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The second Lancet Series on Maternal and Child Nutrition was launched on 28th June 2013 in India, after its launch in London on 6th June, with the objective to enhance political commitment and investment on nutrition. Among the speakers at the launch were two with acknowledged conflict of interest – Dr. Robert Black and Mr. Venkatesh Mannar. (sitting on Nestle Creating Shared Value Advisory Committee1.

Opened by PHFI, with Jairam Ramesh in Chair. PHFI will come out with first ‘India Health Report’ soon with a focus on nutrition. Co-hosts include IFPRI, MI, and Coalition for Nutrition Security. Dr Palo of Save the children spoke for coalition announcing they will review the coalition document and publish the revised on by end of year.

The four speakers highlighted the main conclusions/recommendations of the four papers, which was all made out of Lancet. Presenting the evidence the 10 recommended interventions, Dr Black highlighted how each of the nutrition specific intervention has to play a role and action is required at many levels and shared results of the modeling done by the team to save child deaths. Alderman presented the paper on nutrition-sensitive interventions highlighted importance of agricultural, child development, Water and sanitation etc as these have been ignored. Venktesh Mannar and Purnima Menon presented the paper 4 on creating the environment for nutrition action shared that country needs to build capacity to tackle this and private sector needs to be involved.

During the question answer session, Dr NK Sethi, who earlier used to work in Planning commission, now in NIHFW, went on the grab the SUN opportunity, “SUN movement is a global movement.... India is not a part of SUN, Pakistan, Bangladesh, Nepal, Sri Lanka are part of it. It has a network of UN organizations, business network, Civil Society network, global network and countries can utilize the expertise of these networks in whichever way it suits you”

When asked a question on why management of SAM, which includes using RUTF, finds number 1 position among the top 10 interventions to reduce child mortality; when evidence as mentioned in same paper does not support it?

Answer from authors .. “. The best judgement of experts is : 15% will require consultative management and 85% managed by community workers with careful supervision. The therapeutic

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1 Conflicts of interests
REB serves on the Boards of the Micronutrient Initiative, Vitamin Angels, the Child Health and Nutrition Research Initiative, and the Nestle Creating Shared Value Advisory Committee. VM serves on the Nestle Creating Shared Value Advisory Committee. MdO is a staff member of the World Health Organization. MdO alone is responsible for the views expressed in this publication; they do not necessarily represent the decisions or policies of the World Health Organization. The other authors declare that they have no conflicts of interest. As corresponding author Robert E Black states that he had full access to all data and final responsibility for the decision to submit for publication.
feeding requires nutrition requirements with specific food composition and procurement is local...use material in generic way....foods made locally....not required to purchase from external commercial source. I know this is controversial area we have never said in paper that there is a necessity to buying from external source that this could be as well food that is prepared with certain quality and characteristics that is necessary for therapeutic feeding and standardized diets. I think our recommendations are consistent with statement made by your IAP on endorsing RUTF and using these initials—we have not been contrary to your own recommendations” When asked further in private, about his views regarding the newly published Cochrane reviews on SAM and MAM, Robert Black applied, “I don’t have any vested interest, new evidence keeps coming it has to be looked into.”

Question to RE Black by HPS Sachdev on why only product interventions are modeled, and not the nutrition sensitive ones like maternal education/water sanitation etc.

Response was like this “..we have much more information on effects of nutrition specific interventions as was found in the paper 3.... where there is tremendous expectation regarding the role of agricultural social protection for eg. on specific outcomes of child mortality specifically particularly on stunting evidence is still very limited.......The message is very much nutrition improvement is going to take multisectoral approach more intervention approach and particular nutrition specific interventions will not solve entire problem.....”.

Question on why allow private sector to generate evidence on PPPs. Is it independent? and why push for private sector when it is a hindrance in creating regulations and its implementation?

“Very tricky...we fully recognise the negative role played by formula, soft drink and fast food industry....the only space where we see opportunities are like particularly in logistics, supply chain, ICT, even in works like telephone counselling on Ex.BF requires use of private sector using ICT network and things like that....we can route it differently not just food sector as we recognize it as especially vulnerable, we could use other sectors we can look at it in other ways in which we can use the SAFE private sector” ” “On issue of evidence generation we don’t involve private sector at all.......it needs to be independent”

When shown in private what is written in the journal, the author showed surprise and we agreed to talk about it more later.

Venkatesh Mannar said, “SUN is totally a voluntary movement and network which calls for number of sectors to come together with common agenda for improving nutrition. India has not joined SUN, ......... I don’t see any conflict in what SUN is doing or India is doing. We are at liberty to develop our own framework and plans....on private sector comment is that any day we see in country like India the growth of private sector food-pharma and every other sector. One way is to ignore and say we are not going to deal with them and the other approach is the role of government to make roots for engagement of private sector...roots by which the private sector will function as a responsible corporate citizen and make sure that they do good and not harm to the society...so i think engagement with clear rules and monitoring”

Mr. Jairam Ramesh, the Minister for Rural Development, who was Chief Guest, in his address also questioned the issues on agriculture and nutrition, as it could lead to introducing Genetically Modified Crops as one company Monsanto controls 95% of worlds seeds. He made a strong point of community involvement giving example of AP, Self help group work, in 4200 villages at the cost of Rs 35 a day. At this point he thought neither government or private delivers or works. He particularly highlighted the easy jump from public good to private sector control when looking for
technological solutions to malnutrition. He also mentioned that government is not so weak to take on all what Lancet says. He made another point that India needs to monitor nutrition more closely. NFHS 3 is 8 years old.

This was followed by a panel discussion with Dr. HPS Sachdev, Dr. Vinod Paul, Ms. Vandana Krishna and Ms. Neerja Chowdhury and Dr. Srinath Reddy of PFHI moderated the discussion. On the situation in India and what the country needs to do? Vinod Paul also discounted the evidence presented in at least 4 out of 10 interventions based on India specific List estimates done in February 2013. He also recommended, an independent “scientific Commission on Nutrition” without having ‘activists’ for increasing understanding of undernutrition including its goals for reduction. The solution of giving RUTF and RUSF was debated, with Ms. Vandana Krishna, Director ICDS Maharashtra sharing her experience of using locally cooked foods for successfully treating SAM. HPS Sachdev in his comments made remarks about data on nutrition. Neerja Chowdhury recommended to push politically by setting of State missions.

Mira Shiva made a significant comment on the “science” and reminded about traditional knowledge that should be kept in mind.

**Observations:**

On the morning of the launch, newspapers had carried details of a letter issued by seven experts in child health and nutrition, questioning the conclusions of the Lancet Series on the basis of science and conflict of interest. It appeared as if these newspaper reports had made the speakers defensive. As eight interventions are based on nutritional products, the point was made clearly that private sector wants its role. The audience challenged both the science behind the series and the call to involve the private sector in nutrition interventions. The discomfort of this was especially evident in this session, where the authors who presented either underplayed the challenges or tried to defend their positions saying that the private sector was too well-trenched to be ignored, and trust needed to be built. Authors talked about telephone industry and its role, and denied that they are supporting to bring in all private sector. In the paper 4, the authors have cautioned indirectly against “missed opportunity” because of the distrust of the food industry by a few organizations and “tension”. It lauded the SUN initiative, especially the creation of the SUN Business Network.

Little about the partners /organisers in India: The Lancet series launch on 28th June was sponsored by coalition of Nutrition Security, that has never set its rules to avoid conflicts of interests, and has GAIN in its work, Save the children is funded by Pepsi and many other private sectors. IFPRI, that organised an international event in 2011 on Nutrition and agriculture funded by Gates foundation and Pepsi, Micronutrient Initiative has a clear role in promoting micro -nutrients and PHFI. This is what Pepsi representative said, We would need market based solutions that will leverage the capabilities of food companies like PepsiCo that have competencies across the value chain ranging from agriculture, processing and mass distribution.

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