreover, by informing consumers about the composition and health risks associated with alcohol consumption, alcoholic beverage labelling advances the right to health as provided in Article 12 of the International Covenant on Economic, Social and Cultural Rights, in most regional human rights instruments and over 100 national constitutions.
15. The WHO Action plan 2022-2030 to effectively implement the Global strategy to reduce the harmful use of alcohol as a public health priority, adopted by the 75th World Health Assembly in May 2022, calls for States to “ensure appropriate consumer protection measures through the development and implementation of labelling requirements for alcoholic beverages that display essential information for health protection on alcohol content in a way that is understood by consumers and also provides information on other ingredients with potential impact on the health of consumers, caloric value and health warnings”. For the WHO Secretariat, the Action plan proposes to “develop a portfolio of policy guidance for the development and implementation of warning labels” and “develop guidance on the labelling of alcoholic beverages to inform consumers about the content of products and health risks associated with their consumption”. The Action plan also asks for the economic operators in alcohol production and trade, as well as operators in other relevant sectors of the economy, to refrain from promoting drinking; eliminate and prevent any positive health claims related to alcohol; and ensure, within regulatory or co-regulatory frameworks, the availability of easily understood consumer information on the labels of alcoholic beverages, including composition, age limits, health warnings and contraindications for alcohol consumption. In January 2023, the 152nd Session of the WHO Executive Board approved the updated menu of policy options and cost-effective interventions for the prevention and control of noncommunicable diseases, which recommends providing consumers with information about the contents of alcoholic beverages and the harms associated with alcohol consumption, including through labels and health warnings.

Conclusion and recommendations

16. There is common ground about the need to proceed with the work on alcoholic beverage labelling. This work is critical, noting the health, economic and other societal negative consequences of alcohol consumption and the importance of informing consumers and protecting their health in line with Members' national and international commitments, including the WHO Global alcohol action plan 2023-2030. Advice on standardization would support efforts by Members to develop national alcoholic beverage labelling regulations and harmonise normative frameworks.
17. Clarity is needed on how CCFL should move forward. Analysis is required on the responses to previous discussions, responses and comments. Further guidance is required from Members regarding national actions, especially considering the significant developments and commitments since the matter was

introduced to the CCFL agenda. Views of Members are also needed on adopting one of the recommendations put forward in CX/FL 19/45/10.

18. Given the above analysis, the World Health Organization recommends to CCFL that this matter is maintained on the CCFL agenda and invites CCFL to agree to (i) issuing a new circular letter supported by the Secretariat; (ii) requesting a country/countries to support the development of a discussion paper; (iii) requesting WHO to support the country/countries and provide technical advice on the development of the discussion paper; and (iv) sharing the discussion paper being presented to CCFL48 at least three months before the next Session of the Committee.