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TOWARDS INDIA'S NUTRITIONAL WELL BEING: Need for a "second wind" C. Gopalan

The nutrition scene in India had shown encouraging signs of improvement in the seventies and eighties of the last century. The gloomy neo-Malthusian predictions of the early sixties with regard to India's "fate" had been belied. Large-scale famines were banished. Classical nutritional deficiency disorders such as beriberi, keratomalacia, pellagra and kwashiorkor, which were once major public health problems had been successfully eliminated and increased child survival had been achieved. Infant mortality rate was reduced and life expectancy had increased. Food production more than kept pace with population growth. India thus seemed well on the road towards achieving nutritional wellbeing for its people.

Unfortunately, however, in recent years the movement for nutritional upliftment seems to have slackened considerably. Indeed, the present Food and Nutrition scenario in India must cause serious concern to policy makers and nutrition scientists.

Current National Nutrition Scene

India is today "shining"— but only at the top! We have had impressive success on the macroeconomic front (as indicated by the GDP) at the overall national level. However, there are disturbing indications that such success is not being reflected in improved nutritional status in rural households. The nutritive quality of diets in poor households has actually deteriorated. The average energy intake has declined¹. Pulses and vegetables,

which are the main sources of micro-nutrients in vegetarian diets, hardly find a place in poor household diets today¹.

Our agricultural sector, on which we depend heavily for food production, is in disarray. Land under foodgrain cultivation is shrinking; land holdings are becoming increasingly fragmented; yields per hectare continue to remain low². Small farmers are today a disheartened, demoralised lot. It now seems doubtful whether food production will continue to keep pace with population growth. Also, the pattern of food production is not in consonance with national nutritional needs. There appears to be no serious attempt to correct the distortions in the pattern of food production induced by the Green Revolution. Food production policies seem to be largely driven by market forces and export considerations. Though, vast investments are claimed to have been made in the development of horticulture, the average intake of fruits and vegetables in rural households continues to be around 40 g daily³ — a mere one-tenth of intakes recommended and being promoted in countries like the USA.

Our health sector has also not been a shining success. Over 80 % of our pregnant women still continue to suffer from anaemia⁴ and 30 % of infants of the poor are of low birth weight. Over 50% of children under-five are stunted⁵. These are disheartening figures. The promises of good performance both in the agricultural and health sector, which were evident

even two decades ago, seem to have receded now. Even Bangladesh, which was far below India in the health/nutrition field, has now overtaken us.

While, on the one hand, nutrition related problems of the poor persist; on the other, chronic degenerative diseases like obesity, diabetes and syndrome X are escalating among affluent sections⁶⁻⁸. Thus, macro-economic success does not appear to have beneficially influenced nutritional wellbeing of either the poor or the well to do.

It is now obvious that nutritional upliftment of our people cannot come about as an automatic result of macro-economic development. Special efforts are necessary and this is where nutrition scientists will have to play an important part. It would appear that globalisation, at least in the short run, could aggravate social disparities. Single-minded pursuit of economic reforms with relative neglect of important sectors such as health, nutrition and education cannot contribute to overall national development

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Government's Response

Our Government has introduced several programmes and plans aimed at improving nutritional status. I understand that there are over a dozen such major programmes, which are ostensibly related to nutritional upliftment and poverty reduction. The concepts underlying some of these plans are, no doubt, laudable, but the implementation of most of these programmes at the field level has been extremely unsatisfactory. Some governmental programmes are populist in nature and may be regarded as "relief" rather than "development" programmes. Large-scale supplementary feeding programmes, for example, which are not accompanied by plans for income generation and changes in dietary habits, are only likely to push the problem of poverty and undernutrition under the carpet.

The Prime Minister of India has stressed the importance of "convergence" of related development programme at the field level. What he has apparently pleaded for is a coordination of these programmes in order to facilitate a synergistic effect of these programmes on the target groups. However, there is no such "convergence" even at the central level. Indeed, there are today fourteen central ministries, which are dealing with some aspect or the other of food and nutrition and there seems to be very little coordination or 'convergence' in their activity. Indeed, today, no mechanism seems to exist even at the central government level for forming a coherent Nutrition Policy based on inputs from these different ministries. We do not even have an institutional mechanism for continuous monitoring of dietary habits and nutritional status of our people. While the National Nutrition Monitoring Bureau (formed 30 years ago), has been allowed to languish, we depend now on scrappy information being provided by surveys conducted by foreign agencies. It would appear that, nutritional upliftment is being seen not as a direct objective of national planning but as a derived by-product of ongoing development programmes.

Need for a "Peoples Movement"

It must now be clear that the task of achieving nutritional upliftment of our people cannot be entirely left to the Government and government de-

partments. Nutritional upliftment must become a "peoples movement" and nutrition scientists must take a lead in this regard. Public and private participation in industry and in the corporate sector is being widely advocated, but when it comes to health and nutrition, we seem to depend entirely on the governmental machinery. As long as this attitude persists, health and nutrition programmes will continue to suffer from the current inadequacies and poor implementation.

The present nutrition scenario offers a challenge and an opportunity to nutrition scientists. The active participation of the "informed" private sector in programmes for health promotion and nutritional upliftment is essential. Nutrition scientists constitute the "informed" private sector, which should be given opportunities to partner the Government in the formulation and implementation of nutrition programmes.

The Role of Academia

India has a vast scientific infrastructure, which should be enabled and empowered to participate in health and nutrition programmes. There are today nearly 186 recognized medical colleges in the country, with Departments of Preventive Medicine. These departments do not currently enjoy adequate focus and prestige in the medical hierarchy. An imaginative programme, which facilitates the participation of these departments in the scientific aspects of implementing National Health and Nutrition Programmes, would not only benefit the programmes, but also serve to increase the relevance and importance of these departments. The teaching of Preventive Medicine in medical colleges will improve if students get the opportunity to actually involve themselves in nation-building programmes as part of their field training.

There are also nearly 400 Home Science colleges in India with active Departments of Food and Nutrition. Instead of being engaged in theoretical exercises, as at present, the students of these departments should be enabled to participate in real-life-programmes in the field and to contribute to their better implementation. There are also Agricultural colleges which can play an important part in helping in the formulation of scientific methods for implementing food pro-

duction programmes.

There are many potential areas for partnership between these educational institutions and the government in the implementation of nutrition programmes. Four important areas, where such partnerships should be immediately forged are briefly mentioned below.

● **Integrated Child Development Services (ICDS):** ICDS is a major "child-development and nutrition" project for which we are spending more than Rs 3500 crores annually. The concepts underlying this programme are laudable; but in actual practice, the implementation of this programme at the peripheral level has had several deficiencies. Children under three years of age, mothers and adolescent girls – crucial groups from the nutritional point of view are not being reached. The main emphasis of the programme seems to be on supplementary feeding, whereas education with regard to child rearing and nutrition receive poor attention. There is little interaction between the health workers and ICDS workers at the field level. An imaginative arrangement to involve the Departments of Preventive Medicine of our medical colleges in the scientific implementation of this programme at field level would be of immense advantage, and could help to correct some of these deficiencies. Apart from improving the programme itself, such participation could also sensitise the students and make them more aware of the real problems of our people and of practical ways of combating them.

● **Mid-day Meal programmes in schools:** Following on the Supreme Court's order, the Mid-day Meal programme in schools has now become a national programme and several States are trying to implement it. The Mid-day Meal programme can facilitate better enrolment and contribute to better learning. But, by itself this programme cannot solve the nutritional problems of children nor improve the school system. In order to ensure that this programme functions along healthy lines, the caterers and contractors in charge of supplying the food should be trained and motivated to ensure the nutritive quality of foods; and teachers, students and parents should be sensitised so that the programme becomes a "peoples

movement". The convergence of a School Health Service will greatly add to the benefits of the programme. All this should go hand in hand, with an overall improvement in the school system. With such transformation, the school system can become a powerful channel for the improvement of the health and nutrition status of not only the students, but of the whole school community, including parents as well. The Departments of Food and Nutrition in the Home science Colleges should be involved in implementing such an enlarged concept of the Mid-day Meal programme. This is a great opportunity for home science students to actively contribute to nation building, even while they learn.

● **Mobilizing the youth:** The children and the youth of today are the nation's future. Yet, at present, there are no imaginative programmes for sensitising the young people, especially, the adolescents, to the health problems we face. I have been pleading for a "National Health Scout Movement", which should include both boys and girls in order to make them aware of the crucial importance of promoting health and nutritional well being of our people. This is again an area in which educational institutions can play an important role. A vigorous 'Youth Movement' towards health promotion and nutritional upliftment could transform the current health and nutrition scenario in the country. A National Health Scout Movement could be valuable training to the students and an enormous service to the community.

● **Nutrition Education:** Even in the current context of poverty, much can be done to improve the nutritive quality of diets in our homes through the judicious use of inexpensive nutritious foods. In the absence of proper nutrition education today, several nutritious foods, which are right at the doorsteps of the poor, are not put to optimal use. In a publication of the Nutrition Foundation of India, Dr. Subhadra Sesadhri had prepared calendars, listing various vitamin A rich vegetables that are available in different seasons and in different regions of the country, which could form a part of regular household diets⁹. Home science colleges could adopt and improve on this information in order to mount a vigorous education programme to bring about an improvement in diets in households. A focused Nutrition Programme, designed

particularly to promote the intake of inexpensive foods of high nutritive value, is extremely important, but is at present not being attempted on any significant scale. Food and Nutrition Departments of Home Science colleges could play a very important part in organising such a substantial programme of nutrition education.

It is not only the poor, but also the middle-class that stands in need of nutrition education today. The escalation of chronic degenerative diseases and the rising prevalence of insulin resistance may be partly attributed to the diminished intake of pulses in the diets of middle class households. Ultimately, nutritional well being can be achieved only through a 'food-based' and not a drug based approach. Pills and tablets can never be effective substitutes for balanced diets. We must resist the ongoing attempts of commercial exploitation of malnutrition. Our attempt must be to achieve appropriate dietary diversification in order that diets of even our poor households are balanced and of high nutritive value. A sound and sustained programme of nutrition education may be helpful in this regard.

Conclusion

The Movement for ensuring India's nutritional wellbeing stands badly in need of a "second wind". The challenge for Nutrition Scientists is to awaken the Government, policy makers and the public to the need for according Nutrition its rightful place in the National Developmental Agenda; and to revive the élan and recapture the spirit of the seventies and eighties, in order to transform the current bleak nutrition scene. We have the power and the responsibility to shape the future.

(Based on the Inaugural Address to the XXXVII Annual Meeting of the Nutrition Society of India on 18.11.2005 at the National Institute of Nutrition)

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NUTRITION NEWS

The XXXVII Annual Conference of Nutrition Society of India was held at the National Institute of Nutrition, Hyderabad on 17-18 of November 2005. Over 600 delegates attended the conference. Dr C Gopalan's inaugural address set the tone and tenor of the meeting. Dr Shanti Ghosh delivered the Gopalan Oration, "For better health and nutrition, prioritise the young child" on 17.11.2005. Dr Subadra Sheshadri delivered the Seventeenth Srikantia lecture "The persistent problem of iron deficiency anaemia and its consequences: a life cycle approach is critical for its control" on 18.11.2005.

Mrs Saakshi Bhushan from NFI presented a paper on "Comparison of techniques for body fat measurement in children" and was awarded the Ramanathan award for the best oral presentation in the free communications session.

Kamla Puri Sabharwal Memorial Lecture

Dr C S Pandav delivered the XXXII Kamla Puri Sabharwal Memorial Lecture on 25.11.2005 at Lady Irwin College, New Delhi. The title of the lecture was "Partnerships for Public Health: Linking Knowledge to Action".

His lecture dealt with his experiences in improving IDD program in Tamil Nadu and Kerala in partnership with all stake holders.