### Processed food Planned Catastrophe



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### Background

- India is considered to be in the core of a demographic, epidemiological and nutrition transition mainly due to rapid population growth, growing urbanization, policy challenges and modification in lifestyles.
- Through various studies it has been proved –

- Nutrition transition is predominantly characterized by a radical transformation in the dietary pattern
- Steeply decline in cereal consumption especially in coarse cereals

whereas increased consumption of other foods amongst rural population is observed

Cereals and cereal products are good source of energy and other vital nutrients, though the process of refining can decrease vital nutrients

- Declined consumption of whole grains has been linked with the increased incidences of -
- cardiovascular diseases,
- cerebrovascular diseases,
- obesity,
- metabolic syndrome,
- diabetes mellitus and cancer

- Acquiring the varied form of diets while shifting from a less varied and indigenous traditional form of diet
- Comprises mostly of processed foods containing more fats and sugar products

Change is observed not only in composition of meals, but also in the structure as well

### Aspects-cum-Challenges

- Cooking Marketing And Research Group conducted a survey in India in which the
  respondents were asked to rank the activities based on their priority. Cooking was
  given seventh rank out of the list of various activities as a leisure and personal
  interest.
- Working Families With increase in the number of working rural women a
  gradual change has taken place in the traditional lifestyle. This is known to have
  stimulated the demand for processed food products since they can be prepared
  easily and quickly.
- Access Traditional Food System has been linked with the Food Resources Water, Land, Forest etc. Decreased access to Forest, Land and Water etc.

- Status Symbol Processed, Packaged and/or Fast food has become status symbol.
- Cultural Practices Due to livelihood insecurity, Climate Change and Push for Growth based Development has pushed communities for migration. Voluntary and Involuntary or Distress Migration caused distance from Cultural Practices.
- **Policies** Promotion of Food Processing, More focus and support to particular Cereals/Grains under food policies and Nutrition Programs.
- **Centralisation** Vs Decentralisation of Nutrition Program
- Profiteering Traditional Food gives no space or very limited space to the centralised food market.

# Penetration of Processed food into rural plate: Insight from field – Koshambi, UP

- In a CNNA exercise conducted by Vikas Samvad in 2014, in Kaushambi district, Uttar Pradesh, shocking stats on consumption of packaged food, are showed up.
- Packaged milk is used as top feed for infants. It includes lactogen, cerelac and other top-branded packaged milk feeds.
- Kirana or grocery shops in the villages of this district are the gateways to the
  artificial flavor and contains all packaged food items liked by children including puff,
  packaged matar (peas), namkeen, Pola, biscuits, noodles, kurkure etc.
- 23 Varieties available on the Village Shop
- The shops also harbors open fried foods including imarti, laddoo, jalebi along with Nankhataai (local baked biscuits).
- Processed food starts from INFANT FOOD

## Doing Maths, understanding economy – Koshambi

Packaged milk/infant milk substitute cost per family in a village is calculated as below
 400 gram
 packet/week month

385 rupees per packet

104 packets for 2 years

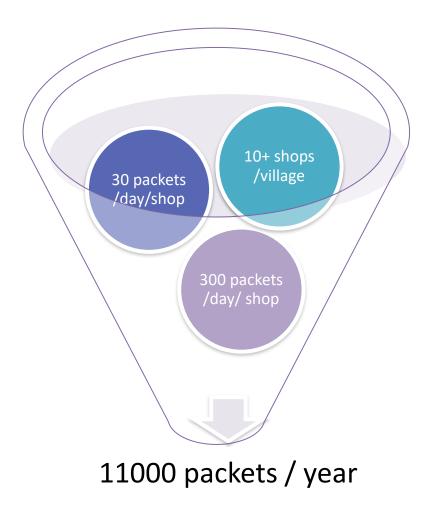
52 packets in a year

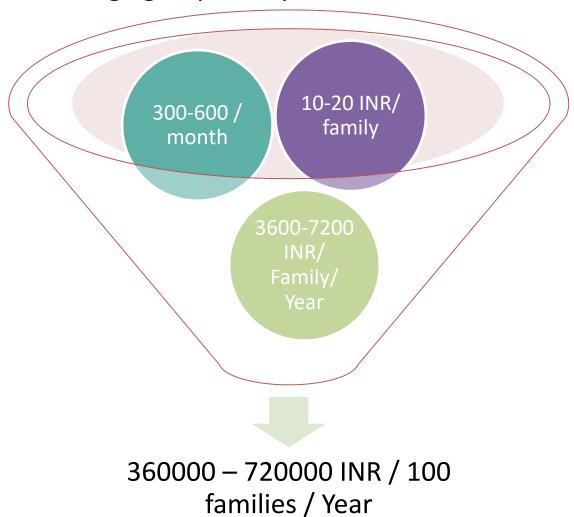
39690 INR for 2 years

## Doing Maths, understanding economy - Koshambi

Packaged food as consumed by children between age group 5-11 years, account to 10-20 INR

per day per family per village

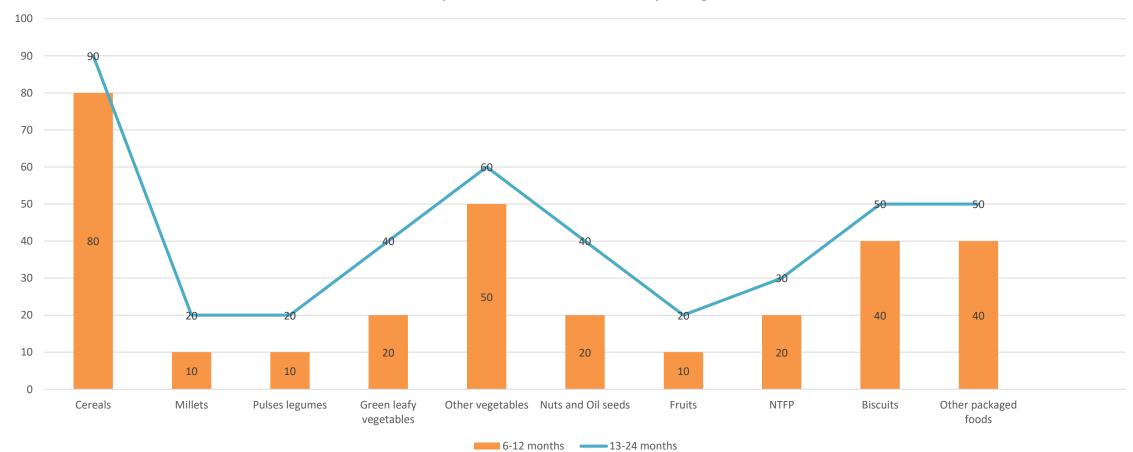




### An insight from Madhya Pradesh

 A study conducted in 5 districts of Madhya Pradesh in September 2019 by Vikas Samvad has shown the remarkable presence of packaged food in plate

Consumption of Traditional food vs packaged food



### Estimation

 As shown in figure the consumption of traditional food is on lower side than that of total consumption of packaged food and biscuits.

#### **Biscuits**

on an average a child consumes 7-8 biscuit a day provided from any local or popular brand including parle-g, Monaco, good day, 50-50..

This counts to about 40-45 grams a day.

### Kurkura and oth packaged food

where 1 packet is 30 grams that means 1.5 packet a day is consumed

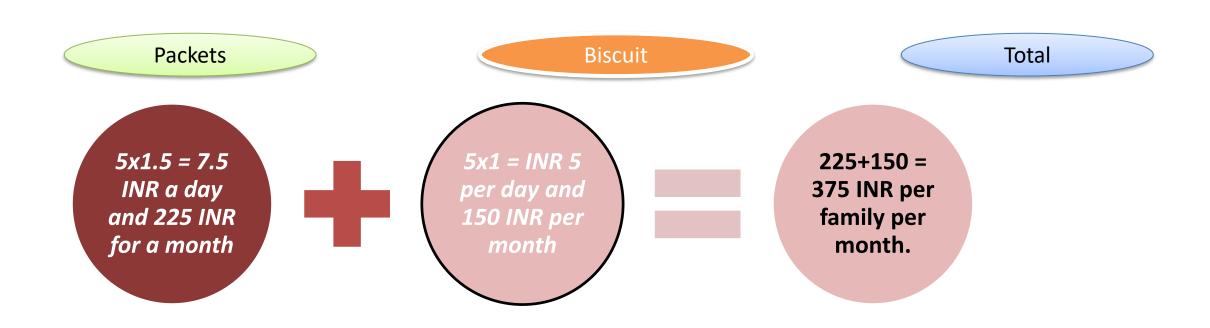
On an average of 40-45 grams/ day

#### NTFP and GLVs

NTFP are consumed in very low amount by children for about 20-30 grams especially in case of amla, bail, ber, mahua fruits.

GLVs are however consumed by children during the winter and rainy seasons provided the availability of the food. On an average it is consumed by 20-40 gms a day

## Maths of consuming processed food – Madhya Pradesh

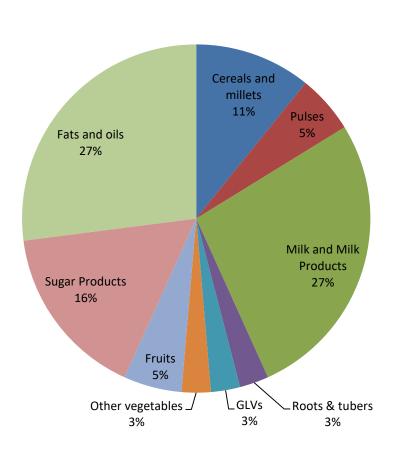


### Estimation

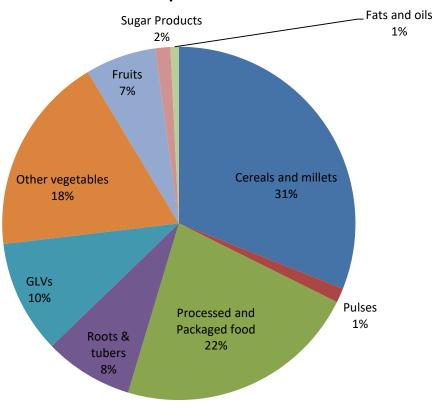
- On an average 1.5 packets are consumed in all the five districts and at least one packet having 5-6 biscuits are also eaten.
- The lowest price available in these villages is INR 5 per packet for both kurkura/biscuits
- The calculation clearly depicts the preference of zero calories food over the nutritious food.
- INR 375 can provide at least 6.5 liters of milk i.e. 217 grams of milk a day can be replaced for these unhealthy products.

# Consumption comparison with RDA and Study Area - MP





#### Consumed plate 13-24 m



Source: Vikas Samvad study on Traditional food mapping in 5 districts of MP, September 2019

### Health Implications: Through Golan's lens

Golan (30 years) belongs to Muslim Naut Community of Dulhaniyapur village of Kaushambi. Golan is mother to five of whom two died. Golan's is a large family comprising of 18 members who struggle for every day's loaf. Her two sons work in Hyderabad as barbers. Her 4 months old son Farhan is categorized under SAM as he is very weak for his age. On asking his birth history, it is recorded that he was LBW with striving conditions. However, the malpractices of the family brought him to the present state. The child was never given colostrum, nor was he exclusively breastfed for six months. Rather he is being top-fed with this Infant Food. Mohammahd Shamim, the head of the family, is grandfather to Farhan considers this as highly effective, and nutritive food source and all the children of his family have been top fed and. He considers that the quality and nutrition of any food depends on its cost. According to him, the more expensive the product is the healthier and more nutritive it will be. He also believes that breastfeeding is only a good option to those who cannot spend on food. He regards packaged milk product is better than mother's milk as doctor and medical representatives recommend it to him. He further advocates that it is the best effort to improve the health conditions of a child and every child of his family is provided with this option, until they reach year two of their life. This practice is common and taken up by majority of naut families in Dulhaniyapur. Golan and women like her is facing the economic poverty along with the burden to run large families effect the overall care their child needs and wrong practices only worsens the condition of their children

### Health Implications: Through Golan's lens

- Farhan's mother, Golan suffered from Mastitis (Breast Infection) and underwent the surgery on the 10<sup>th</sup> day of the birth of the children. While on asking the reasons of not feeding Farhan with breastmilk, Golan explained that she didn't produce enough milk to feed her child. Never did the doctor tell her what conditions she suffered nor did she make any efforts to feed Farhan. Consequently, Farhan was top fed with Infant Food, became weak, and entered the SAM category.
- He developed recurrent diarrhea and infections, which clearly depicts the ill effect any top feeding, can have on a child.
- In this case, the child's family shows the level of unawareness, which is true for most of the cases of rural villages.
- Had Farhan been breastfed, rather than top-fed with packaged food, properly immunized and taken care of, he wouldn't have entered the red zone in the growth monitoring chart and was leading a normal healthy life.

### Another aspects: Substance Abuse – Baran, Rajasthan

- Not only processed and packaged food have crawled into ruralite's plate rather, intoxicating substances have pawed the villagers into its clutch.
- The CNNA exercise conducted by Vikas Samvad in Baran, Rajasthan in 2016 reveals such spine-chilling facts.
- The excessive consumption of Nicotine, liquor and tobacco is reported in this village.
- The prevalence is way high amongst teenager where boys between age of 13-19 are observed to have consumed large amount of tobacco in form of *Gutka*.
- Youths have reported having consumed liquor and other intoxicating products

### Concerns (from Baran)

- Economically weak village Karara, Baran, Rajasthan populated with 350, shows the strongest implication of substance abuse, where on an average 18 lakhs of rupees are spent by the natives on intoxicating items.
- The condition is similar for other village Shubhgara of 265 households, where 590 pouches are sold per day.
- Each household from the village is spending thriftily on substance abusive items for about 180-200 INR per day. This accounts to 6000 INR per day expenditure against 18 lakhs yearly spending on such items.
- The condition of malnutrition in these villages are pathetic on the contrary where, children of both gender as small as 4 years are involved in substance abuse.
- Deaths have also been reported of those young men who are highly intoxicated, lost their balance and fell off into well to death.

### Concerns (from Baran)

- Global Adult Tobacco survey 2009-10 states that tobacco is consumed majorly by age group 15 years of age, amongst those 47.9% are males against 20.3 percent of females
- Research conducted by Indian Paediatrics concludes, 5.4% of children of age group 10-18 years were found to have been consuming tobacco during research period
- These villages from Rajasthan show same picture where 65% of children were found to have been consuming tobacco.
- Importantly, boys between 13-19 years of age have arranged their income by doing child labour which is not even discouraged by the society.
- Young adults are also found to have been practicing domestic violence under intoxication

### Disclaimer

 Although substance abuse may not be included under processed food category, but it has direct linkages with food consumption pattern & practices and food security, it is one major concern, which can't be overlooked.

### Learnings from ICDS-SNP - Policy

- World's Biggest Nutrition Program for the Children U6Yrs.
- Covers 6 Crore Children and 1.7 Crore P/L Women
- Norms Children: 500 Kcal and 12-15G Protein; SAM Children: 800 Kcal and 20-25G Protein; P/L Women: 600 Kcal and 18-20G Protein
- Program Component 1) Hot Cooked Meal for Children in 3-6 Years, 2) Take Home
   Ration for Children on 6M-3 Years and P/L Women
- Supreme Court instructs Decentralization and Involvement of Women Groups, SHGs, Local Bodies; but Governments are inclined towards centralisation for THR by setting up higher technical (Technology, Fortification, Hygienic Conditions etc) and financial norms.
- SC Order on Feb. 26<sup>th</sup>, 2019 in the case of Viashnorani Mahila Bachar Gat Vs State of Maharashtra & Others said that Court has been mislead on this issue again an again. Most of the THR items don't require a sophisticated technique of manufacturing process and SHGs are fully equipped and competent to supply the said food.

#### Two challenges ousting the community and traditional food from the program

- Profiteering from Crisis Make money from Children's Nutrition Program.
- Sansritisation of Food Culture through centralised packaged
   nutrition program Political Opposition of EGGs in ICDS and MDM.

### Thank you!!



