P O L I C Y I N S T R U M E N T

NATIONAL ULTRA-PROCESSED FOOD CONTROL POLICY 2026

A tobacco-grade regulatory response to industrial edible products

Treating ultra-processed foods as a commercial determinant of health — not as a consumer information problem.

Status	Draft national policy for Cabinet / Food Ministers' Meeting
Jurisdiction	Commonwealth of Australia, with COAG Health Council and Food Ministers' Meeting implementation
Primary evidence base	Lancet series on ultra-processed foods and human health; Chilean and Brazilian labelling evaluations; AIHW burden-of-disease and health-expenditure data; NOVA classification literature
Policy analogue	Tobacco Control Act framework: product standards, warning labels, marketing prohibition, independent regulator, fiscal measures
Date	11 September 2026

1. Executive determination

This policy proceeds from a single determination: ultra-processed foods (UPFs) are not "food" in the ordinary sense of the word. They are industrially formulated edible products, engineered for hyper-palatability, long shelf life and repeat purchase. They now supply around 42 per cent of Australians' dietary energy. They are associated with obesity, type 2 diabetes, cardiovascular disease, fatty liver, kidney disease, depression and premature death. Overweight and obesity have overtaken tobacco as Australia's leading risk factor for disease burden. Total health spending has reached $270.5 billion. Continuing to treat this as a matter of "informed choice" and voluntary industry partnership is a policy failure.

The public-health record of the past decade is now sufficient for legislation:

- The Health Star Rating (HSR) system was co-designed with industry, ignores degree of processing, and awards high stars to products built from isolates, maltodextrin, emulsifiers and industrial flavour systems.
- Food Standards Australia New Zealand (FSANZ) regulates chemical safety and compositional minima. It does not regulate the industrial formulation of addictive product matrices.
- The 2013 Australian Dietary Guidelines do not name ultra-processed foods. A review is underway; this policy requires that review to treat processing as a first-order dietary risk.
- Tobacco companies owned major food manufacturers for decades and applied cigarette research and development methods — flavour systems, mouthfeel engineering, and child-directed branding — to supermarket products.
- Chile, Mexico, Argentina and related jurisdictions have demonstrated that mandatory black warning octagons, child-marketing bans and school-sale prohibitions reduce purchases of sugar, sodium and saturated fat and drive reformulation.

This instrument therefore adopts a tobacco-grade posture: mandatory warnings, marketing controls, nutrient and additive ceilings, fiscal measures, independent governance, and criminal and civil penalties for deception. Voluntary partnership has had twelve years. It is finished.

2. Purpose and legal effect

The purpose of this Policy is to:

1. Reduce population exposure to ultra-processed products, with a ten-year target of cutting the UPF share of dietary energy from approximately 42 per cent to below 20 per cent.
2. Prohibit the use of health-halo marketing and high Health Star Ratings on products that meet the statutory definition of ultra-processed.
3. Require front-of-pack warning labels modelled on the Chilean octagon system, covering excess sugar, sodium, saturated fat, energy density, and ultra-processing itself.
4. Prohibit marketing of designated products to persons under 18, including packaging characters, influencer placement, school-adjacent advertising, and digital targeting.
5. Remove food-industry representatives from any voting or drafting role in nutrition standard-setting, Health Star Rating algorithm design, and dietary guideline committees.
6. Impose a national levy on designated ultra-processed products and recycle revenue into fresh-produce subsidies, school kitchens, and independent public-interest research.
7. Update the Australia New Zealand Food Standards Code, the Australian Dietary Guidelines, and related Commonwealth, State and Territory instruments so that processing level is a regulated characteristic of food, not a marketing footnote.

3. Problem statement

3.1 What ultra-processed food is

Under the NOVA classification used internationally and adopted here as the statutory reference, ultra-processed foods are formulations of substances derived from foods, plus additives, created by a series of industrial processes. Typical inputs include protein isolates, hydrogenated or interesterified oils, high-fructose or glucose-fructose syrups, maltodextrin, modified starches, flavour enhancers, emulsifiers, colours, and cosmetic additives whose function is to imitate the sensory properties of real food. The finished product is designed to be convenient, branded, hyper-palatable and profitable — not to nourish.

Minimally processed foods — fruit, vegetables, eggs, plain yoghurt, unflavoured milk, whole cuts of meat and fish, dried legumes, plain oats — are not the target of this Policy. Culinary processed foods made from those ingredients with salt, oil, sugar or vinegar in a kitchen or equivalent setting are not the target. The target is industrial formulation.

3.2 Scale of exposure

Australians live inside a supermarket environment that did not exist two generations ago. Packaged product lines have grown from a few hundred items in the 1960s to tens of thousands. Around 60 per cent of packaged products on Australian shelves meet a UPF definition. UPFs supply about two-fifths of dietary energy. Children’s lunchboxes, hospital cafeterias, service-station shelves and “healthy” supermarket aisles are

saturated with them. Products marketed as breakfast, yoghurt, crackers or children's snacks routinely contain twenty or more ingredients and a formulation logic that has nothing to do with a kitchen.

3.3 Health consequences

The evidence is no longer preliminary. A 2025 Lancet series on ultra-processed foods and human health, drawing on more than 100 long-term studies, associated UPF dietary patterns with higher risk of obesity, type 2 diabetes, cardiovascular and cerebrovascular disease, depression, chronic kidney disease, liver disease, and several cancers. Australian research covering millions of people has associated higher UPF intake with more than thirty conditions and earlier death.

Clinical reality in high-burden catchments is premature coronary disease, amputations, fatty liver in people who do not drink, type 2 diabetes in people in their twenties, and children presenting with metabolic and behavioural problems that clinicians reasonably attribute, in part, to diet. This is not a lifestyle curiosity. It is a mass exposure event.

Indicator	Current Australian position
Adults living with overweight or obesity	Approximately 67% (13.2 million)
Children and adolescents 5–17 with overweight or obesity	Approximately 27–28%
Leading risk factor for disease burden	Overweight and obesity, now ahead of tobacco
Share of dietary energy from UPFs	Approximately 42%
Type 2 diabetes prevalence trajectory	Approximately threefold rise in numbers since 2000
Total health spending 2023–24	$270.5 billion
Health spending attributable to overweight/obesity	Approximately $7–10.5 billion direct, plus far larger indirect costs

These figures are conservative. They do not fully price lost productivity, informal care, or the mental-health burden associated with UPF-heavy diets.

3.4 Addictiveness and the tobacco inheritance

The historical record is clear. Between the 1960s and the 2000s, major tobacco companies owned large food businesses (including brands later associated with Kraft and Cadbury). Flavour science, sensory panels, and marketing architectures developed to sell cigarettes were applied to food. High sugar loads produce rapid dopamine responses. Fat–salt–sugar combinations blunt satiety signals. Texture engineering is not culinary craft; it is product design.

Hidden sugars at volumes that are ordinary in an Australian supermarket diet have a documented metabolic cost. The policy conclusion is not that every consumer lacks willpower. The conclusion is that the product category is designed to defeat ordinary appetite regulation, and that a liberal "personal responsibility" frame is therefore the wrong frame — just as it was the wrong frame for tobacco.

3.5 Regulatory capture and the Health Star Rating

The Health Star Rating was introduced in 2014 as a voluntary front-of-pack device. Industry helped design the algorithm. Uptake stalled well below the 70 per cent target. Manufacturers place stars on products that benefit from them and omit them from products that do not. The algorithm rewards added fibre and protein

isolates and does not penalise ultra-processing. The result is a 4-star ultra-processed breakfast cereal sitting next to 1-star honey.

Food Ministers have now asked FSANZ to consider mandating the existing HSR (Proposal P1067). Mandating a captured instrument is not reform. It is the industrialisation of a health halo. This Policy prohibits that outcome. If a front-of-pack system is mandated, it must be rebuilt from first principles by an independent authority, with processing as a hard input, or it must be replaced by warning labels.

FSANZ's statutory culture is food safety and compositional standards. That work matters. It is not a substitute for public-health control of a product class designed for overconsumption. The Partnership Reformulation Program is voluntary, category-limited, and too slow relative to the disease curve. Voluntary reformulation is what industry offers when it wishes to avoid legislation.

3.6 Marketing to children

Cartoon characters, bright packs at child eye-line, "lunchbox" claims, sports sponsorships, digital and social-platform placements, and school-canteen leakage constitute a commercial assault on a population that cannot consent. Chile's combined package — warnings plus marketing restrictions plus school bans — reduced children's excess-weight risk. Australia has no equivalent national lock. This Policy creates one.

4. Governing principles

The following numbered principles bind every subsequent measure:

1. Precaution over industry uncertainty. Where a product class is associated with population harm and the commercial incentive is to sow definitional doubt, the State regulates first and litigates definitions second. "No scientific consensus on the term UPF" is an industry talking point, not a reason for delay. NOVA is sufficiently operational for statute.
2. Commercial determinants are in scope. Product design, retail placement, pricing, packaging and political lobbying are regulated objects, not background noise.
3. Independence of standard-setting. No person with a current or recent pecuniary relationship to a food manufacturer, retailer, or industry association may sit on a body that writes nutrient profiles, warning criteria, or dietary guidelines.
4. Children are a protected class. Products that cannot be marketed to children under tobacco-equivalent rules cannot be sold in schools or packaged with child-directed devices.
5. Warnings beat stars. A black octagon that says HIGH IN SUGAR or ULTRA-PROCESSED is more honest than a 4-star device on the same product.
6. Health claims die on warned products. No "high in protein", "source of fibre", "natural", "made with real fruit", or similar claim may appear on a product that carries a statutory warning.
7. Fiscal alignment. The price of industrial formulation must rise; the price of unprocessed and minimally processed food must fall.
8. Enforceability. Every duty in this Policy has an inspector, a penalty, and a private-enforcement pathway.

5. Statutory definitions

Ultra-processed food (UPF)

A food or beverage is ultra-processed if it is a formulation of ingredients, the majority of which are substances extracted, derived or synthesised from foods or from other organic sources, combined by industrial processes, and containing one or more of the following: cosmetic additives (colours, flavours, emulsifiers, humectants, sequestrants, bulking agents, carbonating agents, firming agents, gelling agents, glazing agents, foaming agents); protein isolates or concentrates used other than as a minor fortificant; hydrogenated or interesterified oils; high-intensity sweeteners used to sustain sweetness in a low-cost matrix; or maltodextrin, glucose syrups or invert sugars used as structural bulk.

The Minister for Health shall publish a binding schedule of marker ingredients and processes within 90 days. The presence of two or more marker additives, or one marker additive plus an industrial sweetener or isolate system, creates a rebuttable presumption of UPF status. The manufacturer bears the onus of proof to the contrary.

Designated product

A designated product is a UPF that also exceeds any one of the nutrient thresholds in Schedule A (sugar, sodium, saturated fat, or energy density), or that is marketed to children, or that carries a health or nutrition content claim.

Child-directed marketing

Any packaging, placement, sponsorship, digital communication, or brand asset that a reasonable person would conclude is designed to attract persons under 18, including licensed characters, celebrities popular with minors, “fun” shape or colour engineering, collectible devices, and algorithmically targeted advertising.

6. Operative measures

6.1 Mandatory front-of-pack warning labels

Within 18 months of commencement, every packaged designated product offered for retail sale in Australia must display, on the principal display panel, one or more black octagonal warning labels of prescribed size, in the following forms as applicable:

- HIGH IN SUGAR
- HIGH IN SODIUM
- HIGH IN SATURATED FAT
- HIGH IN ENERGY
- ULTRA-PROCESSED

Thresholds shall be at least as strict as Chile’s third-phase nutrient profile, adapted to Australian serving and category conventions by the Independent Food Integrity Authority established under section 7. The ULTRA-PROCESSED octagon applies to all products meeting the statutory UPF definition, regardless of nutrient profile. A formulated “high protein” shake that is a UPF carries the processing warning even if it does not trip a sugar threshold.

Labels must occupy not less than 10 per cent of the principal display panel for a single warning and scale upward with additional warnings. They must appear in the top-right quadrant. They may not be obscured by promotional stickers. Contrast, font and iconography shall be prescribed and may not be “designed around” by pack artists.

Chilean evaluations found large reductions in purchases of sugar, sodium, saturated fat and energy from warned products, high industry compliance, and substantial reformulation of the packaged supply. That is the intended Australian effect.

6.2 Abolition of health-halo devices on designated products

1. A designated product may not display a Health Star Rating, traffic-light device, or any other interpretive positive score.
2. A designated product may not carry a nutrition content claim or health claim under Standard 1.2.7, including claims about protein, fibre, vitamins, minerals, “natural”, “fresh”, “wholesome”, “made with whole grains”, or equivalent.
3. A designated product may not use images of fruit, vegetables, farms, athletes, or medical professionals in a manner likely to convey a health benefit.
4. Existing HSR mandate proposals (including P1067 in its present form) shall be withdrawn or rewritten so that HSR, if it survives at all, applies only to NOVA groups 1–3 and is recalculated by the Independent Authority without industry voting rights.

The Health Star Rating on an ultra-processed cereal is not consumer information. It is a state-endorsed misrepresentation. This Policy ends it.

6.3 Marketing, placement and schools

1. Child-directed marketing of designated products is prohibited in all media, including packaging, in-store display, outdoor, broadcast, cinema, and digital platforms accessible in Australia.
2. Designated products may not be sold, served or promoted in schools, early-childhood services, public hospitals, or Commonwealth-funded sport facilities. Existing school-canteen guidelines that still permit “amber” UPFs are overridden.
3. Supermarket placement of designated products at child eye-level, at checkouts, or in end-of-aisle displays adjacent to fresh produce is prohibited.
4. Sports sponsorship by designated-product brands of junior sport is prohibited. Adult elite sponsorship is permitted only where the brand’s advertised product in that context is not a designated product.
5. Digital platforms with Australian users must maintain an age-gated prohibition on designated-product advertising to accounts identified as under 18, with a due-diligence duty equivalent to existing online safety obligations.

6.4 Product standards and additive ceilings

The Food Standards Code shall be amended to add a new Schedule — Nutrient and Additive Ceilings for Ultra-Processed Products — imposing, on a phased basis:

- Category-specific maximums for added sugars, sodium and saturated fat that tighten every 24 months for six years.
- A prohibition on the combination of intense sweeteners with sugar in the same product after year three, closing the “diet plus regular” dual-formulation loophole.
- A requirement to declare, in plain English on the back panel, the number of cosmetic additives and the industrial purpose of each (for example: “emulsifier — used to imitate creaminess”).

- A prohibition on flavouring systems designed to mimic fruit in products that contain less than 10 per cent actual fruit by weight.

Reformulation is not a substitute for warnings. It is a parallel duty. Manufacturers who reformulate below all warning thresholds and out of the UPF definition may exit the designated-product regime. That is the incentive. Remaining inside it is a commercial choice with commercial consequences.

6.5 Fiscal measures

A National Ultra-Processed Product Levy shall apply from the first 1 July after 12 months of Royal Assent:

- A specific levy on non-alcoholic designated beverages, set initially at a rate that lifts the retail price of a typical 375 ml sugar-sweetened or intensely sweetened can by not less than 20 per cent, with the rate indexed to sugar-equivalent or sweetener-intensity as prescribed.
- An ad valorem levy of 10 per cent of wholesale value on other designated products in year one, rising to 20 per cent in year four unless the product has exited designated status.
- Revenue hypothecated, by standing appropriation, 40 per cent to a Fresh Food Access Fund (price support for fruit, vegetables, legumes, plain dairy and whole grains in low-income postcodes and remote communities), 30 per cent to school kitchen and lunch programs that serve minimally processed food, 20 per cent to independent research and evaluation, and 10 per cent to enforcement.

The Australian Medical Association's long-standing case for a sugary-drink tax is absorbed and widened. A drink tax alone leaves the rest of the supermarket untouched. This levy does not.

6.6 Dietary Guidelines and public institutions

The review of the Australian Dietary Guidelines shall be directed, by this Policy, to:

- Adopt NOVA (or a statutory equivalent) as a primary organising frame alongside food groups.
- State, in the first-order recommendations, that Australians should minimise ultra-processed products and that UPFs are not required in a healthy diet.
- Remove any wording that treats "discretionary foods" as a nutrient-only category. Discretionary and ultra-processed overlap; they are not the same, and the Guidelines must say so.
- Publish a consumer-facing "swap list" equivalent in authority to the Guidelines themselves.

All Commonwealth procurement of food — Defence, aged care where the Commonwealth is funder, immigration detention, parliamentary catering — shall meet a maximum UPF energy-share of 15 per cent within three years. States and Territories are invited, and funded, to match that standard in public hospitals and schools.

6.7 Transparency, surveillance and research

- A public, machine-readable National Product Register shall list every packaged product's NOVA status, warning-label status, additive count, and HSR (if any), maintained by the Independent Authority and updated quarterly.
- Manufacturers shall file annual formulation dossiers for designated products, including target sensory specifications where those specifications are used in product development. Commercial-in-confidence claims may delay publication by 12 months; they may not prevent regulator access.
- The AIHW shall report annually on UPF energy share, warning-label coverage, reformulation, and disease-burden attribution.

- Public research funding for nutrition shall prioritise independent investigators. Industry-funded studies submitted in support of a regulatory exemption shall be given no greater weight than independent studies, and conflicts shall be printed on the first page of any citation in a regulatory document.

7. Governance: Independent Food Integrity Authority

An Independent Food Integrity Authority (IFIA) shall be established as a statutory authority outside the Department and outside FSANZ. FSANZ retains chemical-safety and compositional work. IFIA owns processing classification, warning criteria, marketing codes, the product register, levy administration advice, and the rebuilt (or retired) HSR.

The Board shall comprise seven members appointed by the Governor-General on the recommendation of a cross-parliamentary selection panel: two public-health nutrition scientists, one clinician practising in metabolic or cardiovascular medicine, one consumer representative with no industry income, one economist, one food-systems or agricultural expert with no manufacturer income, and one chair with administrative-law experience. Sitting members shall have had no employment, consulting, grant, or equity relationship with a designated-product manufacturer or industry association in the preceding five years.

Industry may be heard in public consultation. Industry may not draft, vote, or sit in the room when the Board deliberates on a standard.

The Australian Competition and Consumer Commission shall have concurrent jurisdiction over child-directed marketing and health-halo claims, with a dedicated Food Integrity unit. State and Territory food regulators shall inspect labelling and school-sale rules under a uniform national protocol.

8. Enforcement and penalties

This Policy is intended to be enforced, not admired.

- A designated product sold without the required warning is a strict-liability offence. Maximum penalty: 2,000 penalty units for a body corporate per SKU per distribution week, plus forfeiture of the offending stock.
- A prohibited health claim or Health Star Rating on a designated product is a misleading-conduct contravention under the Australian Consumer Law, with IFIA and ACCC as co-regulators. Penalties follow the ACL corporate maximums.
- Child-directed marketing attracts the same penalty scale as a prohibited tobacco advertisement, indexed.
- Repeat corporate offenders (three adjudicated contraventions in 36 months) may be subject to a product-category suspension of up to 12 months.
- Directors who knowingly approve a pack design that conceals a warning, or a campaign that targets children, commit a personal offence.
- A public-interest standing provision shall allow a registered health or consumer organisation to seek injunctive relief and a share of pecuniary penalties, on the model of expanded standing already proposed in Australian food-law scholarship.

- Whistleblowers inside manufacturers who disclose hidden flavour specifications or targeting algorithms are protected under the Public Interest Disclosure framework, with a prescribed reward from the levy fund in cases that result in a successful enforcement action.

9. Implementation timetable

When	Action
Day 0	Cabinet endorsement. Exposure draft Bill circulated.
Month 3	IFIA established. Marker-ingredient schedule published. Dietary Guidelines review directed in writing.
Month 6	Bill introduced. Child-marketing prohibition commences on digital platforms (earliest operational control).
Month 12	Royal Assent target. School and public-hospital sale ban commences. National Product Register live.
Month 18	Warning labels mandatory. Health-halo ban on designated products in force. First levy year begins on next 1 July.
Year 3	First tightening of nutrient ceilings. Intense-sweetener-plus-sugar combinations prohibited. Commonwealth procurement cap live.
Year 6	Second tightening. Independent evaluation of energy-share, BMI, diabetes incidence, and industry reformulation published.
Year 10	Statutory target: UPF share of dietary energy below 20 per cent. Parliament reviews whether the designated-product net should tighten further.

10. Anticipated objections, and why they fail

"UPF is not a scientifically agreed term."

NOVA is the most widely used classification in the epidemiologic literature that this Policy relies on. Marker-ingredient schedules make it administrable. Tobacco regulation did not wait for the industry's preferred definition of a cigarette. Industry's demand for perfect consensus is a delay tactic. The statute will define the class; courts will police the edges.

"Some ultra-processed foods are healthy — wholegrain bread, yoghurt, infant formula."

This Policy does not ban processing. Plain yoghurt without cosmetic additive systems is not the target. Infant formula is regulated under its own standard and is carved out. Commercial breads that are UPF by marker additives will carry a processing warning; breads that are not will not. The existence of edge cases is a reason for a schedule and a rebuttal process, not a reason to leave the centre of the category unregulated.

"This is nanny-state paternalism."

The nanny in this market is the firm that designs a product to override satiety and then spends millions placing it at a child's eye-line with a cartoon and a 4-star device. The State's role is to stop that. Adults remain free to buy designated products. They will do so with honest labels, without child packaging, and at a price that includes part of the cost they currently dump on the health system.

"Reformulation and voluntary partnership are working."

Twelve years of voluntary HSR and partnership reformulation have coincided with rising obesity, a UPF energy share near 42 per cent, and a Health Star system that still blesses industrial breakfast products. Industry partnership is not a control policy.

"Labels and taxes hurt low-income households."

Low-income households already pay twice: at the checkout for cheap calories, and later in disease. This Policy hypothecates levy revenue into fresh-food price support in the postcodes that need it, and into school meals that do not depend on a parent's supermarket choices. A regressive product levy without that recycle would be unjust. This one is designed not to be.

"Mandating the current Health Star Rating is enough."

It is not. Mandating a co-designed algorithm that ignores processing cements the health-halo problem. Stars on UPFs are the opposite of a warning. They are a state subsidy to the product's marketing department.

11. International alignment

This Policy is not an experiment invented in Canberra. It assembles measures that have already been run:

- Chile — mandatory black octagons, child-marketing limits, school sale bans; documented reductions in purchases of sugar (around 37 per cent from high-in products in key evaluations), sodium, saturated fat and energy; high compliance; measurable effects on children's weight trajectory.
- Mexico, Argentina, Peru, Uruguay, Colombia — warning-label family with claim restrictions.
- Brazil — dietary guidelines that tell citizens to avoid ultra-processed products; front-of-pack warnings (weaker magnifying-glass design; this Policy prefers Chile's octagon).
- Tobacco control in Australia itself — plain packaging, advertising bans, excise, and the end of industry self-regulation — is the domestic precedent for treating a harmful commercial product class as a regulated object rather than a consumer-education puzzle.

Australia would not be first. It would be late. Being late is acceptable only if the instrument, when it arrives, is strong.

12. Success measures

The Policy succeeds if, against a published baseline in year one:

- The UPF share of population dietary energy falls each reporting year and reaches below 20 per cent by year ten.
- The proportion of packaged products carrying one or more warnings falls after year three, because reformulation is real, not because labels are evaded.
- Child-directed branded UPF exposures in measured media reach zero.
- The Health Star Rating no longer appears on designated products.
- Age-standardised incidence of type 2 diabetes in adults under 45 stops rising and then falls.
- The fresh-food price index in the lowest-income quintile falls relative to the designated-product price index.
- Independent evaluation at year six finds no credible evidence that industry has recaptured IFIA.

Activity metrics (number of meetings, number of voluntary pledges, number of reformulated SKUs announced in press releases) are not success measures.

13. Drafting instruction to government

The Department of Health, Disability and Ageing, in consultation with the Attorney-General's Department and Treasury, shall prepare:

1. An Ultra-Processed Food Control Bill establishing IFIA, the warning-label duty, the marketing prohibition, the levy, standing, and penalties.
2. A Food Standards Code amendment package creating the UPF definition schedule, additive-purpose labelling, and nutrient ceilings.
3. A written direction to the Australian Dietary Guidelines review committee requiring processing to be a first-order recommendation.
4. A written instruction to FSANZ that Proposal P1067 must not mandate the current HSR algorithm on UPFs.
5. A Council of Australian Governments health agenda item binding States and Territories on school sales, hospital procurement, and inspection.

The Bill shall contain a objects clause that names commercial determinants of health, cites the population burden, and states that the Parliament intends the measures to be construed beneficially in favour of public health where construction is ambiguous.

14. Closing determination

The system is working as designed: industrial products engineered for repeat consumption; a labelling device that launders those products; a regulator built for microbes and additives rather than formulation strategy; dietary guidelines silent on the dominant source of Australian calories; and a political economy in which the sellers of the product help write the rules.

Australia already knows how to do this. It did it with tobacco. The same sequence applies: tell the truth on the pack, stop the advertising, take the industry out of the drafting room, make the price tell the cost, and measure disease rather than press releases.

This Policy is deliberately strong. A weak policy would be another partnership, another star, and another decade of children eating industrial formulations that a previous generation of tobacco scientists would have recognised on sight.

The correct standard is not whether industry will like it. The correct standard is whether a clinician in Western Sydney, looking at a twenty-eight-year-old with fatty liver and a thirteen-year-old with a lunchbox full of 4-star UPFs, can say that the Commonwealth finally acted in proportion to the harm.

E N D O F P O L I C Y I N S T R U M E N T

Public-interest draft for consultation. Grounded in the international evidence base on ultra-processed foods, warning labels, and commercial determinants of health. Not an official Commonwealth instrument unless adopted.