

This food regulator needs to step up to the plate

The FSSAI should be impartial and uninfluenced by the same food industry which it has to control and regulate



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In science and academics, the search for the truth is the main driving force for advancement. Ego and stubbornness are stumbling blocks. When it comes to policymaking for millions of people in India with regard to their health and safety, it should be guided by science and hard evidence generated from systematic research.

The interview, “Expert panel will study star rating: FSSAI CEO” (*The Hindu*, Inside pages, May 6, 2022), with Arun Singhal, CEO, Food Safety and Standards Authority of India (FSSAI), reflects a different story. The FSSAI is a regulator on healthy and safe foods produced in the country, constituted by the government, for the people and funded by tax-payer’s money. It should be impartial and uninfluenced by the same food industry which it has to control and regulate.

“Six rounds of stake holder consultations already conducted” – a line in the interview – do not exempt the FSSAI from any more consultations if pending issues have still to be sorted out. Unresolved issues may require more consultations with the new evidence generated. If the consultation is dominated by the industry, how can consumer interest be protected adequately? The classification of foods, as healthy or unhealthy, is a technical or

professional step. This should be decided by a governance body such as the FSSAI or food and nutrition experts or professionals. Not by the food industry or manufacturers.

There are health concerns

What is our concern? The consumption of junk foods that are high in calories, sugar, fat and salt lead to the early onset of obesity among adolescents, insulin insufficiency, and in adulthood results in diabetes, hypertension, cardiac and renal diseases. We need to reduce the production, the marketing and the availability of such unhealthy foods and even if available, change consumer behaviour in purchasing such processed food by due warning of their contents using the labels on the packets. We appeal to their reasoning and responsible decision making to dissuade them from purchasing dangerous foods.

The World Health Organization (WHO) has issued a threshold for sugar, salt, fat, and calories per 100 grams of processed food packaged or 100 ml of liquid beverages bottled. Unless we generate competing technical data for the Indian population, we have to abide by WHO norms. A technical group set up by the FSSAI has undertaken an evaluation of processed foods on the racks of Indian supermarkets and found 96% of products for one component and 62.8% for three components are above WHO thresholds. We cannot relax thresholds to suit the industry but industry must alter its composition to healthy limits. The FSSAI must ensure that.

Any order or guideline issued in



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public interest must be mandatory from day one. We cannot have the flexibility of voluntary adoption and staggered implementation as suggested by Mr. Singhal. The regulator cannot be pleading on behalf of food producers with various untenable excuses to not implement its own stipulations. That is an absolute abdication of its power and purpose. It does not make sense to allow a voluntary adoption of rules, and if someone does not adopt the regulation, relaxing the norms later. Will one ever allow voluntary adoption of wearing helmets while riding two wheelers or locking a seat belt while driving a four-wheeler over a long period and then agree for a relaxation of norms if compliance is poor? Is this a regulator’s way of functioning?

No one denies that the Indian Institute of Management Ahmedabad – mentioned in the interview as having conducted a consumer survey involving 20,500 people – is an institution of repute. So too are the other IIMs in the country, the Indian Council of Medical Research, the International Institute for Population Sciences, the All India Institute of Medical Sciences, the National Institute of Nutrition Hyderabad. Were they invited and given a chance to bid for such a

large expensive study? Financial regulations mandate requesting for a minimum three bids.

On package labelling

So how is the front of package labelling (FOPL) to be done? Is it by the methods of Multiple Traffic Lights (MTL), Monochrome GDA, Nutri-Score, Warning Labels, and Health Star Rating (HSR)? If the objective of the study is to find out “which kind of FOPL is most comprehensible, acceptable and yet effective in influencing purchase intentions”, the methodology must meet that objective, it would be ideal to provide the crystallised information in the best acceptable way for consumption and leave it open for the consumer to decide. We have done it with tobacco packs and alcohol bottles.

The participants of the study must have the capacity to objectively evaluate the various formats of FOPL based on the information content. They must have the ability to compare and identify least harmful, or identify higher content than recommended. Why do we seek the opinion of the consumer who is not knowledgeable or unlettered? It is pointless.

The methodology states that the profile of the respondent is captured after the respondent has made a choice rating of the FOPL. There must be some tools to assess the basic level of understanding and then decide on the inclusion or the exclusion of the participant from the study. There is no exclusion and inclusion criteria based on the profile of the respondent, before conducting an opinion poll.

The authors admit in this study that 13.8% of respondents have not

had schooling at all or are illiterate while 28%-35% of respondents are those who never read food labels. Therefore, they should have been excluded from making a relative comparison between labels in this study. Will one ever ask a teetotaler for his opinion on the relative merits of three comparable brands of whisky?

Children have been left out

At the same time, the exclusion of young adolescent children aged 10-18 years – who are big consumers of packaged biscuits chips and bottled soft drinks – from the study is a big methodological error. It is a case of significant missing data.

The “priming of the respondent” is an unnecessary step, with questionable benefits in the methodology. It complicates the study design with several levels of stratification and no conclusive findings emerging. Unfortunately, no firm policy guideline tips can be derived from the findings of this elaborate expensive study as it has many avoidable methodological errors.

The FSSAI cannot go ahead with a draft regulation based on a highly contested study design and whose findings are not yet peer reviewed. Its decision to stick to a Health Star Rating based on an algorithm known to the food industry only, as a front of pack labelling, is without sound logic or evidence.

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