

Commercial Interference in Tackling Hunger and Malnutrition

Children need adequate quantities of wholesome, diverse foods to grow and develop in the best manner possible. These foods should meet their requirements of various nutrients, as well as calories.

70% of India's children do not get as many calories as they need. Lack of enough food, especially diverse food, means that these children are also unable to meet their requirements of protein, minerals and vitamins. More than half of our children are malnourished.

The "supplementary nutrition programme" (SNP) under ICDS has a crucial role to play in combating child malnutrition. Providing a hot, cooked, nutritious meal consisting of cereal, pulse, eggs and vegetables is essential for the SNP to have an impact. It might not be convenient for children under three to come to the centre everyday for SNP. For these children, take home rations (THRs) comprising of fats/oils and proteins in addition to cereals and pulses, based on locally available foods, must be provided.

A hot cooked meal provided at either a school or an ICDS centre has a number of benefits as it:

- serves as an incentive for regular attendance,
- promotes social equity,
- is an implicit form of income support to poor households,
- acts as a form of nutrition education, and
- Tackles all the nutrient deficiencies.

Replacing hot cooking meals with packaged foods does not ensure any of the above. Large, global and national food corporations that see children's hunger and malnourishment as a source of profits are trying to influence government policy towards providing packaged foods.

Children's hunger can be converted into corporate profits in many ways. The first is the way several food manufacturers, especially the biscuit manufacturers tried, when they attempted to replace meals with biscuits in the Mid Day Meal Scheme. Biscuits cannot become a substitute for food that is culturally acceptable, varied, adequate, energy dense, and with multiple nutrients. However, while they may do nothing for children's hunger and malnutrition, given India's large child population, these biscuits can earn their makers huge profits.

Yet another way to turn hunger into profits for companies is by mystifying malnutrition. Rather than looking at malnutrition as a result of chronic hunger for food, corporations reduce it into deficiencies of small quantities of certain nutrients like vitamins and minerals. This provides them with several means of making profits by marketing these micronutrients. For example, each episode of diarrhoea in infants under six months can lead to significant weight loss, and thus to malnutrition. Diarrhoea is usually caused when breastmilk is replaced by other foods, including water, which may carry infection. It is best prevented and treated with exclusive breastfeeding in infants under six months, and with oral rehydration (ORS) in older infants. By linking diarrhoea prevention and treatment with vitamin A and minerals like zinc, corporations create a market for these products. However, these products would also be available to the child if she or he were exclusively breastfed, or got enough foods like fats, green and yellow vegetables, etc.

Instead of working towards ensuring that such diverse foods are available for every family, the solutions being offered are narrowly based on food fortification and micronutrient supplementation. These processes and technologies promote centralised production and procurement of food stuff and detract from local control and autonomy over diets. Sometimes they even displace local livelihoods such as milling. They certainly promote the notion that special, 'medicalised' and expensive food is required to deal with micronutrient deficiencies. Where there is, on the one hand, a decision not to spend on more expensive 'natural foods' like

milk or eggs, there is no hesitation to spend much more on micronutrient supplements of this variety.

To illustrate, consider the case of 'atta' fortification. Wheat flour/atta is scientifically proven to be the worst vehicle for iron fortification, because wheat flour/atta has phytates which precipitate all the iron. The flour that is used in western countries for fortification is really what we call 'maida' and that is without phytates. Yet in the context of India, we have blindly adopted a western form of fortification for our local 'atta', which will not work.

Fortified foods and micronutrient supplements are rapidly spreading in the supplementary nutrition programme under ICDS, even when they have questionable nutritional value. Often this happens under pressure from various lobbies and commercial interests.

It was to prevent commercial interference in infant and young child feeding that in 1992, India passed the "The Infant Milk Substitutes, Feeding Bottles and Infant Foods (Regulation of Production, Supply and Distribution) Act", or the IMS Act, for the "protection and promotion of breastfeeding". The Act, amended in 2003, is one of the strongest pieces of legislation in the world that prohibits manufacturers of breastmilk substitutes and baby foods from advertising or promoting their products for infants below six months of age, as this can interfere with exclusive breastfeeding. In particular, it prohibits sponsoring gifts, meetings, conferences, seminars, contests, or giving funds for any other activity to health care workers and their associations. The IMS Act is the only legislation in India that explicitly prohibits commercial interference and influence with regard to food and nutrition.

However there is no such legal or policy framework for food fortification or micronutrient supplementation in the country. Nor are there any guidelines on the kind of 'public-private partnerships' that can be entered into, in the food and nutrition sectors. This vacuum in the policy is being used by several groups, often those with profit motives, to enter the large-scale programmes to tackle hunger and malnutrition such as the ICDS, MDMS and PDS.

For instance, several groups such as the Global Alliance for Improved Nutrition (GAIN), which are linked with food and baby food corporations, are lobbying with the government to introduce micronutrients into national nutrition policies and programmes.

GAIN's professed aim is to improve nutrition of populations through technical and financial support. The annual report of GAIN (2005-2006) highlights that GAIN along with food giants such as Groupe Danone, Unilever, and Cargill, is working to fight "hidden hunger" by building new "markets for nutritious foods", unlike traditional aid campaigns.

GAIN is also in the process of setting up an "India alliance", which among other things, is expected to engage in "high level advocacy to create an IYCF friendly policy/ regulatory environment and removal of roadblocks in improving breast feeding practices and **increasing access to affordable complementary foods/ complementary food supplements** in accordance with the regulations in the country....." The alliance would thus be expected to ask for friendly (or weaker) legislations to allow for the market of complementary foods to grow.

Further, infant formula manufacturers, such as Danone, sit on the board of GAIN. Many of the listed potential partners are baby food manufacturers; a fact clearly demonstrating conflict of interest. Just to mention one example, even as Wockhardt, is blatantly violating the Infant Milk Substitutes Feeding Bottles, and Infant Foods (Regulation of Production, Supply and Distribution) Act 1992 through gifts to doctors, it is listed as a potential partner on this. Wockhardt is an Indian company who has acquired the Farex brand.

In Kenya, GAIN worked with the UNICEF to prevent diarrhoea through promoting hygiene and sanitation education in schools. As a result, UNILEVER managed to increase its sales of the soap

Lifebuoy by 7%. In India, GAIN is lobbying to introduce zinc in complementary foods and vitamin A for the newborn, as well as wheat flour fortified with iron in national food delivery systems such as Mid Day Meals, ICDS's Supplementary Nutrition Programme and the Public Distribution System. There is also pressure to introduce micronutrient enhanced ready-to-eat foods such as "Plumpy Nut" in food programmes. This raises the question of who will decide what Indian children should eat – health and nutrition experts from India, or corporate driven bodies from abroad.

Attempts by groups such as GAIN to influence national policies and programmes highlight the vulnerability of our public food delivery systems to commercial interests. The GAIN Business Alliance is trying to introduce fortified/ready-to-eat foods in the ICDS Supplementary Nutrition Programme, PDS, etc. People's voices and protests from across the country successfully prevented the commercialization of the Mid Day Meal Scheme. Similar protests and actions are needed to stop the commercialization of other schemes to prevent hunger and malnutrition.

In poor families, continued deficiencies are not related as much to lack of will to give the right foods in adequate quantities, as to their economic inability to procure such foods. Short term solutions such as giving enriched foods or micronutrient supplement are not the answer to malnutrition. Instead, each family needs to be enabled to procure enough of the right foods, through programmes to eradicate poverty, control spiralling food prices, and encourage production of food crops rather than cash crops and so on.