WELL-BEING THROUGH SNACKS

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- Identified Nutritional Gaps in India
- Nutrition & well-being
- Need and Want of Nutrition
- Tools to cater Nutrition
- Assurance framework to impart Nutrition: Tech & Regulatory Norms
- Glimpse of few initiatives taken to tackle the issue



WELL BEING

the state of being comfortable, <u>healthy</u>, or happy......





NUTRITION & WELL BEING

- <u>Nutrition</u> is a critical part of <u>health and development</u>. Better nutrition is related to improved infant, child and maternal health, stronger immune systems, safer pregnancy and childbirth, lower risk of non-communicable diseases (such as diabetes and cardiovascular disease), and longevity.
- Healthy children learn better. People with adequate nutrition are more productive and can create opportunities to gradually break the cycles of poverty and hunger.
- Malnutrition, in every form, presents significant threats to human health.
 Today the world faces a <u>double burden of malnutrition</u> that includes both
 undernutrition and overweight, especially in low- and middle-income
 countries.

Source: WHO/ Home/Health topics/Nutrition



PROFOUND PSYCHO-SOCIAL, HEALTH AND ECONOMIC BENEFITS



Adults undernourished as children earn at least 20% less than those that were not



Undernutrition and micronutrient deficiencies cost up to \$2.1 trillion per year



Child and maternal malnutrition is by far the largest nutritionrelated health burden in the world



The cost of treating overweight or obese is equal to 4–9% of most countries' GDP



The cost of obesity & overweight related NCDs was estimated at US\$ 1.4 trillion in 2010. By 2030, global decline in productivity due to illness and death from NCDs will reach \$35 trillion.



Asia and Africa lose 11% of GNP every year owing to poor nutrition



Malnutrition in the 1" two years of life reduces the education potential of children

COST OF MALNUTRITION

NUTRITION IS THE BEST INVESTMENT

Cost-benefit analyses of nutrition interventions report a return of ~18:1 per child

With adult height, a 1-cm increase in stature is associated with a 4% increase in wages for men and a 6% increase in wages for women





HEALTH OF YOUNG INDIA: DUAL BURDEN

Malnutrition in school-age children (5–9 years)

- 22% of school-age children were stunted (HAZ <-2 SD)
- 10% of school-age children were underweight (WAZ <-2 SD)
- 23% of school-age children were thin (BMI-for-age <-2 SD)
- 4% of school-age children were overweight or obese (BMI-for-age >+1 SD)
- 2% of school-age children were overweight as measured by TSFT (TSFT for-age >+1
 SD)
- 8% of school-age children were overweight as measured by SSFT (SSFT for-age >+1
 SD)
- 2% of school-age children had abdominal obesity (waist circumference for-age >+1
 SD)

Malnutrition in adolescents (10–19 years)

- 24% of adolescents were thin for their age (BMI-for-age <-2 SD)
- 5% of adolescents were overweight or obese (BMI-for-age >+1 SD)
- 4% of adolescents were overweight as measured by TSFT (TSFT-for-age >+1 SD)
- 6% of adolescents were overweight as measured by SSFT (SSFT-for-age >+1 SD)
- 2% of adolescents had abdominal obesity (waist circumference-for-age >+1 SD)

Problem statements

Stunting
Underweight
Thin
Overweight
Obese

Important to consider

Age range 5 – 19 yrs

Comprehensive National Nutrition Survey

HEALTH OF YOUNG INDIA: DUAL BURDEN

Chapter 8: Markers of non-communicable diseases

Key findings

- There is a growing risk of non-communicable diseases among children aged 5 to 9 years and adolescents aged 10–19 years in India
- One in ten school-age children and adolescents were pre-diabetic with fasting plasma glucose >100 mg/dl & <=126 mg/dl or with glycosylated haemoglobin (HbA1c) between 5.7%–6.4%
- One percent of school-age children and adolescents were diabetic with fasting plasma glucose >126 mg/dl
- Three percent of school-age children and 4% of adolescents had high total cholesterol (>= 200 g/dl) and high low-density lipoprotein (LDL) (>= 130 mg/dl)
- One-quarter (26%) of school-age children and 28% of adolescents had low highdensity lipoprotein (HDL) (<40 mg/dl)
- One-third (34%) of school-age children (>= 100 mg/dl) and 16% of adolescents (>= 130 mg/dl) had high serum triglycerides
- Seven percent of school-age children and adolescents were at risk for chronic kidney disease (serum creatinine > 0.7 mg/dl for 5–12 years and 1.0 mg/dl for >= 13 years)
- Five percent of adolescents were classified as having hypertension (systolic blood pressure >139 mmHg or diastolic blood pressure >89 mmHg)

Problem statement

Growing risk of NCDs

Bio-Markers indicates
- Diabetes, High
Cholesterol, Renal
malfunction,
Hypertension

Important to consider

Age range 5-19 yrs

NEED OF NUTRITION

- Daily Maintenance
- Food supplements during illness recovery
- Nutrition for Allergic or intolerants
- Any specific population level requirements

WANT OF NUTRITION



Special dietary requirements

- Sports nutrition
- Heavy Physical activity
- Targeted nutrition



HIDDEN HUNGER

- <u>Hidden hunger</u> occurs when the quality of <u>food people eat does not meet their</u> <u>nutrient requirements</u>, so the food is <u>deficient in micronutrients</u> such as the vitamins and minerals that they need for their growth and development.(WHO)
- 4th International Congress 2019 on Hidden Hunger pledged to encourage the dialogue between **scientists**, **policy-makers** and representatives of **NGOs** and the **private sector**.

Source: 4th International Congress Hidden Hunger "Hidden hunger and the transformation of food systems: How to combat the double burden of malnutrition?

- Industry has been trying to address this issue wholly or partially with nutritional supplements via various formats like Meal, breakfast cereals, Snack formats like Biscuits, Beverages, Nut bars, fruits & more, however still there is a huge scope to strike a balance to have snacks with right nutrients for people across the social strata at affordable price.
- It's an all party call.. (policies, innovations, scale, outreach, awareness)



INITIATIVES TO FULFIL NUTRITIONAL GAPS (GOVT, NGO AND CORPORATES)

MID DAY MEAL SCHEME



Industry CSR Programs



NGOs



POSSIBLE TOOLS TO CATER NUTRITION

Routine meals having balanced nutritional content

Designed diets/ formats to meet specific nutrition

Regular Snacks catering palate and contributing to nutrition

Fruits, Nuts, home cooked & prepacked snacks all are part of regular snacks.

Established deficiencies: Need medical interventions



FOOD TRENDS IN INDIA?

EXECUTIVE SUMMARY

THE INDIAN CITIZENS OF SNACKING

STUDY COMBINING MONDELEZ INTERNATIONAL'S INDIAN SNACKING INSIGHTS WITH NEW CONSUMER RESEARCH FROM THE HARRIS POLL REVEALS THE RISE OF THE \$1.2 TRILLION SNACKING OPPORTUNITY AND EXAMINES THE EVOLVING ROLE SNACKING PLAYS IN THE FUTURE OF FOOD IN INDIA: FROM CONNECTING ACROSS CULTURES, DEFINING IDENTITY TO DELIVERING ON TRENDS LIKE FUNCTIONAL AND EMOTIONAL HEALTH AND WELLBEING.

As the snacking market continues to grow globally, people are turning to these personal points of daily satisfaction as a common ground for shared experiences, connections, and identity. This report explores the nature of daily snacking moments, mindsets, and rituals that fuel not only our bodies but also our individual and cultural identities.

Key research findings in India include:

SNACKS ARE INCREASINGLY BEING SWAPPED FOR MEALS IN INDIA

The average Indian adult says they now eat more snacks than meals on a given day, with 7 in 10 saying both that they snack more today than they did a year ago (71%, +22% global average), and that they plan to snack more often in the next year (67%, +25% global average).

SNACKING PROVIDES INDIANS WITH A SOURCE OF IDENTITY AND CULTURAL EXPLORATION

Indians are more likely than those in other countries to participate in cultural snacking rituals daily (47%, +15%, global average), with 3 in 4 Indian adults saying that food is a major part of their identity (75%). Furthermore, 7 in 10 say they connect with their culture through the snacks they eat (68%, +10% global average).

INDIANS PRIORITIZE BALANCED INDULGENCE VIA BITE-SIZED SNACKS

80% of Indian adults agree that there is a time and a place for indulgent snacks, and a time and a place for healthy ones – and indeed that desire for balance is reflected in their snacking preferences. While The #1 reason Indians snack is to find quiet moments of 'me time' in their busy days (84%), 83% say they look for snacks that are portion-controlled (+18% global average) to keep indulgences manageable.

2019 INDIAN CONSUMER SNACKING TRENDS STUDY BY:

Mondelez
International
SNACKING MADE RIGHT

The Harris Poll
Marris insights & Analytics LLC, A Stagwell Company

IN INDIA, SNACKING IS A SOURCE OF IDENTITY AND CULTURAL EXPLORATION

AROUND HALF OF INDIAN ADULTS PARTICIPATE IN CULTURAL SNACKING RITUALS DAILY (47%, +15 GLOBAL AVERAGE)

75%

"SNACKING IS A WAY TO **REMIND MYSELF OF HOME."** **75%**

"FOOD IS A MAJOR PART OF MY IDENTITY."

68%

"I CONNECT WITH MY CULTURE THROUGH THE SNACKS I EAT."

+10% GLOBAL AVERAGE

BALANCED INDULGENCE IS A PRIORITY FOR INDIAN SNACKERS

79% OF INDIAN ADULTS SAY, "I APPRECIATE HAVING THE OPTION OF BOTH HEALTHY AND INDULGENT SNACKS DEPENDING ON THE MOMENT OF NEED"



80%

"THERE IS A TIME AND PLACE FOR HEALTHY SNACKS, AND A TIME AND PLACE FOR INDULGENT ONES."



77%

"WHEN I SNACK FOR INDULGENCE OR AS A TREAT, +11% GLOBAL AVERAGE IT'S LESS IMPORTANT TO MAKE A HEALTHIER CHOICE."



73% +10% GLOBAL AVERAGE

"I WOULD LIKE TO SPEND MORE TIME SAVORING SNACKS -HOW THE FOOD SMELLS, FEELS AND TASTES."

INDIANS USE SNACKS TO MANAGE NUTRITION AND CONTROL PORTION

ONE-THIRD OF INDIAN ADULTS SAY, COMPARED TO LAST YEAR, "I FEEL MORE EMPOWERED TO MAKE THE RIGHT SNACK CHOICE FOR ME" (34%)

SNACKING PROMOTES HEALTHY PRIORITIES

79%

"I OFTEN LOOK AT NUTRITION INFORMATION ON SNACKS BEFORE BUYING THEM."

+12% GLOBAL AVERAGE

79%

"MY CHOICE OF SNACKS REFLECTS
MY OVERALL HEALTHY LIFESTYLE
OBJECTIVES."

+12% GLOBAL AVERAGE

PORTION CONTROL HELPS MANAGE NUTRITION

83%

"I LOOK FOR SNACKS THAT ARE PORTION CONTROLLED."

+18% GLOBAL AVERAGE

78%

"SNACKING IS A GOOD WAY TO CONTROL THE PORTIONS I EAT."

+12% GLOBAL AVERAGE



SNACKS AS TOOL OF NUTRITION (ATTRIBUTES)

- Quick bites, in controlled portions (100-120 Kcal range) can be good vehicles
 to deliver part of daily nutrition (Macro & Micro)
- Well designed snacks store quality nutrition for longer time (shelf life).
- Convenience of portability make snack a good tool, readily available and consumable format of food with nutrition.
- Nutritional programs/initiatives can consider including designed for purpose snacks to deliver quality nutrition. e.g. Poshan Abhiyan

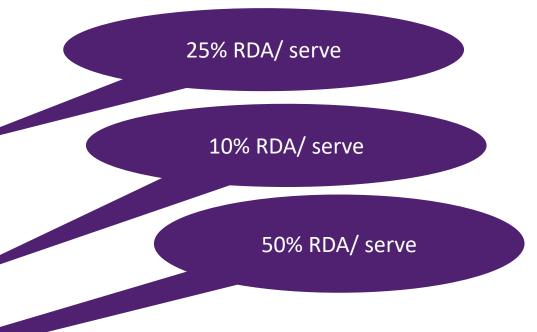
Call out: Development of Snacks should make **business & social sense** through formats, volumes, affordable price & nutritional value



EXAMPLE: % RDA THROUGH SNACKS

Nutritional Values Per 100g Per 100g Nutritional Nutritional Energy(kcal) Biotin(mcg) Vitamin B9 (Folic Acid)(mcg) Protein(g) Carbohydrate(g) Vitamin B12(mcg) (of which sugar (sucrose*)(g) Vitamin A(mcg) Vitamin C(mg) Fat(g) (of which Saturated Fat)(g) Copper(mg) Selenium(mcg) Trans Fat(g) 31.5 Vitamin B1 (Thiamine)(mg) Zinc(mg) Vitamin B2 (Riboflavine)(mg) 1.4 Vitamin D(mcg) Vitamin B3 (Niacin)(mg) 18.0 Phosphorus(mg) 230.0 Sodium(mg) Vitamin B5 (Pantothenic acid) Vitamin B6 (Pyridoxine)(mg) 150 Iodine(mcg) 40.0 Iron(mg)

10-50% RDA of Micro Nutrients





WELL-BEING PHILOSOPHY GUIDES OUR STRATEGY

- Well-being has been evolving as more holistic and in line with people's lifestyle & values.
- **Consumers** are getting increasingly aware of the connection between what they eat and how they feel —**physically & emotionally**.
- Right balance of Nutrition & Indulgence in moderation is an important part of Well-being.
- We believe that our consumers shouldn't have to choose between snacking and eating right.
- As the world's largest snack company we're committed to meet evolving Well-being needs offer choices for need and want of consumers by expanding our offerings & empowering them to snack mindfully.



ASSURANCE TO IMPART SAFE NUTRITION: TECH & REGULATORY NORMS

- Set standards for products and ingredients
- Thorough evaluation and licensing process for Proprietary products
- Approval for New ingredient/ product
- Label information mandate
- Discussion on replacement / reduction tools on ingredients
- Claims & Consumer communication criteria
- Guidance for use of Macro and Micro nutrients e.g.....

11.	Protein	Source*	10% of RDA per 100 g for solids 5% of RDA per 100 ml for liquids or 5% of RDA per 100 kcal
		Rich / High *	20% of RDA per 100 g for solids 10% of RDA per 100 ml for liquids or 10% of RDA per 100 kcal
12.	Vitamin(s) and/or Mineral(s)	Source	The food provides at least 15% of RDA of the vitamin/mineral per 100g for solids or 7.5% of RDA of the vitamin/mineral per 100 ml for liquids
		High	The food provides at least 30% of RDA per 100 g for solids or 15% of RDA per 100 ml for liquids
13.	Sodium	Low	Product contains not more than 0.12 g of sodium per 100 g for solids or 100 ml for liquids.
		Very low	Product contains not more than 0.04 g of sodium per 100 g for solids or 100 ml for liquids.
		Sodium free	Product contains not more than 0.005g of sodium per 100 g for solids or 100 ml for liquids.
14.	Dietary fibre	Source	Product contains at least 3 g of fibre per 100 g or 1.5 g per 100kcal
		High Or Rich	The product contains at least 6 g per 100 g or 3 g per 100 kcal



THANK YOU

