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STUDY

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Economic and Scientific Policy

IMPACT ASSESSMENT ON NUTRITION AND HEALTH CLAIMS MADE ON FOODS

CLAIMS REFERRING TO CHILDREN'S DEVELOPMENT AND HEALTH

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Executive Summary

EC Regulation n° 1924/2006, which presented new rules on nutrition and health claims on food products entered into force on 1 July 2007. The enforcement of the Regulation included a transitional period for most food claims, but did not foresee transitional measures for claims referring to children's development and health.

EC Regulation on nutrition and health claims is part of the European Union wide strategy of reducing ill health due to poor nutrition, overweight and obesity[1]. One of the primary aims of the Regulation was thus to harmonise Community rules on the use of nutrition and health claims on foods (including food supplements) marketed within the European Union, in order to protect consumers from false and misleading claims and enable free movement of goods within the Community[2].

As mentioned, **no transition period was initially allowed for claims referring to the health and development of children**, meaning that such claims must be removed from all products produced after 1 July 2007. However, a Commission Proposal[3] has been put forward to amend the Regulation[4] and introduce a transitional period for food claims made on children's nutrition and health.

The European Parliament subsequently has requested a briefing note assessing the impacts of introducing a transition period for claims referring to children's development and health after a short period of prohibition on both industry and consumers. This has been done by interviewing industry organisations which represented a large part of industry (both large companies and SMEs), individual companies within the sector, consumer organisations as well as health organisations.

The main findings of the impact assessment are as follows:

- **The transitional period is unanimously welcomed by industry organisations representing both large and small companies, as well as individual companies**. The main arguments as to why the transition period should be introduced are that it is standard procedure and in accordance with the rule of proportionality that whenever EU regulation is put into force, there are transitional periods to enable the affected companies to make the necessary changes to live up to the regulation. The only exception to such principle is the situation where safety is at stake and this seems not to be the case for labelling and claims on products which have been on the market for a significant amount of time without leading to any complaints from consumers or consumer organisations. Moreover, even though the majority of SMEs have already complied with regulation in terms of changing their labelling, they welcome the transition period as they will then have a chance to use their pre-printed labels.

[1] COM(2007) 279: "A Strategy for Europe on Nutrition, Overweight and Obesity related health issues"
[2] Regulation n° 1924/2006
[3] COM(2007)368 of June 2007
[4] Regulation n° 1924/2006 of 20 December 2006 (entered into force on 1 July 2006)

- **The transition period is perceived by some consumer organisations to provide better security for consumers as there is time for industry to substantiate their claims properly**. Consumer organisations are well aware that it is not possible for industry to make changes (which may be complicated) overnight. The transition period is therefore viewed by some as an improvement of the Regulation, as the food operators will then have time to substantiate the claims and obtain the necessary scientific proof, which in the end will be an advantage for consumers in general. However, **several consumer organisations and all of the interviewed health organisations believe that the transitional period will jeopardise consumer safety and health.** First of all, they believe that the protection of consumer safety and health is best served by upholding the ban of these specific kinds of claims. Products may continue to be marketed, but without the unsubstantiated claims, which also implies that market disruption is unlikely to occur. In addition, allowing the usage of health claims for an extended period of time might, according to the health organisations, result in an increase in obesity among children, or at best be counterproductive to the reduction of this problem. Introducing a transitional period will thus work against the European strategy of reducing obesity among children[5].

[5] COM(2007) 279: "A Strategy for Europe on Nutrition, Overweight and Obesity related health issues"

1. Introduction

New rules on nutrition[1] and health claims[2] on food products entered into force on 1 July 2007. The enforcement of the Regulation included a transitional period for most food claims with the exception of claims referring to children's development and health. Subsequently, in June 2007 a transitional period for claims referring to children's development and health was proposed by the European Commission. The objective of the present briefing note is to assess which impacts the proposed transitional period will have on industry and consumers, respectively.

1.1 The Regulation on nutrition and health claims made on foods

EC Regulation n° 1924/2006 on nutrition and health claims (hereinafter the Regulation) is a part of the EU wide strategy of reducing ill health due to poor nutrition, overweight and obesity[3], which is substantiated in a White Paper on a *"Strategy for Europe on Nutrition, Overweight and Obesity-related Issues"*. In this context, an important issue relates to whether the information about foods and their nutritional value appearing on the labelling (nutrition and health claims) is clear, accurate and meaningful, so that it might help consumers choose the correct diet.

One of the primary aims of the Regulation was thus to harmonise Community rules on the use of nutrition and health claims on foods (including food supplements) marketed within the European Union, in order to protect consumers from false and misleading claims and enable free movement of goods within the Community[4].

1.1.1 *Consumers*

The Regulation sets out to protect consumers from false and misleading claims by providing a more transparent rules system. The Regulation ensures that equal standards govern nutrition and health claims across the Community, thereby enabling consumers to make safe and informed food choices on the basis of accurate and scientifically substantiated claims. Furthermore, the Regulation introduces a framework which stipulates that claims that do not meet specified requirements or exaggerate a food's expected health benefits and/or are not substantiated by scientific evidence (approved by the EFSA[5]) shall no longer be permitted. Harmonised rules on labelling were in this manner intended as a means to protect consumers against false claims used in marketing and/or prevent unfounded claims on food packages.[6]

[1] "A nutrition claim means any claim which states, suggests or implies that a food has particular beneficial nutritional properties due to the energy, nutrients or other substances provided, not provided or provided in reduced/increased amounts" (Regulation No 1924/2006, Article 2, §2)
[2] "A health claim is any claim that states, suggests or implies that a relationship exists between a food category, a food or one of its constituents and health." (Regulation No 1924/2006, Article 2, §2)
[3] COM(2007) 279: "A Strategy for Europe on Nutrition, Overweight and Obesity related health issues"
[4] Regulation No 1924/2006
[5] European Food Safety Authority.
[6] www.fsai.ie/industry/hn_claims/hn_intro.asp

Consumers are increasingly becoming interested in their diet, its relationship to health and, more generally, the composition of foods that they are selecting. Seen in connection with the EU wide strategy of reducing ill health due to poor nutrition, overweight and obesity, this is a tendency the EU seeks to enforce. Appropriate labelling is in this respect regarded as a means to help consumers in the right direction towards adopting a healthy diet by facilitating positive and informed choices. However, labelling and claims may also be used as a marketing tool, which means that some consumers might be misled by claims that have not been appropriately substantiated.[1] For these reasons it is important that information about foods and their nutritional value appearing on the labelling (nutrition and health claims) is clear, accurate and meaningful.[2]

1.1.2 *Industry*

The absence of specific guidelines at the EU level on nutrition and health claims had prompted many Member States to adopt independent measures to regulate their use. This resulted in a high increase in the number and type of claims appearing on food labels. The differences between national provisions on such claims were thought to hinder the free movement of goods, creating unequal conditions of competition for industry.[3] Industry would benefit from a harmonisation of Community rules because it would create a single legal framework, which would increase legal security and transparency, and furthermore ensure fair competition in the food area.[4] This combined is expected to improve the effective functioning of the internal market by taking into account the importance for industry of having a predictable regulatory environment.

The Regulation controls nutrition and health claims by means of "positive lists" of authorised functional claims that can be made on food together with the criteria products must meet to use them. Claims must be scientifically substantiated and authorised by the EFSA in order to be put on the "positive list" of permitted claims which the European Commission will have drafted by 2010. These types of claims include those referring to: growth, development and the functions of the body; psychological and behavioural functions, and weight control.[5] For this reason, new products launched after 1 July 2007 by food producers in the internal market, if they wish the product to carry a nutrition or health claim, must now have such claims approved by the EFSA. ***A problem that emerged late in the negotiation of the Regulation was the insertion of controls on claims referring to children's development and health. This was included within the process for disease risk reduction claims which does not have a transition period.***

[1] www.NPICenter.com – ORAFTI Backs new EU Legislation on Nutrition & Health Claims Made on Foods
[2] www.fsai.ie/industry/hn_claims/hn_intro.asp
[3] Regulation No 1924/2006
[4] 2003/0165 (COD)
[5] EurActiv

1.2 The Commission proposal of amending the Regulation

Initially, no transition period was allowed for claims referring to the health and development of children, meaning that such claims must be removed from all products produced after 1 July 2007. However, a Commission Proposal COM(2007)368 (hereinafter the Proposal) of June 2007 has been put forth to amend the Regulation. The proposal consists of two amendments to article 14 and 28 of the abovementioned Regulation, with the purpose of providing an adequate transition period for health claims referring to children's development and health. Such a transition period was, according to the Commission, "unintentionally omitted from the main Regulation during the last phase of the adoption of the text".[1] The only existing transition measure currently available to claims referring to children's development and health concerns the products which were on the market or labelled before 1 July 2007. Hence, the transition period only applies to products physically present on the shelves or already labelled, but with no possibility of phasing out production. According to the Commission, this means that the absence of transitional measures for 'new' products will result in an interruption of the market and thus that allowing such a period should be regarded as a measure taken to ensure that the consumers have continued access to the products[2]. Furthermore, it is intended to provide economic operators (industry) with adequate time to ensure a smooth transition towards complying with the provisions of the regulation.[3]

1.3 Objective of the briefing note and the IA

The objective of this briefing note is to assess the impacts of introducing a transition period for claims referring to children's development and health after a short period of prohibition. The impacts will be assessed for both industry and consumers.

In order to best assess the impact of amending the Regulation, the European Parliament asked to have the following conducted:

1. An impact assessment of placing the ban (as of July 2007) without transitional period vs. providing traditional measures for claims referring to children's development and health.
2. An assessment of the effects of doing so on industry, e.g.
    a. Companies which comply with Regulation 1924/2006 and thus have changed their labels as of 1 July 2007 will have to change their labels again if the proposed amendments (COM(2007)638) would be accepted
    b. Companies that have not undertaken any efforts are privileged and can keep their labels. They have not suffered from any 'damage' related to complying with the Regulation
3. An assessment of the effects on consumers: will it have an impact on health? Does the transitional period provide enough security and will it ensure the protection of the group of consumers for which it is intended?

[1] COM(2007)368
[2] COM(2007)368
[3] COM(2007)368

2. Impact of existing Regulation compared with proposed changes

2.1 Placing the ban without a transitional period (the current situation)

The Regulation, which entered into force on 1 July 2007, states that if food producers launch new products in the internal market, and they wish the product to carry a nutrition or health claim, they must now have the claim approved by the European Food Safety Authority (EFSA).

By 2010 the Commission will draw up a 'positive list' of permitted health claims already approved in Member States. However, any claims referring to the reduction of disease risk or to **children's development and health** will have to be examined by EFSA and approved by the Commission as well as any other new claims not already included in the positive list. The authorisation of claims referring to children's development and health will thus be required on a case-by-case basis, following the submission of a scientific dossier to EFSA for assessment.

Initially, no transition period was allowed for claims referring to the health and development of children, meaning that from 1 July 2007 such claims must be removed from all products on the market.

2.1.1 *Industry*

The food industry is a dominant actor within the larger EU manufacturing sector where it plays a major role. Its contribution to the EU gross domestic product amounts to around 1.8% - the total share of the EU manufacturing sector in GDP amounted to 19.1% in 2004.[1] Figures for this same year indicate that the food industry reached a turnover of EUR815 billion and employed 3.8 million workers, thus making it the largest employer in the manufacturing sector. A large number of SMEs dominate the food industry: 99% of the enterprises are SMEs, and these firms employ 61% of the workers in the industry and account for 52% of the industry's total turnover.[2] More specifically, it is the micro-enterprises (1-9 employees) which make up the largest segment representing 79% of all companies. The small (10-49 employees) and medium sized (50-249 employees) companies account for 17% and 4% respectively, while the large companies (250+ employees) account for about 1% percent of all the companies in the European food industry.[3] As can be seen from above, small enterprises play a key role in this sector as around 80% of Europe's food products are produced in SMEs. These companies are traditionally represented by the UEAPME[4] who actively monitors the developments in the EU food legislation so as to ensure that the regulations affecting SMEs are fair, feasible and allow traditional SME food manufacturers to continue to produce food in traditional ways while ensuring consumer safety.[5] The SMEs traditionally produce fresh foods[6] while the picture is more mixed for the large companies; however, these primarily produce longer-lasting foods[7]. These large companies are typically represented by the Confederation of the European Food and Drink Industries (CIAA), and examples include Nestlé, HIPP, DANONE, PepsiCo, Kellogg's, Heinz etc[8].

[1] http://www.eurofound.europa.eu/pubdocs/2006/37/en/1/ef0637en.pdf
[2] http://www.ciaa.eu/documents/brochures/Data_&_Trends_2006_FINAL.pdf
[3] http://www.ciaa.eu/documents/brochures/Data_&_Trends_2006_FINAL.pdf
[4] UEAPME, The European Association of Craft, Small and Medium-sized Enterprises
[5] http://www.eurofound.europa.eu/emcc/content/source/eu06026a.htm
[6] Interview with UEAPME, 16 November 2007
[7] http://www.ciaa.be/pages_en/about_ciaa/members.asp#comp
[8] http://www.ciaa.be/pages_en/about_ciaa/members.asp#comp

The general view by industry organisations and large companies such as HIPP, Kellogg's and Nestlé on the impacts for industry **is that the situation is legally uncertain for food producing companies**. **SMEs have generally adapted to the situation by changing their labelling**, but would welcome a transition period in order to be able to use their pre-printed labels. However, before moving on to discussing the impacts on industry regarding the current situation, emphasis will be put to another concern raised by industry, namely the lack of a clear definition of children's nutrition and health, as the definition also influences the impact felt by industry.

A concern regarding this Regulation put forward by industry is that they do not find food claims made on children's nutrition and health well defined. It is not clear to industry if claims made on children's nutrition and health relates to products marketed towards children - and, if so, what kind of products fall under this definition as most products related to children's development and health are believed to be marketed towards adults/parents. UEAPME states that it is their perception that any claim, other than those specific to aged persons, could be related to children's nutrition and health, and that they find it very difficult to define claims on children's nutrition and health. They thus had to change their labelling in general, as the distinction between claims relating to children's nutrition and health and other claims is very difficult to identify[1]. Consumer organisations also state that they lack a proper definition, as they believe that there is a great deal of uncertainty related to what defines a claim referring to children's nutrition and health and that a working definition is needed in order to enable consumers and industry alike to make distinctions between claims related to children's and "adult" nutrition and health.[2]

The same is true for the Confederation of the European Food and Drink Industries (CIAA) which represent the majority of the large companies in the industry and speaks on behalf of the industry organisations CEEREAL and CAOBISCO as well. CIAA mentioned a possible definition, which is currently being discussed by the Commission and the Member States. These two parties are currently discussing a guidance document, which proposes that claims relating to children's development and health should be claims true only for children. For instance, if there is a scientifically established link between vitamin A acid and health, which is true only for children, it is a food claim relating to children's development and health. Hence, the definition of claims relating to children's nutrition and health is not that a product is *marketed* towards children, but that a *scientific linkage* is established. If the definition is agreed upon, it however remains to be seen how this definition will be handled in practice – whether for instance all claims that potentially only relate to children will have to be examined. This obviously will have an impact on industry as to how large a part of their claims will need to be substantiated. However, neither UEAPME nor the consumer or health organisations have approved it. What all the industry organisations and the consumer organisations which have been interviewed however agree on is that they feel the need for a better definition on what is included in claims related to children's development and health.

After this initial discussion the next step is to discuss the impacts stemming from the current situation where no transitional period is allowed for food claims referring to children's development and health. The impacts for industry are mainly that they will have to stop introducing products to the shelves that do not meet the regulatory requirements. These products may be put back again once the claims have been examined by EFSA and approved by the European Commission.

[1] Interview with UEAPME, 16 November 2007
[2] Interview with BEUC, 16 November 2007 and Danish Consumer's Council, 23 November

Legal uncertainty

Industry in general feels that the current legal situation - without the transition period - is rather uncertain. Some producers are waiting to see if the situation will change (primarily large operators) while others are either starting to draft applications for approval or have already complied with the regulation and changed their labelling (the latter is primarily true for SMEs).

CIAA, which represents a large part of industry[1], states that Food Business Operators (FBO) are on stand-by, meaning that strictly speaking some of the products on the market bear a label that is not in line with the current EU provisions. They are waiting to see if the situation will change, as CIAA drew the attention of the EU institutions to the lack of transition period on 24 April 2006 in an open letter on amending the Regulation on nutrition and health claims on foods.[2] According to CIAA, there is no legal certainty for FBOs at the moment.[3]

As of now, any claim made on children's nutrition and health that is not substantiated can be challenged at any time and the producer will thus either need to demonstrate that it is substantiated or change the labelling. This is believed by CIAA to be disproportionate as they state that the lack of a transition period for food claims referring to children's development and health means that these claims can be challenged on the basis of procedural grounds only. This, according to CIAA, means that enforcement authorities can strictly speaking get these products off the market (or rather, prevent FBOs from introducing more products to the market) even if the FBO can prove that the claims are well understood by the consumer, i.e. not misleading. CIAA therefore believes that the lack of a transition period has put a disproportionate legal uncertainty on the FBOs. CIAA stresses that it is not a matter of FBOs being unwilling to comply with the new Regulation; it is just a matter of giving them sufficient time to be able to do so.

A large part of industry shares these views, which makes CIAA a powerful organ representing industry. In this impact assessment, their statements represent the European Breakfast Cereal Association (CEEREAL), the Association of Chocolate, Biscuit and Chocolate Nuggets Confectionery Industries of the European Union (CAOBISCO) as well as the large companies HIPP, Kellogg's and Nestlé.

The part of industry that is not on hold has slowly started to put resources into drafting applications for approval of claims and has thus put resources into getting the approval from the European Commission. However, so far the only changes on the market have been introduced by SMEs. **SMEs have generally changed their labels while larger companies are still in the process of getting approval for their claims** and SMEs are thus the only group within industry that seems to have complied fully with the demands of the Regulation by re-labelling all their products. This has primarily been done as it is in general too expensive for SMEs to apply for Commission approval. The main impact has thus been the need to change the labelling and that the old labels are now worthless. It has affected the majority of SMEs within the industry in Europe, as virtually all SMEs have changed the labels, according to their industry organisation UEAPME.[4]

[1] According to interviews performed in the context of this assessment, CEEREAL, CAOBISCO, HIPP, Kellogg's and Nestlé fully support the statements made by CIAA

[2] http://www.ciaa.eu/documents/newsletters/open_letter_jcm_nut_&_hc.pdf

[3] Interview with CIAA, 14 November 2007

[4] Interview with UEAPME, 16 November 2007. UEAPME has further discussed the questionnaire with member organisations from Italy, France, Luxembourg, Germany, Denmark, Austria, UK and the Netherlands

The impacts on industry as a result of the current Regulation without a transition period vary across the EU. Scandinavian countries, UK and the Netherlands already have a rather strict regulation on food claims in place and the impacts on industry will thus be limited. For instance, the British Retail Consortium (BRC)[1] states that, in general, the food producers in the UK live up to the regulation on claims and the impacts on industry have therefore not been large. In contrast, Member States in Southern and Eastern Europe as well as Germany face greater challenges, because of the way food is marketed or produced in these countries. For instance, in Germany, food producers are adding vitamins and minerals to candy and promoting the products as healthy. Thus, for industry the legal uncertainty and the effort that should be put in substantiating the claims are mostly felt in Southern and Eastern Europe as well as Germany. However, it should here be noted that one of the reasons for introducing the Regulation was that the lack of harmonisation within this area has prompted Member States to adopt independent measures to regulate their use, which has resulted in a high increase in the number and type of claims appearing on food labels. This has been true in all the Member States, and thus the statement that Southern and Eastern Europe face greater challenges than the Scandinavian Member states as well as UK and the Netherlands should be taken with a grain of salt.

2.1.2 *Consumers*

In general, harmonisation of the Member States' regulation on food claims is welcomed by the consumer organisations as well as the health organisations[2]. However, consumers have not yet felt a tangible effect on the market. It is clear to the consumer organisations that there is much movement in the industry where the companies seem to be adjusting to the new requirements and submitting the list of health claims to the experts. It is, however, too soon to see an effect on the market and thus, impacts on the consumers are still too early to be seen. Along these lines, it is however the impression of the Danish Consumers Council[3] that industry, while adjusting to the new requirements, is also testing the limits of the regulation by exploiting any vagueness in the formulation.

Consumer organisations generally feel that the current situation, where the ban has been introduced without a transitional period, has not changed much. This is partly due to the fact that industry has only slowly started to gather information to obtain the approval from the European Commission, or is on stand-by as they are waiting to see if the transitional period will enter into force. In addition, according the consumer organisation NCC, industry in general – also before the Regulation – has been doing well in not imposing misleading claims on their products[4]. The latter statement supports the initial reasoning behind the Regulation, namely that the Member States have imposed more and more regulations on the food area, and that the Regulation mainly had the aim of harmonising the rules.

[1] Interview with BRC, 9 November 2007

[2] Interview with BEUC, 16 November 2007 (BEUC represents 40 national consumer organisations from over 30 EU, EEA and applicant countries), NCC, 9 November 2007, EHN, 21 November 2007, Danish Consumer Council, 23 November 2007, BMA, 28 November 2007, EPHA, 29 November 2007, and UNAF, 26 November 2007

[3] Interview with the Danish Consumer Council, 23 November 2007

[4] Interview with NCC, 9 November 2007

The health organisations[1] interviewed believe that the current legislation is a step in the right direction towards increased consumer protection. Studies[2] and interviews[3] have shown that claims are an important aspect in consumer choices. They acknowledge that industry will have difficulties in substantiating claims without a transitional period, but nonetheless feel that consumers are better protected by upholding the lack of transition period on claims relating to children's nutrition and health. This is mainly due to the fact that the interviewed health organisations in general believe that the current health claims on food are misleading, which makes it harder for consumers to choose the correct diet. Thus, the health organisations do not agree with the consumer organisations that industry has been doing well in not imposing misleading claims on their products. For health organisations, the Regulation as it is without the transitional period is thought to help consumers improve their choice of diet, by removing claims which could potentially be damaging to their health. As for the possibility of market disruption being a consequence of this lack of transitional means for products with unsubstantiated claims, health organisations find this highly unrealistic, as the Regulation only requires industry to remove claims on new goods produced until these have been scientifically substantiated – and not remove products from the market entirely or remove products already present at the shelves. Hence, products may continue being marketed, however, without the unsubstantiated health claims.

2.2. Providing transitional measures for claims referring to childrens' development and health

The European Commission adopted on 28 June 2007 a proposal to allow a two-year transitional period for the claims referring to the health and development of children, bringing this area in line with the other areas covered by the Regulation, where a transitional period is already in place. According to the Commission, "this was unintentionally omitted from the main regulation during the last phase of the adoption of the text"[4]. The European Parliament, during official inter-institutional meetings, took for granted that the decision to refrain from a transitional period for claims referring to children's development and health was thoroughly a choice to protect vulnerable group from misleading claims.

2.2.1 *Industry*

In general, companies have chosen to comply with the Regulation in three different ways:

- most SMEs have changed their labelling completely; while
- other (larger) companies, because of the perceived legal insecurity, have chosen to either await the final outcome of the current deliberations, or
- have slowly begun to gather evidence in order to get the necessary approvals from the European Commission.

[1] Interview with among others L'Union Nationale des Associations Familiales (UNAF), 26 November 2007, Baby Milk Action, 28 November 2007, and EPHA, 29 November 2007

[2] e.g. BEUC: Report on European Consumers' Perception of Foodstuffs Labelling - Results of Consumer Research conducted on behalf of BEUC from February to April 2005, 31 August, 2005

[3] Interview with the Danish Consumer Council, 23 November 2007

[4] COM(2007)368

Reaction 1: Change of labelling

As mentioned, the change of labelling has mainly been done by SMEs. UEAPME, which represents the majority of SMEs in Europe, states that virtually all SMEs have changed their labelling to comply with the Regulation. As previously mentioned, it is not realistic for the SMEs to have their claims approved by EFSA, as this is too costly. Hence, the way of dealing with the new Regulation for SMEs was to change their labelling and keep the content intact.

For SMEs, a transitional period will mainly imply that the producers can use their pre-printed labels. In addition, for SMEs producing goods with pre-printed labels, the introduction of a transitional period is believed to be sufficient for them in order to use their pre-produced labels and thus avoid the costs of just discarding their labels. UEAPME and its members are thus in favour of the transitional period, and find the one stipulated in article 28 of the Regulation to be sufficient for SMEs with products relating to children's development and health.

If the proposal with the transitional period enters into force the companies will likely change their labels back in order to use their pre-printed ones. However, this change is not seen by UAPME as bringing about significant extra expenses as the labels are already printed and the new labels will be saved for later use. It is more expensive to just throw away the pre-printed labels. Hence, the transitional period is generally beneficial to SMEs.

As practically **all SMEs have already complied with the new Regulation it is not likely that some companies will have a comparative advantage over others when changing their labels back**. They have the pre-printed labels in stock and they do have the labels with the new claims in stock as well, so in the long run the transitional period will only mean that they will get to use all of their labels. They will initially not get a competitive disadvantage compared to the large companies who have not yet changed their labelling, as they have the possibility of using both the new and the old labelling. Moreover, SMEs traditionally produce fresh foods whereas the large companies to a large extent (but not only) produce food with a longer durability, which means that SMEs and large companies to some extent are targeting different segments of the food industry.

Reaction 2: Awaiting the outcome

Introducing a transition period will mean that industry will gain legal security in terms of not facing a situation where any claim that is not substantiated can be challenged at any time. Moreover, food producers will not need to face the issue of being able to demonstrate that their product claims are substantiated. As this is very important to industry, a large part of the companies are currently awaiting the situation and thus the main impact on these companies would be the improved legal situation, i.e. a positive impact.

CIAA – their views representing a large part of industry organisations as well as large companies - states that discussing which impacts the transitional period will have on industry is not relevant here as this is a matter of correcting wrong legislation. This has to do with the fact that all new legislation coming from the European Union has a transitional period. Thus, to CIAA, it is a matter of proportionality. The only exception to this principle is the situation where safety is at stake, which does not seem to be the case for labelling and claims on products which have been on the market for a significant amount of time without leading to any complaints from consumers[1].

[1] Interview with CIAA, 14 November 2007

Reaction 3: Begun to gather evidence

Companies not awaiting the situation have started to submit a list of health claims to their national experts in order to get the necessary approvals from the European Commission. The situation, if the transitional period entered into force, would therefore mainly be to ensure that the companies enjoy legal security while working on substantiating the claims.

As most of these companies have just started to submit the list of health claims to the experts in order to get the necessary approvals from the European Commission, the risk of some companies achieving a competitive advantage over the others as a result of not having complied with regulation is quite limited.

In general, with the transitional period, companies will have the time to finish what they started, which means that they will have sufficient time to get the approval from the Commission. Some of the consumer and health organisations, however, have difficulties in seeing the real impacts for industry. They state that new products simply have to be placed on the market without the illegitimate claims, which is only a matter of changing the labelling. Moreover, they do not expect any market disruption to occur as the same products, with the same content, can remain on the market, only with changed labels. In principle, all companies could follow the example of the SMEs.

2.2.2 *Consumers*

Most of the interviewed consumer organisations[1] welcome the transition period, as they are aware that it is not realistic for the food producers to obtain the necessary scientific proof without a transitional period. The transition period is therefore viewed as an improvement of the Regulation as the food operators will then have time to substantiate the claims and obtain the necessary scientific proof. Consumer organisations also added that they expect the substantiation of claims to be an on-going process and the situation will thus improve for the consumers on an on-going basis as well. The changes may be complex and cannot happen overnight. There are a lot of claims on the market that are unsubstantiated but this will not change overnight and the consumer organisations are aware of this and understand this, and emphasise that they would rather have the claims substantiated properly than having products taken off the market and later reintroduced.

However, some consumer organisations[2] and all interviewed health organisations strongly oppose the transition period. From the consumer side, the Danish Consumer Council disagrees with its European colleagues on the subject of the transition period, as they believe the protection of consumer safety and health is best served by upholding the ban of these specific kinds of claims. Products may continue to be marketed, but without the unsubstantiated claims, which also implies that market disruption is unlikely to occur. It is in this regard worth noticing that the BEUC, which did welcome the transition period, has previously published a report on European consumers' perception of foodstuffs labelling, where one of the main conclusions was that claims are one of the most influential factors in consumer choices, in terms of nutrition, and that the majority of consumers trust the claims on the package, mainly because they trust the brand, and believe they understand their meaning.[3]

[1] BEUC and NCC
[2] Notably the Danish Consumer Council
[3] BEUC: Report on European Consumers' Perception of Foodstuffs Labelling - Results of Consumer Research conducted on behalf of BEUC from February to April 2005, 31 August, 2005

The BEUC continues by stressing that the results underline the importance of the Regulation on health and nutrition claims, and particularly the provisions on nutritional profiles and prior approval for new types of claims. Since these claims are so influential and so powerful in their effects on buying behaviour (especially for trusted brands), they merit careful regulation to prevent abuse, misunderstanding or misinterpretation[1]. They further state that positive claims for one or a few nutrients without reference, for example, to high levels of added sugar, salt or fat will inevitably (as shown in the survey responses) encourage inappropriate consumer choices.[2] Thus, the organisation has previously advocated strongly for clear regulation in the field and has been seriously worried that the claims will lead consumers to make unhealthy choices, but do however still believe that the transition period is acceptable for consumers.

In this respect, EPHA[3] states that their perception of the Regulation was to improve health in the European population by supporting healthy choices. In order to support this, the Regulation needs to build consumer confidence quickly. EPHA finds that a transition period is likely to be confusing to the consumers as it would communicate to the consumers that for a certain period of time, products can be marketed with the current claims but later, a different set of criteria will apply. Moreover, the transition period is perceived by EPHA to be counterproductive to the effort of promoting healthier foods being marketed to consumers. EPHA believes that the key message to consumers should be that the EU institutions have acted decisively to clarify what type of health and nutrition claims can be made on food products[4]. In this connection, EPHA believes that any transition period adds complexity to the message and reduces the market incentive for companies to meet the criteria.[5] EPHA does not believe that a transition period is beneficial to consumers in any way.

With respect to impact on consumers' health, a majority of consumer organisations[6] state that, in theory, when the transitional period is over, only properly substantiated claims will be on the market and the consumers will be able to make better informed choices. However, according to some consumer organisations, it is a well-known fact that consumers make irrational choices (meaning that they buy unhealthy products even though they are well aware that it is not good for their health), and thus the real impact on consumers' health is limited, which means that consumers' health is not likely to be jeopardised by the transitional period.. However, this should be seen in the light of the BEUC report which states that claims are one of the most influential factors in consumer choices and thus that they do have an impact on consumer health. The Danish Consumer Council does moreover not agree with the other consumer organisations. Instead, they state that claims can mislead consumers in terms of the health benefits of the product. Hence, by introducing transitional measures on claims referring to children's development and health, unhealthy products may mislead the parents into thinking that these are actually healthy, thus contributing to obesity problems among children. However, the Council also stresses that the impacts are mainly speculative[7].

[1] BEUC: Report on European Consumers' Perception of Foodstuffs Labelling - Results of Consumer Research conducted on behalf of BEUC from February to April 2005, 31 August, 2005
[2] BEUC: Report on European Consumers' Perception of Foodstuffs Labelling - Results of Consumer Research conducted on behalf of BEUC from February to April 2005, 31 August, 2005
[3] The European Public Health Alliance
[4] Interview with EPHA, 29 November 2007
[5] Interview with EPHA, 29 November 2007
[6] Interview with BEUC, 16 November 2007 and NCC, 9 November 2007
[7] Interview with the Danish Consumer Council, 23 November 2007

Again, the food regulation differs among the different Member States, so consumers in the UK, the Scandinavian countries and the Netherlands already experience a high level of protection while in the Southern and Eastern Member States as well as Germany, the level of protection is lower.

The consumer health organisations agree with the Danish Consumer Council when it comes to impacts on consumer health, as they think that a transitional period could have several unwanted consequences, and are therefore in strong opposition to the Proposal to amend the current Regulation. Allowing the usage of health claims for an extended period of time might, according to the health organisations, result in an increase in obesity among children, or at best be counterproductive in lessening of this problem. This is mainly due to the fact that the usage of such labelling might enforce the consumption of products bearing unsubstantiated claims, meaning that products which are in fact nutritionally unhealthy remain a part of children's diet throughout the transitional period, which can potentially enforce obesity.[1] Baby Milk Action states in this regard that health claims are believed to be an obstacle to the consumption of basic, healthy foods such as vegetables and fruit, as consumer's purchasing patterns are easily influenced by the claims, thus again leading to a negative impact on children's health. EPHA notes, along the same lines, that the transition period is not likely to produce positive impacts on children's health, and given that the goal of the legislation is to encourage behavioural change by empowering consumers to buy food items, with confidence, based on their health and nutrition claims, a transition period means according to EPHA that the desired behavioural change may be delayed. The basic measurement of consumption patterns - obesity - will also not show the desired positive outcome[2].

With respect to consumer safety, the health organisations and one of the consumer organisations state that a transition period does not provide enough safety to children. As children are regarded as a vulnerable consumer segment in the sense that nutrition is of great importance especially in childhood, and as nutrition is a topic of special importance (in terms of its impact on children's health and development), it is considered necessary by the health organisations to have rules to ensure the safety of this segment, which is believed to be nest ensured by avoiding a transitional period. Other consumer organisations state that it is on the one hand naturally in the consumer's interest that the transition period is a short as possible, but on the other hand, the best security for consumers is that industry has enough time to comply with regulation and substantiate claims properly, thus only having substantiated food claims on the market after the transitional period. The opinion of these consumer organisations is that it might as well be done properly the first time, which increases consumer safety in the long run. The consumer security may however be affected by the SMEs' re-change of labelling, if the transition period enters into force.

In terms of the transitional period ensuring enough protection for the group of consumers for which it is intended, the consumer organisations had trouble discussing this as food claims relating to children's health and development is believed to be poorly defined. However, the majority of them agreed that in general, the best thing for the consumers is if industry has sufficient time to get their claims properly substantiated.

[1] Interview with Baby Milk Action, 28 November 2007, and EHN, 21 November 2007
[2] Interview with EPHA, 29 November 2007

A conflicting view was put forward by the health organisations which stated that a three year transitional period is a long period, as the improvement and preserved good health among children is thought to be a matter not to be postponed. Furthermore, with some health claims, as in the cases of the SMEs, simply removed, the health organisations believe that if these suddenly re-appear it would be a source of ambivalence to consumers in regard to their purchasing decisions and thus their safety.

3. Conclusions

The above discussions can be summarised in the following table:

No transition period (current situation)	Transition period
Pros **Industry** • Harmonisation of rules across the community is generally seen as supportive of a competitive environment. **Consumer/health** • Children's nutrition, health and development will be protected by removing unsubstantiated health claims. • Regulation of health claims will prevent future misleading and unsubstantiated claims from being marketed. • Harmonisation of rules is seen as an improvement of consumer protection in general, with the effects however yet to be seen.	**Pros** **Industry** • Ensure smooth transition to compliance with rules by enabling industry to substantiate claims. • Increased legal security – claims may not be banned on procedural grounds only. • Avoid market disruption, i.e. products temporarily withheld until substantiated • Stock of pre-printed labels may be phased out • No significant competitive disadvantages for companies already complying with legislation. **Consumer/health** • Ensure fully substantiated claims at end of transitional period (wide-ranging scientific proof)
Cons **Industry** • Disproportionate restrictions on current and future products bearing unsubstantiated claims. • Lack of transitional period could mean market disruption for products with claims in question. • Unclear definition of which claims refer to children: what constitutes a 'child' and is it a question of marketing or scientific linkage? • Disproportionate legal uncertainty: Claims may be challenged on procedural grounds only – not by scientific evidence.	**Cons** **Consumer/health** • Allowing claims could be counterproductive to community effort to improve health and reduce obesity among children. • Three year transitional period may have negative impact on children's development, and should therefore not be allowed. • Reintroduction of claims could create uncertainty among consumers in terms of nutritional reliability of claims in general.

First of all, industry organisations and consumer organisations agree that they have difficulties in defining food claims related to children's nutrition and health. There should be an increased focus on agreeing on such a definition.

A transitional period is generally welcomed by industry organisations (representing both small and large companies). UEAPME, representing SMEs, states that a transition period will allow them to use their pre-printed labels, and the larger companies will have sufficient time to properly have their claims substantiated. The transition period is moreover welcomed as the current situation is believed to create legal uncertainty for industry.

The absence of a transitional period is perceived by CIAA – and thereby a large number of industry organisations and large companies – to be against the rule of proportionality and harmful to food producers. Normally, whenever EU Regulation is put into force, there are transitional periods to enable the companies in question to make the necessary changes to live up to the regulation. The only exception to such principle is the situation where safety is at stake and this seems in the eyes of CIAA not to be the case for labelling and claims on products which have been on the market for a significant amount of time without leading to any complaints from consumers or consumer organisations.

Many companies have started the process of getting their products approved by the European Commission but very few (if any) have yet removed products from the market. Others are still on stand-by as they are waiting to see if the transitional period will enter into force. Thus, **competitive advantages for those who have not yet complied with the Regulation are limited**, as none of them are at a stage of removing products from the shelves and the approval of claims will have to be obtained regardless of the introduction of the transitional period.

The only exception to the above is SMEs who do not have the financial possibilities to get scientific approval. Thus, their only possibility is to change their labelling which they all have done according to UEAPME. If the transition period enters into force, it is UEAPME's perception that the **SMEs will not initially suffer from a competitive disadvantage** compared to the large companies who have not yet changed their labelling, as they have the possibility of using both the new and the old labelling. SMEs benefit very little from the resolution of not having to remove the products already on the market to re-label these, as SMEs traditionally produce fresh food.

Some of the consumer organisations welcome the transition period, as they are well aware that it is not possible for industry to make changes (which may be complicated) overnight. The transition period is therefore being viewed as an improvement of the regulation as the food operators will then have time to substantiate the claims and obtain the necessary scientific proof. The consumer organisations sharing this view acknowledge that it is not realistic for the food producers to obtain the necessary scientific proof without a transitional period. Also, the substantiation of claims is expected to be an on-going process and thus the consumers will experience improvements in food claims on an on-going basis as well. Thus, consumer security is in general high as it is the perception of the consumer organisations that the transition period will provide better security for consumers as products are not taken off the market and put back on later in the process.

Other consumer organisations however believe that the protection of consumer safety and health is best served by upholding the ban of these specific kinds of claims. Products may continue to be marketed, but without the unsubstantiated claims, which also implies that market disruption is unlikely to occur. The health organisations support this viewpoint.

With respect to the impact on consumer's health, most consumer organisations state that in theory, when the transitional period is over, only properly substantiated claims will be on the market and the consumers will be able to make better informed choices. However, according to the consumer organisations it is a well-known fact that consumers make irrational choices, and thus the real impact on consumer's health is limited. This also means that the transitional period is not expected by the consumer organisations to be harmful to consumer's health.

However, the health organisations and some consumer organisations have a different view. The **health organisations agree that introducing a transitional period could jeopardise the health of young consumers as well as be counterproductive to effort of improving health and reducing obesity among children**. For this reason, they state that the real protection of consumers would not be to introduce a transition period, but instead uphold the initial ban on unsubstantiated claims referring to children's health and development. In addition, allowing the usage of health claims for an extended period of time might, according to the health organisations, result in an increase in obesity among children, or at best be counterproductive to the lessening of this problem. Introducing a transitional period will thus work against the European strategy of reducing obesity among children[1].

All in all, the transitional period is welcomed by industry organisations representing both large and small companies and individual companies, as well as some consumer organisations. The main arguments as to why the transition period should be introduced is that it is standard procedure and in accordance with the rule of proportionality that whenever EU Regulation is put into force, there are transitional periods to enable the companies in question to make the necessary changes to live up to the regulation, and that the transition period will provide better security for consumers as industry have sufficient time to properly substantiate the claims.

Opposing this view are some of the interviewed consumer organisations as well as all interviewed health organisations. They believe that it is only a matter of changing the labelling for industry (as the SMEs already have done) and that consumers will suffer far more from the transition period as children is a vulnerable consumer group where correct nutrition is crucial. Allowing the usage of claims referring to children's development and health for an extended period of time could result in an increase in obesity among children, or at best be counterproductive to the European strategy of reducing obesity among children.

[1] COM(2007) 279: "A Strategy for Europe on Nutrition, Overweight and Obesity related health issues"

List of abbreviations

BEUC	Bureau Européen des Unions de Consommateurs (European Consumers' Organisation)
BMA	Baby Milk Action
BRC	British Retail Consortium
CAOBISCO	Association of Chocolate, Biscuit and Chocolate Nuggets Confectionery Industries of the European Union
CEEREAL	European Breakfast Cereal Association
CIAA	Confederation of the European Food and Drink Industries
EFSA	European Food Safety Authority
EHN	European Heart Network
EPHA	European Public Health Alliance
FBO	Food Business Operators
IBFAN	International Baby Food Action Network
NCC	National Consumer Council, UK
SME	Small and Medium-sized Enterprises
UEAPME	European Association of Craft, Small and Medium-sized Enterprises
UNAF	L'Union Nationale des Associations Familiales (National Union of Family Associations), France

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OVERVIEW OF AND SHORT PRESENTATION OF THE INTERVIEWEES

Overview of the interviewees

Interviewee			Interview date
Organisation	**Name of interviewee**	**Title**	
CIAA	Sabine Nafziger	Director Consumer Information, Diet and Health Issues	14 November 2007
CEEREAL	Alexander Jess	Secretary General	13 November 2007
CAOBISCO	Pénélope Alexandre	Director Regulatory and Scientific Affairs	14 November 2007
HIPP	Alexander Maier	Legal advisor, Food Policy	15 November 2007
Nestlé	Josy Giordano	Food Advisor	15 November 2007
Kellogg's	Christina Flänsgård	Nutrition & Public Affairs Director	19 November 2007
UEAPME	Ludger Fischer UEAPME has further discussed the questionnaire with member organisations from Italy, France, Luxembourg, Germany, Denmark, Austria, UK and the Netherlands	Food Advisor	16 November 2007
BRC	Andrea Martinez-Inchausti	Assistant Director, Food Policy	9 November 2007
BEUC	Aleksandra Wesolowska	Food Assistant	16 November 2007
NCC	Jeff Allder	Senior Policy Advisor	9 November 2007
EHN	Susanne Logstrup	Director	21 November 2007
Danish Consumer Council	Camilla Udsen	Senior Food Adviser	23 November 2007
IBFAN/BMA	Patti Rundall	Policy Director	28 November 2007
EPHA	Tamsin Rose	Expert in public health, civil society development, advocacy and communication	29 November 2007

L'Union Nationale des Associations Familiales (UNAF)	Nicolas Revenu	Chair of the consumer working group, Representative to the European Consumer Consultative Group	26 November 2007

Short presentation of the interviewees

CIAA

CIAA is the Confederation of the European Food and Drink Industries and is the voice of these. CIAA membership is made up of 25 national federations, including 3 observers, 30 European sector associations and 20 major food and drink companies.

CIAA has been supported in their statements on the current Regulation and proposal by the following industry organisations and companies:

- **CEEREAL**, which is the European Breakfast Cereal Association. CEEREAL represents the breakfast cereal and oat milling industries towards the European Union and its institutions, industry and consumer associations as well as consumers. CEEREAL today counts 13 member associations in 12 European countries.
- **CAOBISCO** is the Association of Chocolate, Biscuit and Chocolate Nuggets Confectionery Industries of the European Union. CAOBISCO represents over 2000 companies manufacturing chocolate, biscuits and confectionery. This high number of companies produces a large turnover and engages in multiple activities, from the purchase of Community or international raw materials to exports and imports, all of which have to fit into a legal and economic framework, sometimes poorly defined or unfavourable to companies' development.
- **Nestlé**, with headquarters in Vevey, Switzerland is the world's biggest food and Beverage Company. Sales for 2006 were CHF 98.5 billion, with a net profit of CHF 9 billion. Nestlé employ around 265,000 people and have factories or operations in almost every country in the world. Nestlé is the producer of a portfolio of baby food solutions, and for this reason an important actor in regard to the question of health claim referring to children.
- **HIPP** is the world's largest and only fully certified producer of organic baby food solutions. They, like in the case of Nestlé, have a wide portfolio of baby food solutions, and have for this reason extensive experience with claim referring to children's development and health.
- **Kellogg's**: With 2006 sales of almost $11 billion, Kellogg Company is the world's leading producer of cereal and a leading producer of convenience foods, including cookies, crackers, toaster pastries, cereal bars, fruit snacks, frozen waffles, and vegetarian foods. Kellogg products are manufactured in 17 countries and marketed in more than 180 countries around the world.

UEAPME

UEAPME is the European Association of Craft, Small and Medium-sized Enterprises and is the employer's organisation representing the interests of European crafts, trades and SMEs at EU level. UEAPME is a recognised European Social Partner. It is a non-profit seeking and non-partisan organisation. As the European SME umbrella organisation, UEAPME incorporates 84 member organisations consisting of national cross-sector SME federations, European branch federations and other associate members, which support the SME family. UEAPME represents more than 12 million enterprises, which employ around 50 million people across Europe.

BRC

The British Retail Consortium (BRC) is the lead trade association representing the whole range of retailers, from the large multiples and department stores through to independents, selling a wide selection of products through centre of town, out of town, rural and virtual stores.

BEUC

BEUC is the European Consumers' Organisation or the "Bureau Européen des Unions de Consommateurs". In 2007, BEUC's members include 40 independent national consumer organisations from some thirty European countries (EU, EEA and applicant countries). BEUC acts as a sort of "embassy" for these organisations in Brussels and their main task is to represent their members and defend the interests of all Europe's consumers. BEUC takes the view that the relationship between consumers and suppliers of goods and services should be based on fairness and should strive to create the right conditions for consumers to make independent decisions.

BEUC also formally represents consumers within the decision-making process. BEUC has a seat on the **European Consumer Consultative Group (ECCG)** and experts from our member organisations participate in various European Commission advisory groups.

NCC

The National Consumer Council in the UK has a mission of helping the consumers get a better deal by making the consumer voice heard. NCC's objectives are to put users at the heart of public services, make markets work for consumers, ensure that disadvantaged and vulnerable consumers get a fair deal and to achieve more sustainable consumption.

EHN

The European Heart Network (EHN) is a Brussels-based alliance of heart foundations and likeminded non-governmental organisations throughout Europe, with member organisations in 26 countries.

DANISH CONSUMER COUNCIL

The Danish Consumer Council represents the interests of consumers and is independent of public authorities and commercial interests. Founded in 1947, the Consumer Council is the spokesperson for consumers' interests, lobbying vis-à-vis the Government, the Parliament, public authorities and the business community.

BMA

Baby Milk Action is a non-profit organisation which "aims to save lives and to end the avoidable suffering caused by inappropriate infant feeding". Baby Milk Action works within a global network to strengthen independent, transparent and effective controls on the marketing of the baby feeding industry.

The global network is called IBFAN (the International Baby Food Action Network) a network of over 200 citizens groups in more than 100 countries.

EPHA

The European Public Health Alliance (EPHA) is an international non-profit association registered in Belgium. EPHA) represents over 100 non-governmental and other not-for-profit organisations working in support of health in Europe. 35 EPHA members are pan-European or international networks. EPHA aims to promote and protect the health interests of all people living in Europe and to strengthen the dialogue between the EU institutions, citizens and NGOs in support of healthy public policies.

UNAF

UNAF, the French National Union of Family Associations (L'Union Nationale des Associations Familiales), is the national institution responsible for promoting, defending and supporting the interests of all the families living within the French territory, independent of their religion or political views. Being a union, and not a federation of associations, UNAF gives the families the possibility to express global, innovative and strong family policies in their full diversity. UNAF moderates a network of 22 Regional Unions of Family Associations (URAF) and of 100 Unions of Family Associations in the French Departments (UDAF), and supports them in fulfilling their institutional tasks and in providing services for the families.

APPENDIX 1 – Questionnaire Industry Organisations and Industry

1. How do you define food claims made on children's nutrition and health? Are there products in the 'grey area' where it is difficult to determine of these are included or not?

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2. What are the overall impacts on industry - what does it mean for industry that the transitional period may be introduced after a short period of prohibition? How will industry be affected?

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3. What situation is industry in now? In other words, will it be beneficial to industry to introduce the transitional period?

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_____

a. The current Regulation distinguishes between products that are already on the market (for sale) and products that are currently under production for future distribution. The former are not included in the regulation while the latter are. What impact does this have on industry's situation/the situation of your members?

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4. How large part of industry had made changes due to the prohibition (no. of companies)? What did it cost for the companies to make these changes?

a) What would it cost to change it back?

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5. If the transitional period is introduced, what will be the impacts on the companies who have made the changes compared to those who have not yet undertaken these changes? Will the latter have a competitive disadvantage compared to those who have complied with the Regulation?_____
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6. Which impacts will be felt by consumers if the transitional period enters into force (insecurity, lack of trust in brands etc.)?

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APPENDIX 2 – Questionnaire Consumer Organisations and Health Organisations

1. How do you define food claims made on children's nutrition and health? Are there products in the 'grey area' where it is difficult to determine of these are included or not?

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2. What is the situation for consumers now, without the transitional period for claims referring to children's development and health?

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3. Which impacts will be felt by consumers if the transitional period enters into force (insecurity, lack of trust in brands etc.)?

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4. The current Regulation distinguishes between products that are already on the market (for sale) and products that are currently under production for future distribution. The former are not included in the regulation while the latter are. What impacts does this have on consumers?

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5. Do you foresee that the transitional period will have an impact on consumers' health? More specifically, will it have an impact on obesity if children are to consume a product bearing a health claim for an additional year?

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6. Does the transitional period provide enough security and will it ensure the protection of the group of consumers for which it is intended (consumers of products relating to children's nutrition and health)?

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7. How have you perceived the companies' efforts to comply with the EC Regulation?