New Zealand House of Representatives
Te Whare Māngai o Aotearoa

**Health Committee**
Komiti Whiriwhiri Take Hauora

54th Parliament
July 2026

# Petition of Meg Vardy: Review front-of-package nutritional labelling

Presented to the House of Representatives
by Sam Uffindell, Chairperson

# Contents

# Petition of Meg Vardy

## Recommendation

The Health Committee has considered the petition of Meg Vardy—Review front-of-package nutritional labelling—and recommends that the House take note of its report.

## Request to review nutrition labelling on packaged foods

This petition was signed by 289 people. It was presented to the House by Ingrid Leary on 24 June 2025 and transferred to us on 18 July 2025, and requests:

> That the House of Representatives urge the Government to incorporate voices with lived experience of eating disorders into a review of Health Star Ratings (HSR), with a view to considering whether HSRs should be discontinued.

### About the Health Star Rating system

The Health Star Rating (HSR) system enables manufacturers of packaged food to calculate and display simplified information about the food's nutritional profile on the front of the package. The system is a joint initiative by the Australian Government (at national, state, and territory levels) and New Zealand Government designed to encourage people to make healthier dietary choices.

The ratings system only applies to packaged food. It is intended to enable consumers to easily compare the healthiness of similar foods.[1] Ratings range from half a star to five stars. The HSRs are a form of front-of-package nutrition label (FOPNL). Such labels are common internationally; they include partial information from the detailed nutrition label on the back of packaged food.

## Comments from the petitioner

The petitioner, Dr Vardy, made written and oral submissions. We met with Dr Vardy and Megan Tombs, Chair of the Eating Disorder Association of New Zealand, on 12 November 2025. They told us the association represents up to 100,000 people affected by eating disorders, who may be adversely affected by front-of-package nutritional labels.

Dr Vardy contends that although HSRs are "honourable in their objective", they are difficult to interpret, inequitable, and have not led to any meaningful change in shopper habits. Moreover, the petitioner cited a survey indicating that many people with lived experience of an eating disorder believe that HSRs and warning labels are harmful.

The petitioner supports a review of voluntary HSRs as proposed by trans-Tasman Ministers, but is concerned at the prospect of the labelling being made mandatory. She believes the review should include perspectives from people with lived experience.

[1] Further information on the Health Star Ratings system is available here.

## Efficacy of Health Star Ratings in influencing consumer behaviour

Dr Vardy said that although there are claims that HSRs influence consumer behaviour, there is no strong evidence to support this conclusion. The petitioner pointed to a 2022 study that showed little to no connection between products purchased and HSRs.[2] Equally, she said, while HSRs can lead to reformulation of foods to improve their nutritional qualities, the process can happen without consumer awareness and have minimal effect on consumers.

Dr Vardy suggested a Pigouvian tax (such as the "sugar tax") would be a better approach to influencing consumer behaviour.[3] Such a tax was imposed by the Government of the United Kingdom in 2018 on sugar-sweetened beverages. The intention was to incentivise manufacturers to reformulate products by placing a levy on the addition of sugar during production, passing some of the cost of drinks high in sugar to producers rather than consumers. The petitioner commented that, before the tax came in, over half the manufacturers reformulated their products to lower the sugar content. The tax shifted consumer behaviour and there was an overall reduction in the purchase of such drinks.[4]

## Effects of ratings on people with eating disorders

The petitioner told us that there has been no research on how HSRs and other front-of-package food labelling affect those with eating disorders, and that "absence of evidence is not evidence of absence".

Dr Vardy's submission presented survey results from 110 respondents. The survey found that 80 percent of respondents believed that HSRs and warning labels would be harmful for people with eating disorders. Respondents reported that the effect of HSRs and warning labels was an overall restriction in food choices. We even heard that some respondents reported that they only purchased products rated five-stars.

Dr Vardy shared her lived experience with us and told us that labels reinforce ideas of "good" and "bad" food, creating shame and guilt around food consumption. She explained that such a "moralisation of food" impedes recovery from eating disorders, and labels can "demonise" food. We heard that although front-of-package labels are sometimes compared to cigarette warnings, food is not comparable to cigarettes, and "no one is advocating that people stop eating". In her written submission, Dr Vardy concluded that "healthfulness" is not a "discretely definable construct", and that it varies across groups and contexts. She commented that food is both necessary for life but also draws on connections to whakapapa (ancestry) and te taiao (the natural world), making the point that healthfulness of food cannot be applied equally across people and settings.

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2 Bablani L, Ni Mhurchu C, Neal B, Skeels CL, Staub KE, Blakely T. Effect of voluntary Health Star Rating labels on healthier food purchasing in New Zealand: longitudinal evidence using representative household purchase data. BMJ Nutr Prev Health. 2022 Aug 17, pp 227–34.

3 Some taxes, known as "Pigouvian taxes", are set by governments to correct for adverse side effects ("negative externalities") of a particular market activity or transaction.

4 More details on the tax in the UK and elsewhere in the world are available here. Further details about sugar reduction in the UK food industry are available here, on the UK Government website. A recent expansion of this tax was announced in November 2025.

### Petitioner's suggestions

The petitioner requested that lived experience be incorporated in the review of Health Star Ratings to protect those with eating disorders, or at risk of developing them. In addition, she advocates that:

- HSRs be discontinued and front-of-package warning labels not be implemented
- the Government explore alternative approaches, such as a tax, to incentivise product reformulation
- the process of developing and implementing any front-of-package nutrition label or equivalent population health initiative should incorporate the voice of those at greatest risk of being adversely affected: people affected by eating disorders
- in line with the Public Health Advisory Committee 2023 Rebalancing Our Food Systems report, efforts to improve health focus on increasing the availability of a variety of nutritionally balanced foods and eradicating food inequity.

## Comments from the Ministry of Health

We invited a response from the Ministry of Health. We sought information about the petitioner's claims regarding nutrition labelling, evidence of potential harm for those with eating disorders, and consultation undertaken during the development of nutrition labelling. The Ministry of Health (MoH), responded to us with input from the Ministry for Primary Industries (MPI), the lead agency for food labelling in New Zealand.

### The role of front-of-package nutrition labelling

The Ministry of Health told us that front-of-pack nutrition labelling is recommended by the World Health Organization as a "best buy" policy to address non-communicable diseases, which account for 80 percent of deaths in New Zealand. The five major risk factors for health loss in New Zealand are high body mass index, high fasting plasma glucose, dietary risks, high blood pressure, and tobacco consumption.

The ministry said that while front-of-pack nutrition labelling "is an effective tool to promote healthier dietary choices and improve diet quality", measuring its effectiveness is difficult as many factors influence dietary choices. However, the ministry said research has shown that mandatory labelling is more effective than voluntary systems in improving public health outcomes. Mandatory labelling can offer consistent and clear nutrition information, encourage product reformulation to improve the nutrition profile, and better support consumers to compare similar products.

The ministry sees value in retaining and continuing the HSR system, as it was designed to help the public make healthier choices. The ministry noted that the system only applies to packaged food, and it advocates a diet of plenty of fresh fruit and vegetables, including more whole foods and less processed food. It noted that consumer surveys of the HSR system in New Zealand and Australia indicate that there is a high level of awareness, understanding, and use of HSRs. There is some evidence that HSRs can address food equity concerns given their uptake on private label (supermarket-owned) products, which tend to be cheaper than comparable products.

However, MPI noted that, while levels of trust in HSRs have improved, they are still mixed. In a 2024 survey, 56.4 percent of consumers reported trusting the HSR system, compared with 40 percent of consumers in a separate survey from 2018. Barriers to using the HSR system include some consumers not believing in the HSR system or a belief that other nutrition information is more important. Among low-income households, there was a belief that other nutrition information is more important. For Māori and Pacific consumers, the price of foods and a desire to buy what they know their family will eat were more important factors.[5]

Because the HSR system is a joint initiative by the Australian and New Zealand Governments, any decisions would need to be taken by both governments. At the time of the ministry's response, there was no proposal in front of Ministers to discontinue the HSR system or to consider alternative front-of-package nutrition labelling systems. We note that, in February 2026, food Ministers from both Australia and New Zealand requested a proposal from Food Standards Australia New Zealand about mandating the HSR system in the Australia New Zealand Food Standards Code.[6]

### Evidence of potential harm for people with eating disorders

The Ministry of Health stated that "there is very little published evidence on the potential harms of nutrition labelling on people with eating disorders". A 2022 review found no studies that have focused on the potential impact of front-of-package nutrition labels on different psychological phenotypes, involving either people suffering from diagnosed and borderline eating disorder, or people with other psychological eating-related conditions such as orthorexia nervosa. The review highlighted potential risks with front-of-package nutrition labels that focus on a single nutrient (such as warning labels) or calories (drawing on evidence from menu-board labelling).[7]

The Ministry of Health and the Ministry for Primary Industries were not aware of any consultation undertaken with people with eating disorders during the development of nutrition labelling. We were told that, should Ministers in Australia and New Zealand decide to mandate the HSR system, they will request Food Standards Australia New Zealand (FSANZ) to raise a proposal and develop a joint food standard. Public consultation will be undertaken to help inform this work. The Ministry of Health encouraged the petitioner and other interested stakeholders to subscribe to FSANZ notifications when public consultations are open.[8]

## Our response to the petition

We thank the petitioner for her submission and oral evidence, and for her willingness to share her lived experience with us. We acknowledge the care and effort she has taken to represent the perspectives of people affected by eating disorders. Her advocacy on behalf of this community is important, and we commend the research undertaken by her and the other

5 Food Standards Australia New Zealand, Health Star Rating–2024 Monitoring Consumer Research Report, p 3.

6 Food Standards Australia New Zealand, P1067 – Health Star Rating System.

7 Claudia Penzavecchia, Patrizia Todisco et al, The influence of front-of-pack nutritional labels on eating and purchasing behaviors: a narrative review of the literature, November 2022.

8 FSANZ subscriptions website.

authors of the written submission, including the collection of evidence about lived experience and survey responses.

We consider that further research is needed to better understand the effects of front-of-package nutrition labelling on people with eating disorders. This remains an important gap in the evidence base. While we note that the petitioner has raised concerns that Health Star Ratings do not meaningfully influence consumer behaviour, we understand that such labelling may still have significant effects for individuals with eating disorders. In particular, we are concerned that these labels may influence behaviours in ways that could impede recovery for some people. Any future policy work should carefully consider these potential harms alongside broader public health objectives and include the voices of those most affected.

# Appendix

## Committee procedure

The petition was signed by 289 people on the Parliament website. It was presented to the House by Ingrid Leary on 24 June 2025 and referred to us on 18 July 2025. We met between 30 July 2025 and 29 July 2026 to consider it. We received written submissions from the petitioner and the Ministry of Health, and heard oral evidence from the petitioner on 12 November 2025.

## Committee members

Sam Uffindell (Chairperson)
Dr Hamish Campbell
Dr Carlos Cheung
Ingrid Leary
Cameron Luxton
Hūhana Lyndon
Jenny Marcroft
Debbie Ngarewa-Packer
Hon Dr Ayesha Verrall

## Related resources

The documents we received as evidence in relation to this petition are available on the Parliament website.

A recording of our hearing can be accessed online on the Parliament website.