

**European Union Comments for the
CODEX COMMITTEE ON NUTRITION AND
FOODS FOR SPECIAL DIETARY USES**

Forty-first Session

Düsseldorf, Germany, 24 – 29 November 2019

Agenda item 8

**NRVs-R for Older Infants and Young Children
(CX/NFSDU 19/41/8)**

*European Union competence
European Union vote*

The European Union (EU) would like to thank Ireland, the United States of America and Costa Rica for preparing the discussion paper on NRVs-R for older infants and young children.

RECOMMENDATION 1

The age ranges for older infants and young children should be standardised throughout all relevant Codex texts as follows:

- *Older infants are aged from 6 months to not more than 12 months*
- *Young children are from the age of more than 12 months up to the age of 3 years (36 months)*

For the purposes of NRVs-R, this interpretation of when older infants become young children, is based on the point of differentiation being the end of the day on the 1st birthday. If agreement on this is difficult to achieve, the current wording of the specific age boundaries in the Codex texts should continue to be used (even though these age boundaries are not exactly the same across all Codex FSDU texts, the meaning is generally understood).

EU comments:

At CCNFSDU40, the age ranges that were presented were:

- Older infants: from 6 months to less than 12 months, and
- Young children: from 12 months to less than 36 months.

The age range definition in recommendation 1 differs. The EU supports the age definition of infants as less than 12 months and young children as from 12 months to less than 36 months.

The EU considers that there is merit to harmonise the definitions when an infant becomes a young child and until which age a person is considered to be a young child. The EU notes that currently in all relevant Codex texts, infants are considered to be persons of not more than 12 months of age (Standard for canned baby foods 73-1, Standard for processed cereal-based foods for infants and young children 74-1981, Guidelines on formulated complementary foods for older infants and young children CAC/GL 8-1991, Standard for infant formula and formulas for special medical purposes intended for infants 72-1981, Standard for follow-up formula CXS 156-1987, the text proposed for revision however includes the definition of an older infant). Therefore, most relevant Codex texts apply harmonized definitions. The proposed text would abolish the concept of “infants” in 4 Codex texts and replace it with a new concept of ‘older infants’ that is so far only included in the Guidelines on formulated complementary foods for older infants and young children CAC/GL 8-1991 and in the draft version for revision of the Standard for follow-up formula CXS 156-1987. The EU prefers to keep the established concepts and not to create new terminology.

In addition, the EU notes that currently in all relevant Codex texts, young children are considered persons from the age of more than 12 months up to the age of three years (36 months). (Standard for canned baby foods 73-1981 without the explanation “(36 months)”, Standard for processed cereal-based foods for infants and young children 74-1981, Guidelines on formulated complementary foods for older infants and young children CAC/GL 8-1991, Standard for follow-up formula CXS 156-1987). The EU considers that the age ranges are harmonised in the Codex texts, with the exception of the added specification of “(36 months)” next to “three years”. While for the sake of harmonisation, in the Standard for canned baby foods 73-1981 the explanation “(36 months)” could be added, the EU considers this addition not to be crucial or of a high priority.

RECOMMENDATION 2

The NRVs-R for older infants and young children be located in the Guidelines on Nutrition Labelling and apply to FSDU. Application of these NRVs-R to general foods require further discussion at plenary.

Note: While the majority of the eWG were in favour of applying these NRVs-R to general foods, a minority wanted these limited to FSDU only. One CM wanted application of NRVs-R to general foods for young children but not older infants.

EU comments:

The EU is concerned that the establishment of NRVs-R for infants and young children in the Guidelines on Nutrition Labelling may introduce uncertainties for nutrition labelling of certain foods that could be considered as foods for special dietary use. The location of the NRVs-R for infants and young children in the Guidelines on Nutrition Labelling which applies to all foods would practically lead to the creation of a new product category at Codex level that could legally be marketed according to Codex rules: foods that imply that they are intended for older infants and young children according to their labelling, but that are not covered by Codex Standards or Guidelines on foods for older infants and young children, nor by national or regional legislation on foods for older infants and young children. This can create a situation where consumers are misled, as they could not differentiate between

regulated and non-regulated products with regard to criteria that ensure that products are indeed suitable for older infants and young children.

Specific criteria, such as in relation to composition and labelling, are set to ensure that products targeting older infants and young children are suitable for this vulnerable age group. Other products that do not comply with those criteria could in parallel be placed on the same market. Allowing these products to use NRVs-R for older infants and young children on the label creates for consumers the impression that they are particularly suitable for older infants and young children without actually being so. The EU does not support the creation of a new category of “baby foods” outside the Codex texts or national or regional legislation, covering this age group by means of labelling foods with specific NRVs-R for infants and young children. The EU does not support to allow for declaration of vitamin and mineral content expressed as %NRV-R for 'general foods' targeting older infants and children.

When including the NRVs-R in the individual 4 Codex Standards and Guidelines mentioned below, the conditions for voluntary micronutrient declaration need to be individually considered and established for each Codex text in order to ensure that the conditions are suitable for the specific food category and for the vulnerable group of infants and young children. Simply transferring concepts that were established for the adult population to infants and young children may not necessarily be appropriate, for example, the volume of food eaten by infants is considerably lower in infants as compared to adults.

Therefore, the EU supports the establishment of a list of NRVs-R for infants and young children for voluntary micronutrient declaration under conditions to be determined within the frame of each of the texts for the following Codex Standards and Guidelines and locate them in the respective Codex Standards and Guidelines:

- Processed Cereal-Based Foods for Infants and Young Children
- Canned Baby Foods
- Formulated Complementary Foods for Older Infants and Young Children
- Follow-up Formula (under review)

RECOMMENDATION 3

RECOMMENDATION 3 The decision on whether these NRVs-R should be used to guide vitamin and mineral composition in the Guideline on Formulated Complementary Foods for Older Infants and Young Children, should be deferred until the General Principles are established. This will also allow consideration of the potential use of these NRVs-R as reference criteria for the optional addition of vitamins and minerals in other relevant FSDU texts.

EU comments:

The EU considers that the decision on whether NRVs-R for infants and young children should be used to guide vitamin and mineral composition in the Guideline on Formulated Complementary Foods for Older Infants and Young Children could be deferred. The EU does not support to use these NRVs-R as reference criteria for the optional addition of vitamins and

minerals in other relevant FSDU texts. The EU prefers that national and regional authorities preserve the flexibility to consider the NRVs-R as reference criteria for the optional addition of vitamins and minerals or to consider modified concepts that reflect national or regional nutrition and public health policies.

RECOMMENDATION 4

NRVs-R for older infants and young children should be established in the Guidelines on Nutrition Labelling and be used as reference criteria by jurisdictions where such claims are permitted

EU comments:

The EU is concerned that the establishment of NRVs-R for infants and young children in the Guidelines on Nutrition Labelling may introduce uncertainties for nutrition labelling of certain foods that could be considered as foods for special dietary use. The location of the NRVs-R for infants and young children in the Guidelines on Nutrition Labelling which applies to all foods would practically lead to the creation of a new product category at Codex level that could legally be marketed according to Codex rules: foods that imply that they are intended for older infants and young children according to their labelling, but that are not covered by Codex Standards or Guidelines on foods for older infants and young children, nor by national or regional legislation on foods for older infants and young children. This can create a situation where consumers are misled, as they could not differentiate between regulated and non-regulated products with regard to criteria that ensure that products are indeed suitable for older infants and young children.

Specific criteria, such as in relation to composition and labelling, are set to ensure that products targeting older infants and young children are suitable for this vulnerable age group. Other products that do not comply with those criteria could in parallel be placed on the same market. Allowing these products to use NRVs-R for older infants and young children on the label creates for consumers the impression that they are particularly suitable for older infants and young children without actually being so. The EU does not support the creation of a new category of “baby foods” outside the Codex texts or national or regional legislation, covering this age group by means of labelling foods with specific NRVs-R for infants and young children. The EU does not support to allow for declaration of vitamin and mineral content expressed as %NRV-R for 'general foods' targeting older infants and children.

When including the NRVs-R in the individual 4 Codex Standards and Guidelines mentioned below, the conditions for voluntary micronutrient declaration need to be individually considered and established for each Codex text in order to ensure that the conditions are suitable for the specific food category and for the vulnerable group of infants and young children. Simply transferring concepts that were established for the adult population to infants and young children may not necessarily be appropriate, for example, the volume of food eaten by infants is considerably lower in infants as compared to adults.

Therefore, the EU supports the establishment of a list of NRVs-R for infants and young children for voluntary micronutrient declaration under conditions to be determined within the frame of each of the texts for the following Codex Standards and Guidelines and locate them in the respective Codex Standards and Guidelines:

- Processed Cereal-Based Foods for Infants and Young Children
- Canned Baby Foods
- Formulated Complementary Foods for Older Infants and Young Children
- Follow-up Formula (under review)

The EU recognises that, in addition to allowing for voluntary information of content of vitamins and minerals in relation to NRVs-R, the purpose of the proposed work is to provide comprehensive guidance for countries that have national legislation in place allowing for nutrition claims on products intended for infants and young children. Therefore, the EU could also support the development of NRVs-R that could help countries to accommodate their national legislation to the market situation, taking into account national or regional nutrition and public health policies. Countries and regions have different policies in place. Providing for claims for certain vitamins and minerals in a national or regional context may stimulate fortification of products with those nutrients up to the levels necessary to make the claim. However, the preferred strategy of ensuring adequate micronutrient intakes may differ, countries or regions may favour to provide nutrition advice on adequate food intake, mandatory or voluntary fortification of all or only of certain foods, or recommend the use of certain supplements. Therefore, reference criteria for nutrition claims and the basis on which they are derived may vary between countries and regions, and may vary between individual nutrients and by specific food categories on which they are allowed, in line with national and regional policies and priorities. It is important that the freedom to shape national or regional nutrition policies with regard to the vulnerable population group of infants and young children is maintained. Future work on NRVs-R for infants and young children should clearly allow for such national or regional flexibility and allow countries and regions to take them into account for their national or regional legislation on nutrition claims for products for older infants and young children without the obligation to use them. The EU reminds that nutrition claims for products intended for infants and young children are not harmonised at Codex level and does not support recommendation 4 to introduce an obligation to use NRVs-R for older infants and young children where jurisdictions allow for such claims.

Notwithstanding this, national and regional authorities may decide to use NRVs-R as reference criteria for nutrition claims in jurisdictions where such claims are permitted if such an approach supports their nutrition and public health policies

RECOMMENDATION 5

That NRVs-R for older infants and young children be established for all 13 vitamins (including folate instead of folic acid) and 9 minerals (excluding molybdenum).

EU comments:

The EU supports the development of NRVs-R for older infants and young children for all 13 vitamins and 9 minerals.

RECOMMENDATION 6

That an NRV-R be established for protein for older infants and young children separately and as a combined group.

EU comments:

Products on the EU market generally do not target older infants or young children separately as two standardised age groups. Rather, different age indications are given (e.g. from 6 month, from 8 month, from 10 month, from 12 month, from 16 month, from 18 month etc.). The EU considers that the establishment of two standardised, separate age categories for processed cereal-based foods and baby foods for infants and young children via the establishment of NRVs-R (one for older infants and one for young children) is not useful to ensure a suitable product offer. Protein requirements change considerably from 6 to 36 months of age. The EU doubts that providing information about the protein content of a food as a percentage of an average reference intake is meaningful and rather considers that such information could potentially mislead. Therefore, the EU does not support the development of an NRV-R for protein for older infants and young children, neither separately nor as a combined group.

RECOMMENDATION 7

That the priority rankings provided by the eWG be used to inform and help direct the work when the General Principles are being established.

EU comments:

The EU considers that the priority rankings provided should guide the order and priority of development of NRVs-R, irrespective of the General Principles to be established. The General Principles inform about how NRVs-R are derived, the priority order about which NRVs-R to establish first and establish later has been provided in table 1 of CX/NFSDU 19/41/8 and is independent of the General Principles.