





Session 2

Southeast Asian Region: Dietary Diversification

Chair: Prof Festo Massawe

GLOBAL FOOD SECURITY FORUM

'Meeting Nutritional Needs'

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Nutrition Challenges and Priorities in South East Asia

Ms Nomindelger Bayasgalanbat FAO, Thailand

Where are we at?

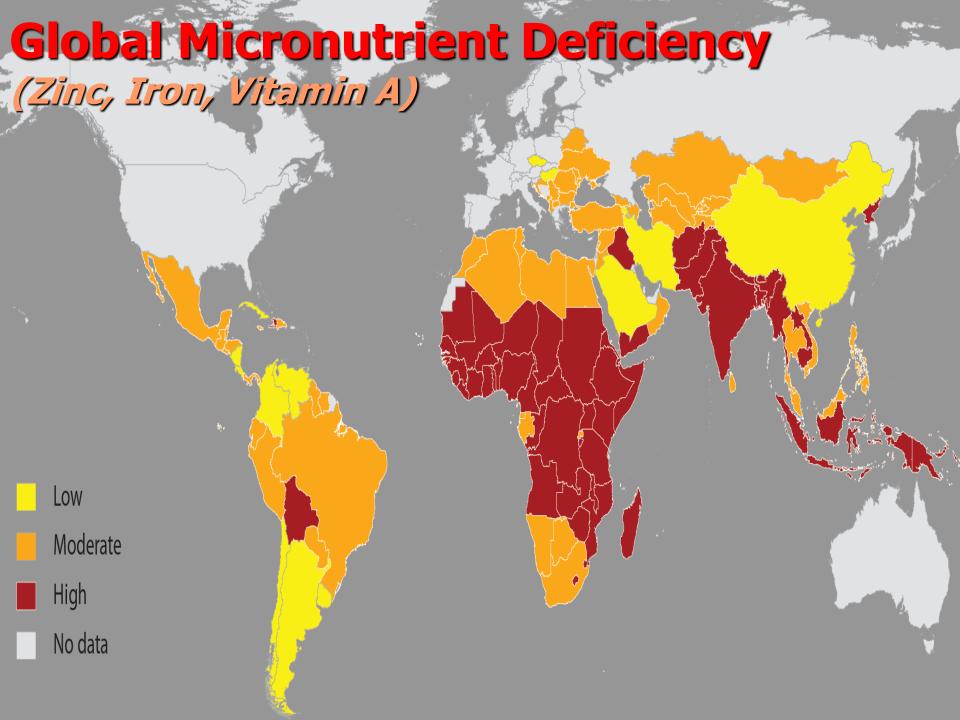


- 842 million people are undernourished and the vast majority (827 million) live in developing countries (FAO, IFAD and WFP. 2013. The state of food insecurity in the world 2013).
- 2 billion are deficient in essential vitamins and minerals. (FAO, IFAD and WFP. 2012. The state of food insecurity in the world 2012).
- 1 child in 4 under the age of five is stunted, 162 million under-five year olds were stunted in 2012 (UNICEF, WHO and The World Bank. 2013. Estimates for 2012).
- 1.4 billion are overweight (500 million obese) (WHO. 2013. Obesity and overweight fact sheet).

Economic growth has not resulted in alleviating hunger in the region



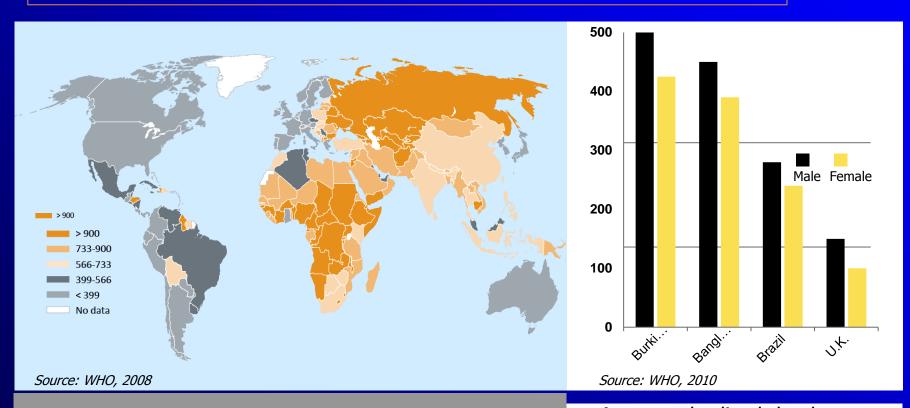
- Proportion of poor (living on less than US\$
 1.25/day) in the total population dropped from 50% to 22% between 1990 and 2009 in Asia.
- Successes achieved in economic growth have not resulted in alleviating hunger.
 - They have resulted in inequitable distribution of benefit of economic growth.
- Widening inequity, income disparity and social inequality in both least developed and middle income countries



NCDs kill people at a younger age in developing countries

F O PANS

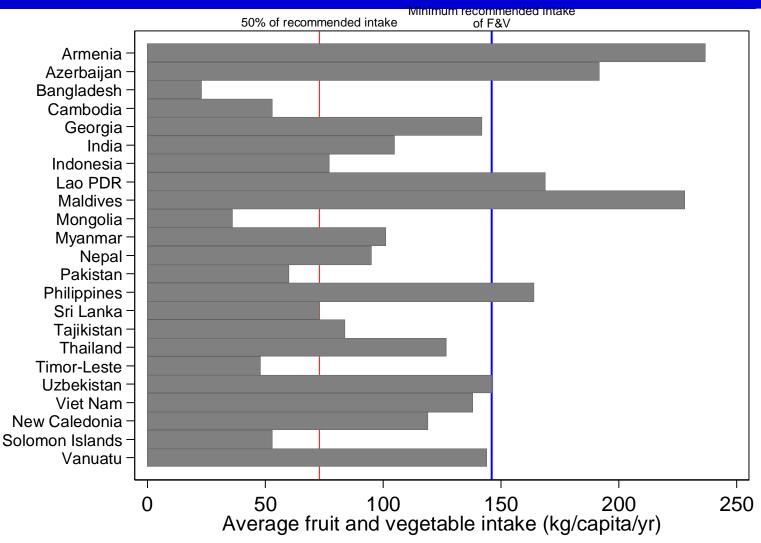
The highest increases in NCDs are expected in Africa, South-East Asia, and the Southern Mediterranean—an over 20 percent increase expected by 2020.



Age-standardized deaths per 100,000 from cardiovascular disease

Age-standardized deaths per 100,000 from cardiovascular disease and diabetes

Diets of the poor in ASEAN+ and elsewhere are monotonous and imbalanced



Note: Countries, listed in alphabetical order, have rates of undernourishment above 10 percent, or child underweight rates above 20 percent, or both Source: WHO (2003), ESCAP (2009) and FAOSTAT (Accessed June 22, 2009)

Narrowing the "nutrition gap"the gap between what food are available and what foods are needed for a healthy diet



- Poor diets low in quantity, quality and variety lead to hunger and malnutrition
- Diversity production of foods (not only staples, also vegetable and fruits, small livestock, fisheries)
- Ensure local availability and access of the right mix of foods (dietary diversity) in all seasons
- Promote local underutilized crops that are more nutritious but also have high value
- Nutrition education

How can agriculture contribute?

F AO

Production, processing, storage and marketing of nutritious foods

- Food availability -(year round)
- > Income
- Access(year round)
- Utilization Biodiversity

Biofortification Fortification

Natural and human resource management

Good nutrition and health

Adequate dietary intake

Household access to safe and diverse FOOD

Adequate maternal & child **CARE** practices

Access to safe water, sanitation & adequate HEALTH services

Health

Food safety and safe agriculture practices

Nutrition education Labor saving technology

Income used for health and hygiene

Quantity and quality of actual RESOURCES human, economic & organisational and the way they are controlled

Potential resources: environment, technology, people

Key Recommendations for Improving Nutrition through Agriculture Programmes



- 1. Incorporate explicit nutrition objectives and indicators into their design, and track and mitigate potential harms.
 - **2. Assess the context** at the local level, to design appropriate activities to address the types and causes of malnutrition.
- **3. Target the vulnerable and improve equity** through participation, access to resources and decent employment.
- **4. Collaborate with other sectors** (health, environment, social protection, labor, water and sanitation, education, energy) and programmes.
- **5. Maintain or improve the natural resource base**. Manage water resources in particular to reduce vector-borne illness and to ensure sustainable, safe household water sources.

6. Empower women.

- 7. Facilitate production diversification, and increase production of nutrient-dense crops and small-scale livestock.
- **8. Improve processing, storage and preservation** to retain nutritional value and food safety, to reduce seasonality of food insecurity and post-harvest losses, and to make healthy foods convenient to prepare.
- 9. Expand market access for vulnerable groups, particularly for marketing nutritious foods.
- **10. Incorporate nutrition promotion and education** that builds on existing local knowledge, attitudes and practices.

Food and agriculture policies can have a greater impact on nutrition if they...



- 1. Increase incentives (and decrease disincentives) for sustainable production, distribution, and consumption of diverse, nutritious and safe foods.
 - Focus on horticulture, legumes, and small-scale livestock and fish foods which are relatively unavailable and expensive, but nutrient-rich.
- 2. Monitor dietary consumption and access to diverse, nutritious, and safe foods.
 - Food prices of diverse foods, dietary consumption indicators
- 3. Build capacity in human resources and institutions to improve nutrition through the food and agriculture sector, supported with adequate financing.
- Support multi-sectoral strategies to improve nutrition within national, regional, and local government structures.
- 5. Include measures that protect and empower the poor and women.
 - Safety nets, Land tenure rights; Equitable access to productive resources

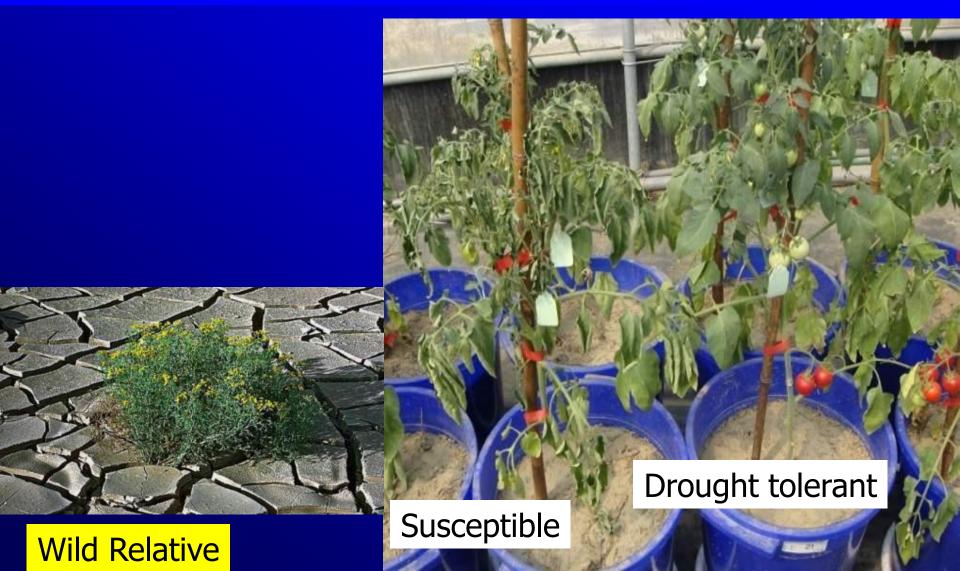
Challenges for sustainable food production and consumption for resilient food systems



- Food Production is expected to increase 60% by 2050
- Agriculture is highly resource intensive:
 - Uses 70% of the water withdrawals
 - Cropping systems use 30% of the world's energy
 - Accounts for 30% of GHG emissions
 - Negative impacts on water, soil, air, wildlife and ecosystem biodiversity and human health
 - Global food losses and waste amount to 1.3 billion tonnes per year (~ 1/3 of food production)
 - Improving agricultural practices is an essential component of the transition to a more sustainable future

Impact of climate change on local food production: Plant breeding to ensure food and nutrition security





Not relying on imports: Grow your own Food and Dietary Diversification through Home and School Gardens



 A regular supply of fresh vegetables through community and school gardens

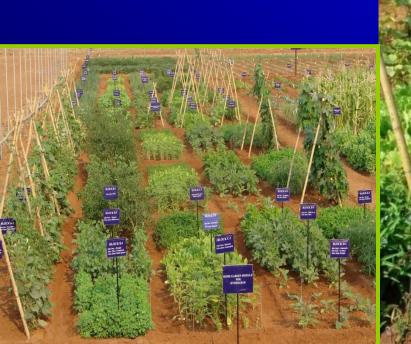
Promote healthy and sustainable dietary habits and improve children's nutrition

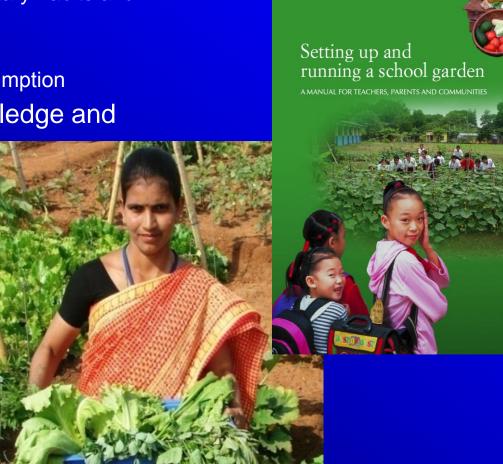
Improve quality of school meals

Increase children's vegetable consumption

Increase children's nutrition knowledge and

appreciate the environments





Identification of What Could be Feasible - Seasonal Food Availability Calendars



- Types of foods produced or collected from nature
- To make better choice
- Seasons when the foods are available
- Implication of the food availability-access calendar on ability to have balanced family meals



Coping with urbanization and increased urban poverty



Ensuring Food and Nutrition Security



- Utilize food and agriculture system to encourage healthy choices, healthy diets
- Incorporating agricultural biodiversity into food and nutritional approaches;
- Ensuring the production of more nutritious foods through commercial pathways that reflect agricultural biodiversity practices and cultural preferences;
- Determining what agricultural biodiversity practices and delivery systems work on the ground in development programmes to improve nutritional security;
- Mainstreaming the role of agricultural biodiversity into public health and nutrition policy and practice;
- Promoting high value traditional and or underutilized crops (Wild foods, Lesser known grains, Crop wild relatives, Forest foods and etc.)
- Investing in research to enhance more resilient food systems for better nutrition
- Supporting public-private sector collaboration





Mapping the issues facing Southeast Asia: Nutrition in transition and challenges

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Institute of Nutrition, Mahidol
University (INMU), Thailand

Presented at the Global Food Security Forum, Kuala Lumpur, July 7-8, 2014

Issues to discuss

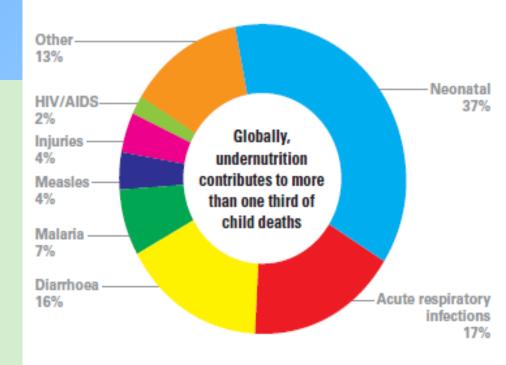
- Trends in nutritional situation of young children and women
- Unfinished agenda: Micronutrient situation in children and women & emerging problems
- Infant and young child feeding in development transition
- Nutrition, development and epidemiological transition in SEA
- Coexistence of under- and over-nutrition: Double burden of MN



Under five mortality rate 2010 (per 1,000 live births) in Southeast Asia



Causes of mortality in children under 5 years old (2004)



Source: World Health Organization, 2008.

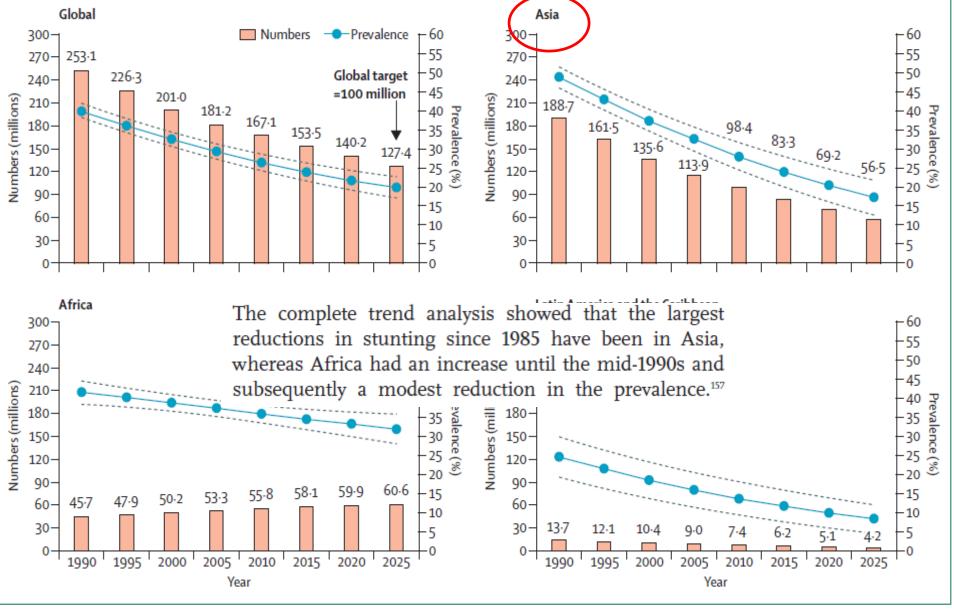
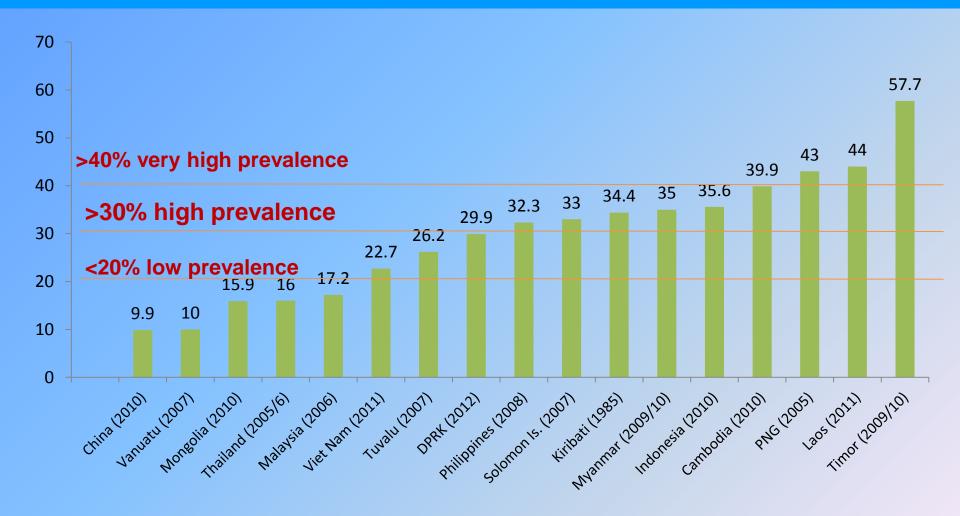


Figure 4: Trends in prevalence and numbers of children with stunted growth (HAZ <-2), by selected UN regions and globally, 1990–2010, and projected to 2025 on the basis of UN prevalence estimates

HAZ=height-for-age Z score. Data from UNICEF, WHO, World Bank.154

Stunting prevalence in children underfive UNICEF/EAPR

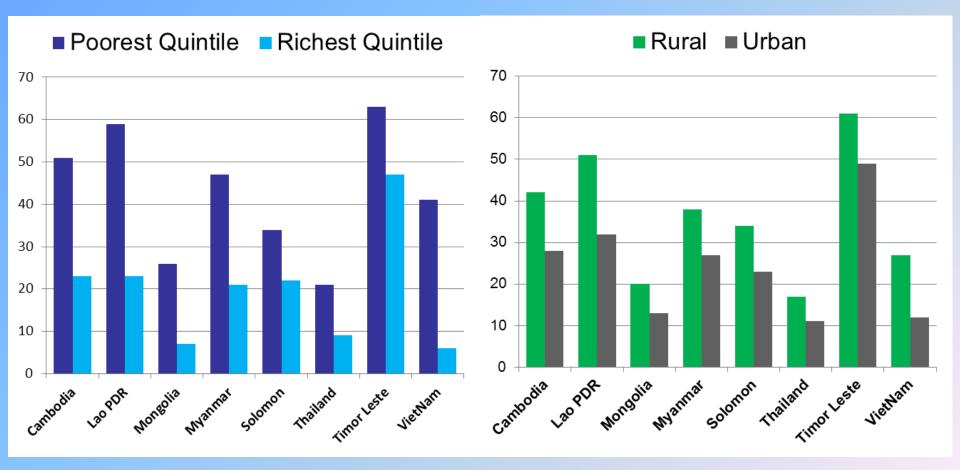


Source: UNICEF-WHO, Joint Global Malnutrition Analysis Data Set, 2011

Large Disparities in the prevalence of stunting among underfive children by wealth and residence in SEA

Stunting prevalence (%) among U5 children by Wealth Quintile

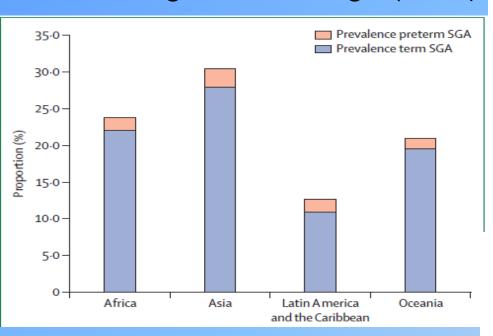
Stunting prevalence (%) among U5 children by Urban/Rural Area



Source: MICS and DHS, 2005-2010

Partial and the second second

Small-for-gestational age (SGA)



- Risk of neonatal mortality among SGA >> AGA;
- 1/5 stunted child was SGA
- SGA reflects maternal undernutrition

Adolescent Nutrition: Important for Girls, and for the Future Generation

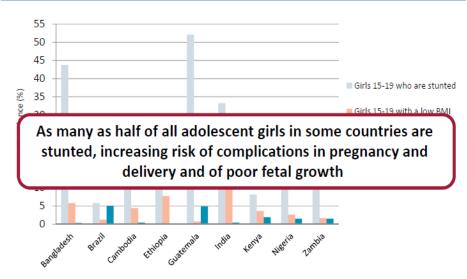
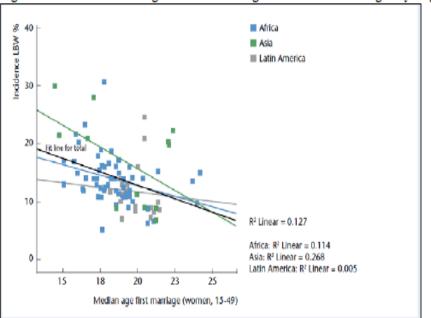


Figure 14. Scatter Plot of Age at First Marriage and Low Birth Weight by Region



Source: UNSCN 2010.

Issues on Infant & Young Child Feeding (IYCF)

- Declining BF, esp EBF upto 6 mo is not achievable in countries in development transition:
 - insufficient milk production maternal MN
 - Working mothers not EBF or BF for short duration
 - Cultural Beliefs giving water or prelacteal feeds
- Time allocation patterns in the family, esp. women with young children
- Changing Infant and young child feeding
 - Use of infant formula & Commercial complementary foods: cost, inappropriate/unhygienic preparation
- Inappropriate complementary feeding (CF)
 - Timing too early or too late
 - Quality/quantity of CF nutrient density

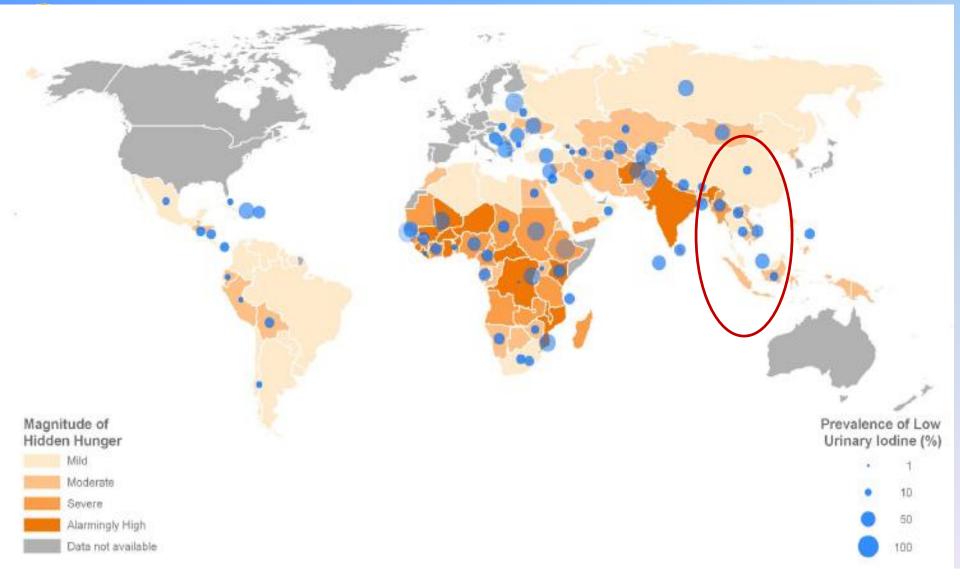


Figure 2. Global map presenting hidden hunger index based on the prevalence estimates (HHI-PD) in 149 countries and prevalence of low urinary iodine concentration in 90 countries with 2007 Human Development Index <0.9. The hidden hunger index HHI-PD was estimated based on national estimates of the prevalence of stunting, anemia due to iron deficiency, and low serum retinol concentration.

Issues related to micronutrient deficiencies

- Iron, vitamin A and Iodine deficiencies remain PH problems in SEA, but severity declined to mildmoderate deficiency
- Multiple deficiencies in the same individual children/ women and population level
- Interventions:
 - Supplementation

Food fortification

- Biofortification
- Food—based (production, postharvest/cooking losses, consumption, bioavailability, impact)
- Food-based strategy: feasible and effective as a large scale program?

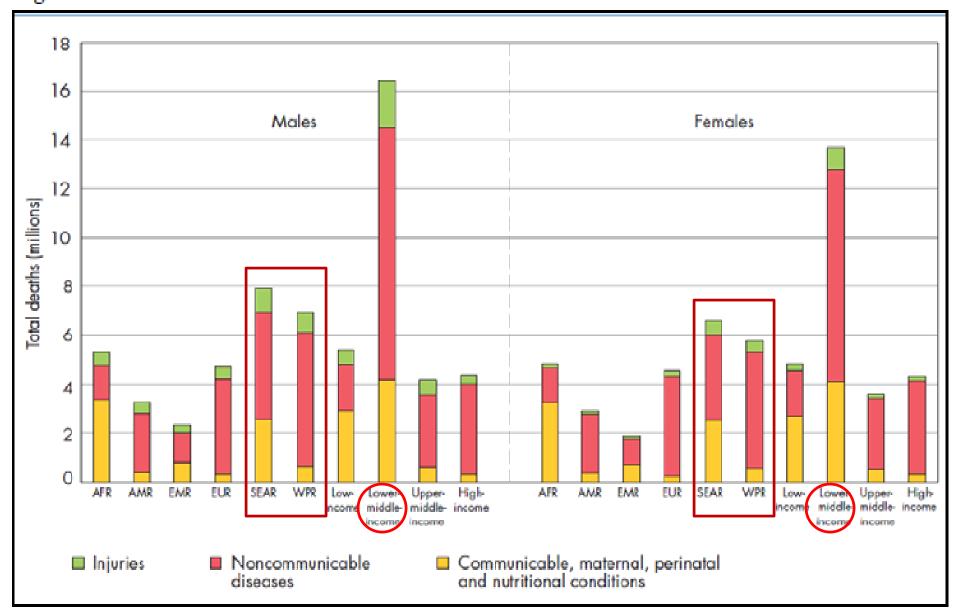
Emerging or unrecognized micronutrient MN

- Vitamin D deficiency
 - VDD is a problem in tropical countries with lots of sunshine -changed lifestyle (sedentary/indoor activity)
- Neural tube defects due to folate deficiency
 - Data on NTD not existed or inaccurate
 - Possible biomarkers e.g., serum folate for pop assessment – not yet established
- Zinc insufficient intakes and low S. zinc
 - No large scale data to confirm PH problem
 - Zn supplement in treatment of diarrhea recommended and efforts on scaling up
- Micronutrient MN in overweight/obese evidence on metabolically affected iron, iodine and vitamin A nutrition

Development transition in SE Asia

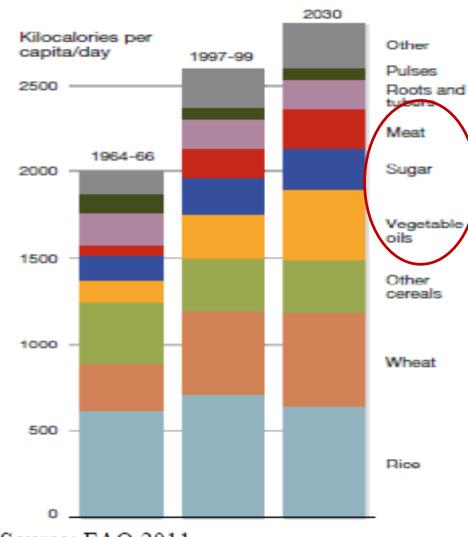
- Rapidly industrialized 20-30 y
- Economic growth 7-10%
- Urbanization/industrial development
 - rural to urban migration
 - mechanization of agriculture
 - expansion of industry and sedentary living
 - Less physical activity (energy expenditure)
- Changing 'availability' and 'access' to foods and other services (both urban &rural)
 - Better reach of market -- Diversity of food choices
 - Less own food production, more 'purchased' foods of low nutritive quality
 - Processed foods-- low price fats/oils
 - Street foods (quality & safety)

Figure 6. NCD Deaths in Low- and Middle-Income Countries



Source: WHO 2011

Figure 8. Changes in Historic and Projected Composition of Human Diet and the Nutritional Value

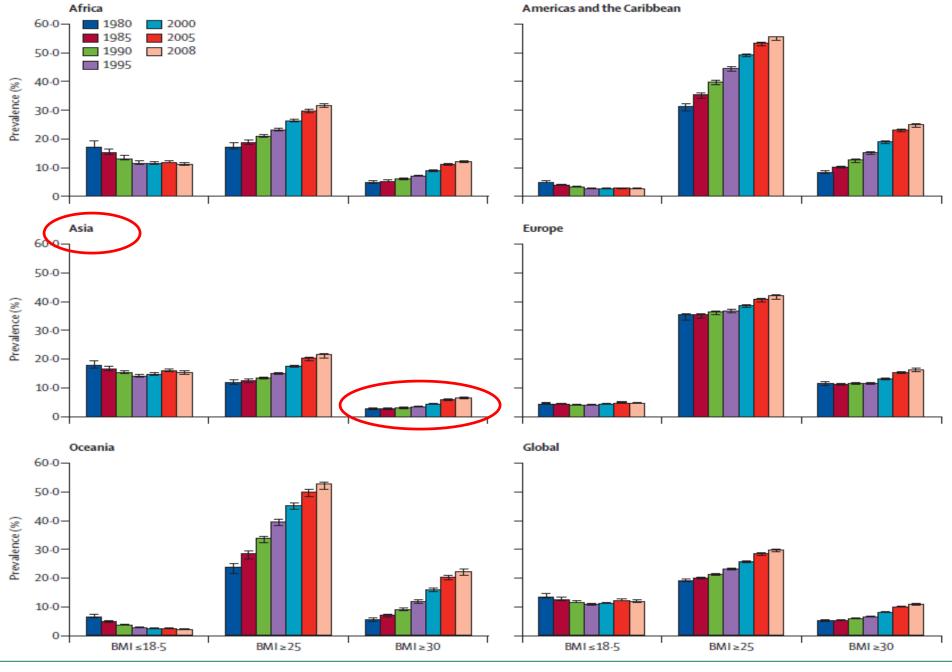


Source: FAO 2011.

WHO recommendations

Table 3. Recommendation for Daily Intake

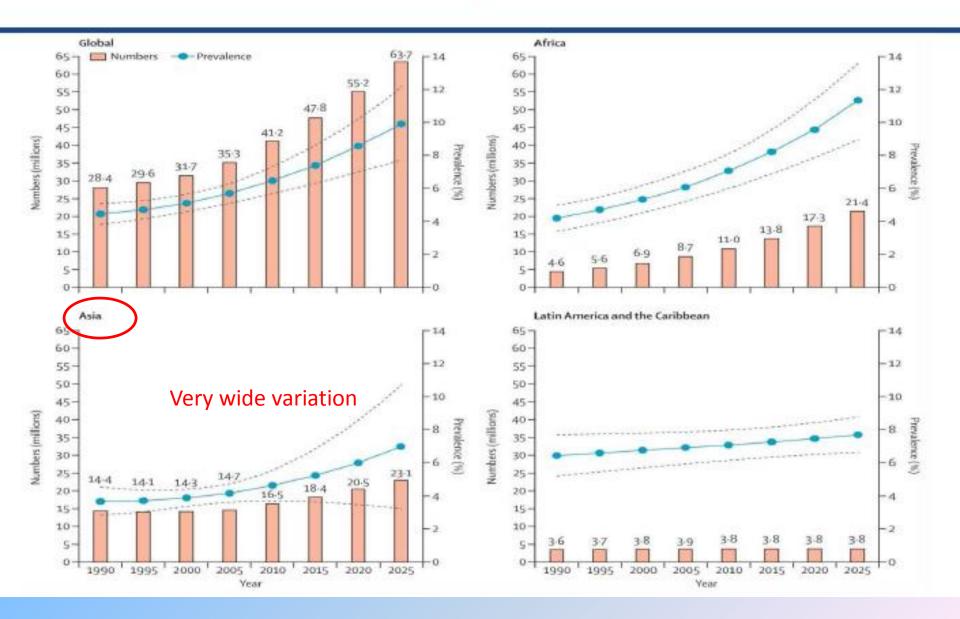
Dietary Factor		Goal (% of total energy unless otherwise stated)
Total Fat		16-30%
	Saturated fatty acids	<10%
	Polyunsaturated fatty acids (PUFAs)	6-10%
	n-6 Polyunsaturated fatty acids (PUFAs)	5-8%
	n-3 Polyunsaturated fatty acids (PUFAs)	1-2%
	Trans fatty acids	<1%
	Monounsaturated fatty acids (MUFAs)	By difference
Total Carbohydrate		55-75%
	Free sugars	<10%
Protein		10-15%
Cholesterol		<300mg/day
Sodium chloride		<5g/day
Fruit and vegetables		>400g/day
Source: WHO 2003		



Trends in thinness vs overweight and obesity by geographical region

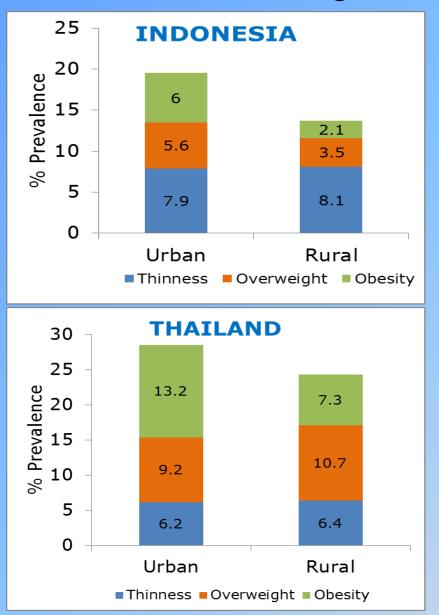
Ellot bals are 33% els. bittl-body mass maes.

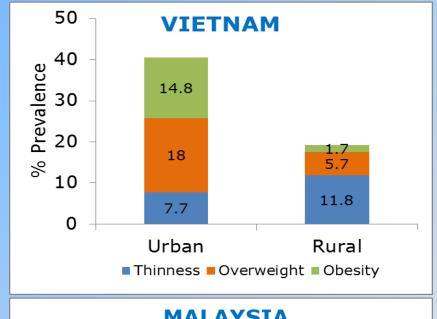
Child Obesity on the Rise

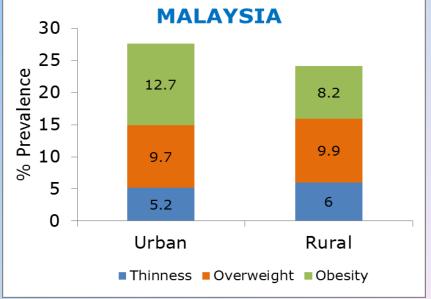


Black, et al, MCN 1, Lancet 2013;

Thinness, Overweight & Obesity* by BMI for age



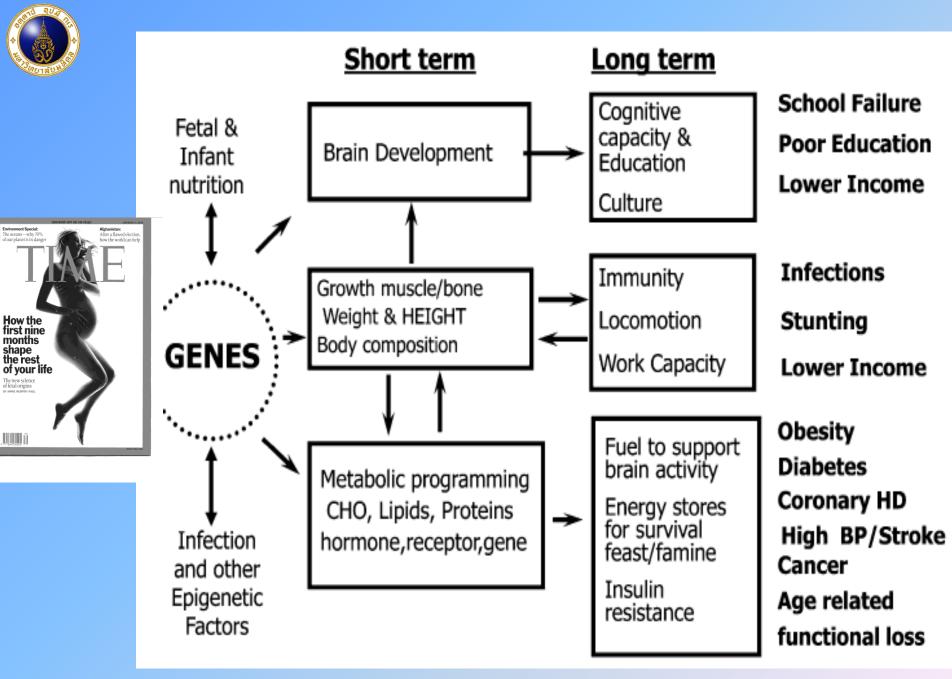




SEANUTS, BJN 2013 (courtesy Dr. Nipa Rojroongwasinkul)

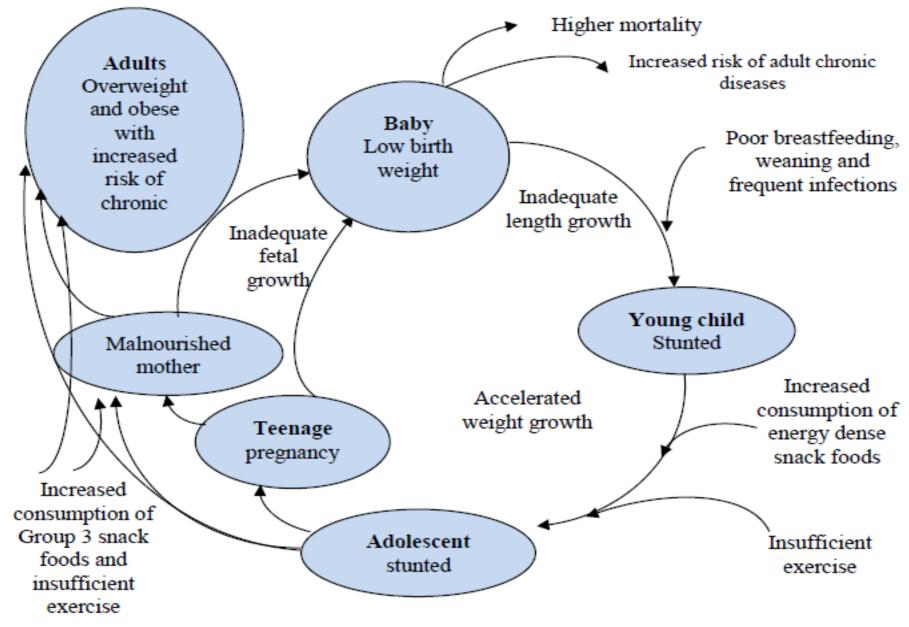
Issues related to obesity/NCDs

- Most data on obesity and NCD focused on problems in adults, and older children
- Are Obesity and NCDs only the problems of poor eating/physical activity behaviors in children and/or degenerative process in older adults?
- Early life nutrition (from conception to 24 mo infants, known as '1000d' contributes to risk of obesity & NCDs – unrecognized by policy makers/planners



Uauy, et al, AJCN 2013

Figure 15. The Double Burden of Malnutrition: Causes and Effects across the Life Course







Adapting Western products for South East Asian / DE market needs

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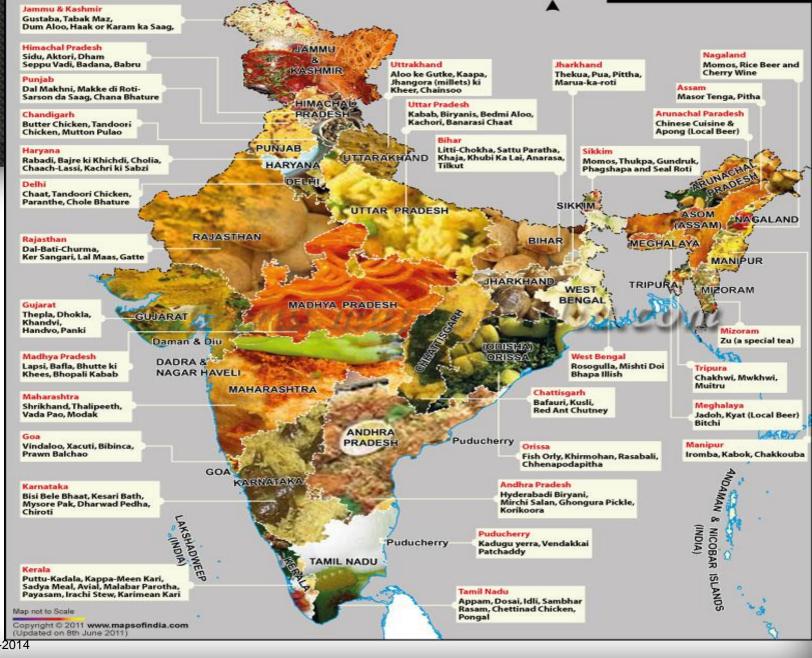
Greetings From UNIVERSITY OF MYSORE



Outline

- Indian diets
- Food choices
- Dietary diversification
- Current scenario/ Evidence
- Adapting Western products- nutritional & health implications
- Concluding note





INDIAN CUISINE MAP

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Food diversity in India

• Food diversity – implicit of India's multi-culture,

regions/ states

- Traditionally, Indians like home-cooked meals.
- Concept supported 2 reasons- religious & individual



Foods in India

Semi-convenience	Convenience
✓ Semi-preparation	✓ Fast meals/complete
meals	meals
✓ Cooking ingredients	✓ Meals at restaurant
	✓ Home delivery
	✓ Semi-preparation meals



Non- Convenience Foods

• Preparation meals- wheat, rice, pulses, vegetables, tubers,

poultry, fresh meat, fish.

• Cooking ingredients- fats, spices, onion, tomato, coconut,

green chilly, coriander









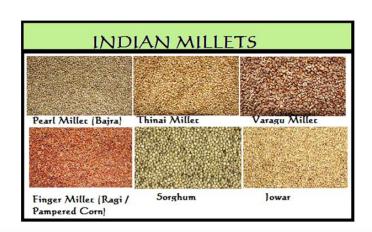


















Semi-convenience

- Semi preparation meals- cut vegetables, frozen food products
- **Pre-mixes**: batter, ETR, curries, gravies, pulav mix
- Cooking ingredients: readymade masala's, puree, ready to

mix items {rice mixes}

















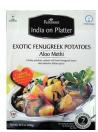








Tasted Asia









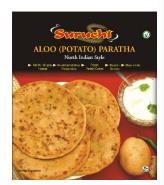
















Convenience Foods

• Fast meals - pizza, burgers, sandwich, complete meals, soups,

desserts, ice creams

• Ready to eat - Meals at restaurant, fast food centers, roadside

eateries.





























SEGMENTATION OF DIFFERENT SECTOR IN FOOD PROCESSING INDUSTRY

Sectors	Products
Diary	Whole Milk Powder, Skimmed Milk Powder, Condensed Milk, Ice Cream, Butter and Ghee, Cheese.
Fruits & Vegetables	Beverages, juices, concentrates, Pulp, Slices, Frozen and Dehydrated products, Potato Wafers/ Chips etc.
Grains & Cereals	Flour, Bakeries, Starch Glucose, Cornflakes, Malted Foods, Grain based Alcohol
Fisheries	Frozen and Canned products mainly in fresh form.
Meat and Poultry	Frozen and packed mainly in fresh form, egg Power
Consumer Foods	Snack food, Namkeens, Biscuits, Ready to eat food, Alcoholic and non Alcoholic beverages.

Source: Ministry of Food processing India



What governs Food choices?

Socio-cultural context of eating & food choice

Mood and performance effects of foods

Food choice behavior in affluent societies

Attitudes and beliefs in food habits

Marketing and consumer behavior

Economic influences on food choice

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Current scenario

- Rapid income growth, urbanization and globalization major dietary shifts in India
- Declining consumption of staples 15% in Rural & 12 % in Urban.
- Increasing consumption livestock, dairy products, fats & oils
- Sharp drop Pulse, nuts, dry fruits [1994-2004]
- Demand and supply lead to these changes

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What are the changes ?????

Dietary mix and its flavor are fast changing on the plate of Indian consumers



Then













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Now













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Why these

Changes ?????

Demand

Supply side

- ✓ Growing affluences
- ✓ Lifestyle changes
- ✓ Expansion of middle class
- ✓ Higher participation of women in workforce

- ✓ Global economics (closer integration)
- ✓ Liberalization of FDI
- ✓ Reduction in freight & transportation costs
- ✓ Growth of supermarkets & fast food outlets



Some facts

- Liberalization of Indian economy in the early 1990s, entry of new players – change in lifestyles & food taste
- Food industries .. Advantage ... of the change
- Diversification is not entirely demand driven
- Food processing sector attracts substantial FDI
- Top 10 sectors getting FDI equity.

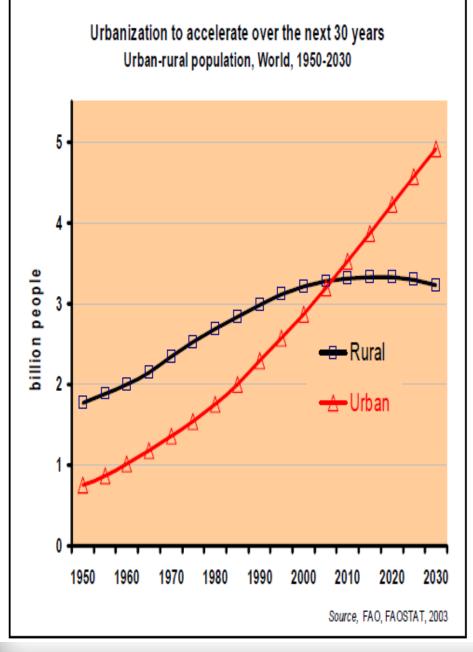


Some facts

- Growth rate of 5-6% pa in GDP
- Per capita income grown by 3.5% p.a
- Sustained growth is **shifting** the consumption patterns

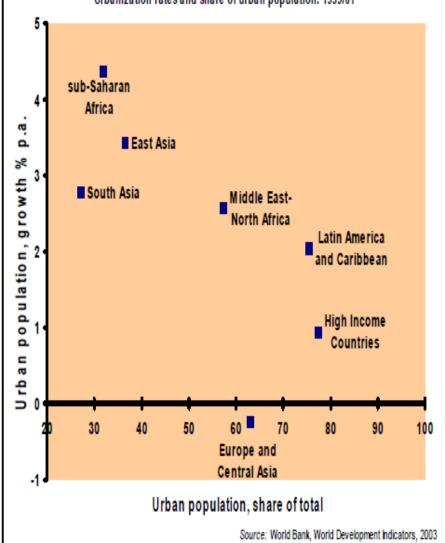
Away from basic staples towards high value

products



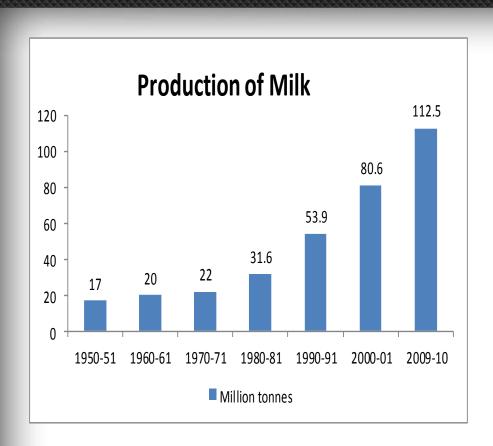
Africa and Asia are just beginning the urbanization process

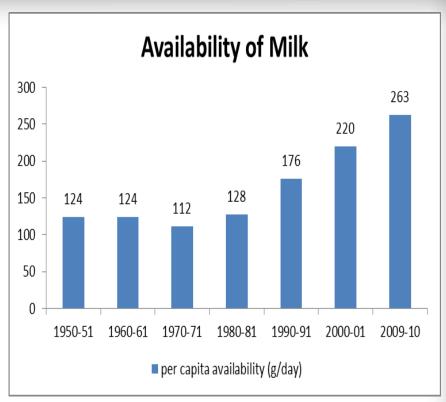
Urbanization rates and share of urban population: 1999/01





Indian Dairy Situation







3 decade analysis

- Dietary transition slow in both rural && urban India
- Energy intake



• Protein, fat & hydrogenated fat



Dietary shift has a mixed effect on nutritional

outcomes



3 decade analysis

- A very small (2 to 4 cm) increase in adult height;
- A significant increase in mean body weights, due to increased body
 fat, greater in urban than rural areas.
- In the absence of increased energy consumption, increased fat deposition is attributed to reduced physical activity.
- Very few studies have documented changes in physical activity patterns over the last three decades,



Time trends in dietary intake

- Indians today eat twice as much meat, egg and fish as they did in the early 1980s.
- Consumption of fruits has risen even more spectacularly –
 almost 3 times during the same period.
- What's eaten less than before are cereals wheat, rice and pulses

WHAT WE EAT MORE & WHAT LESS

% growth in per capita consumption (between 1983 and 2000)

1	Low income group	High income group
Cereals	-10.0%	-20.4%
Pulses	-9.2%	-6.2%
Edible oil	76.9%	87.7%
Vegetables	49.7%	39.3%
Fruits	162.5%	184.4%
Milk	30.6%	30.7%
Meat, eggs, fish	100.0%	120.8%
Growth in value of	of output	6.2%
(between 1990 an	nd 2000)	.2% 4.3%
2.3% 2.69	3.2%	
1.2%		
Pulses Cereals Oilsee	eds Sugar Meat	Milk Eggs Fruits and vegetables
1.2%		-



Evidences

National Sample Survey analyses

- 1/3rd of rural households in India calorie deprivation, intakes
 - < 1800 cals
- Protein & fat intakes of 1/5th of the population are high
- Diet diversification is aggravating NCD risk



Evidences

National Family Health Survey-2

- n- 90,000 women, 15-49 y, 26 states
- Cereals- daily, little dietary diversity
- Fruits- only 8% ate daily, 1/3rd ate once a week
- **Animal foods-** 1/3rd never eat, only 8% eat
- Poverty has a strong negative effect on dietary diversity



Trends in India

- Energy intake has increased for the poor and decreased for the rich, while fat intake has **risen for all income groups**.
- Pace of decline of cereal consumption in the upper-income group was faster than that of the lower-income group.
- Even among lower income groups, consumption of highvalue food increased in the past decade.



Indian Diet Transformation

- 1st stage "income-induced diet diversification", economic growth lead to increased variety of foods consumed, but the diet maintains mostly traditional features.
- 2nd stage "diet globalization", diet is influenced by the process of globalization.



Extruded products-Indian













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Extruded products-Western













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Kellogg's® Smart Start® Antioxidant

Nutriti	on Facts 1 Cup (50g/1.8 oz.)
Serving Size	1 Cup (50g/1.8 oz.
10.7	

Amount Per Serving	Cereal	1/2 Cup Vitamins A&D Fat Free Milk
Calories Calories from Fat	190 5	230 5
==	% D	aily Value**
Total Fat 0.5g*	1%	1%
Saturated Fat 0g	0%	0%
Trans Fat 0g		
Polyunsaturated Fat 0g	į.	
Monounsaturated Fat 0g	3	
Cholesterol 0mg	0%	0%
Sodium 280mg	12%	14%
Potassium 90mg	3%	9%
Total Carbohydrate 43g	14%	16%
Dietary Fiber 3g	11%	11%
Sugars 14g		
Other Carbohydrate 26g]	
Protein 3g		-
Vitamin A (10% as beta carotene	25%	30%
Vitamin C	25%	25%
Calcium	0%	15%
Iron	100%	100%
Vitamin D	10%	25%
Vitamin F	100%	100%

 Phosphorus
 8%
 20%

 Magnesium
 6%
 8%

 Zinc
 100%
 100%

 * Amount in cereal. One half cup of fat free milk: contributes an additional 40 calories, 65mg sodium, 6g total carbohydrates
 acarbohydrates

100%

100%

100%

100%

100%

100%

100%

100%

110%

100%

100%

100%

110%

100%

Thiamin

Niacin Vitamin Be

Riboflavin

Folic Acid

Vitamin B₁₂

Pantothenate

(6g sugars), and 4g protein.

** Percent Daily Values are based on a 2,000 calorie diet. Your daily values may be higher or lower depending on your calorie needs:
Calories 2,000 2,500

Total Fat Less than 650 800

		Ga	lor	ies	2,000		2,500	
Total Fat		Le	SS	than	65a		80a	
Saturated Fat		Le	SS	than	20g		25g	
Cholesterol		Le	SS	than	300mg	2	300mg	
Sodium		Le	SS	than	2,400r	ma	2,400mg	
Potassium					3,500r	ma	3,500mg	ř
Total Carbohydrate					300a	_	375g	
Dietary Fiber					25g		30g	
Calories per gram:	Fat	9		Carbo	obwdrate	4	Protein	4

INGREDIENTS: RICE, WHOLE GRAIN WHEAT, SUGAR, CAT CLUSTERS (SUGAR, TANSTED ANS FOULED OATS, SUGAR, CANOLA OIL WITH TBHO, AND CITRIC, ACID TO PRESERVE FRESHKESS, MOLASSES, HOMEY, BHT FOR FRESHINESS, STY LECTHINI, WHEAT FLAKES, CRISP RICE, RICE, SUGAR, MALT, SALTI, CORN SYRUP, POLYDEXTROSE, HOMEY, CHINAMON, BHT FPRESENSTRUE, ARTHFICAL WANILL R. RA-VOR), HIGH FRUCTOSE CORN SYRUP, SALT, HONEY, MALT FLAVORING, ALPHA TOCOPHEROL ACETATE (VITAMIN E), MICHAMANIDE, ZINC OXIDE, REDUCED IRON, SODIUM ASCORBATE AND ASCORBIG ACID (VITAMIN C), CALCIUM PANTOTHENIATE, YELLOW #S, PYRIDOXINE HYDROCHLORIDE (VITAMIN B), BHT (PRESENVATIVE), VITAMIN B, APLAMITATE, FOLIC ACID, BETA CAROTENE (A SOURCE OF VITAMIN A), PALMITATE, FOLIC ACID, BETA CAROTENE (A SOURCE OF VITAMIN A), VITAMIN B), THAN THE SOURCE OF VITAMIN A), VITAMIN B), BHT (VITAMIN B), WITAMIN B), BHT (VITAMIN B), VITAMIN B), WITAMIN B), WITAMIN

CONTAINS WHEAT AND SOY INGREDIENTS.

Exchange: 3 Carbohydrates
The dietary exchanges are based on the Choose Your
Foods: Exchange Lists for Diabetes, @2008 by American
Dietetic Association and American Diabetes Association.

NLI#07728

Kellogg's Corn Flakes®

Nutrition Facts Serving Size 1 Cup (28g/1.0 oz.)

Amount Per Serving	Cereal	Cereal with 1/2 Cup Vitamins A&D Fat Free Milk
Calories	100	140
Calories from Fat	0	0
	% Da	ily Value**
Total Fat 0g*	0%	0%
Saturated Fat 0g	0%	0%
Trans Fat 0g		
Cholesterol 0mg	0%	0%
Sodium 200mg	8%	11%
Potassium 25mg	1%	7%
Total Carbohydrate 24	9 8%	10%
Dietary Fiber 1g	4%	4%
Sugars 2g		
Other Carbohydrate 21g		
Protein 2g		

Vitamin A	10%	15%
Vitamin C	10%	10%
Calcium	0%	15%
Iron	45%	45%
Vitamin D	10%	25%
Thiamin	25%	30%
Riboflavin	25%	35%
Niacin	25%	25%
Vitamin B ₆	25%	25%
Folic Acid	25%	25%
Vitamin B ₁₂	25%	35%

 Amount in cereal. One half cup of fat free milk contributes an additional 40 calories, 65mg sodium, 6g total carbohydrates (6g sugars), and 4g protein.

**Percent Daily Values are based on a 2,000 calorie diet. Your daily values may be higher or lower depending on your calorie needs:

	Calories	2,000	2,500
Total Fat	Less than	65g	80g
Saturated Fat	Less than	20g	25g
Cholesterol	Less than	300mg	300mg
Sodium	Less than	2,400mg	2,400mg
Potassium		3,500mg	3,500mg
Total Carbohydrate		300g	375g
Dietary Fiber		25g	30g
Calories per gram: F	at 9 • Carbo	hydrate 4 •	Protein 4

INGREDIENTS: MILLED CORN, SUGAR, MALT FLAVORING, HIGH FRUCTOSE CORN SYRUP, SALT, IRON, NIACINAMIDE, SODIUM ASCORBATE AND ASCORBIC ACID (VITAMIN C), PYRIDOXINE HYDROCHLORIDE (VITAMIN B₀), RIBOFLAVIN (VITAMIN B₂), THIAMIN HYDROCHLORIDE (VITAMIN B₁), VITAMIN A PALMITATE, FOLIC ACID, VITAMIN B₁₂ AND VITAMIN D. TO MAINTAIN QUALITY, BHT IS ADDED TO PACKAGING.

CORN USED IN THIS PRODUCT CONTAINS TRACES OF SOYBEANS.

Exchange: 11/2 Carbohydrates
The dietary exchanges are based on the Choose Your Foods:
Exchange Lists for Diabetes, ©2008 by American Dietetic
Association and American Diabetes Association.

NLI#06730

Kellogg's® Special K®

Nutrition Facts Serving Size 1 Cup (31g/1.1 oz.)

Amount Per Serving	Cereal	Cereal with 1/2 Cup Vitamins A&D Fat Free Milk
Calories	120	160
Calories from Fat	5	5
	% I	Daily Value*
Total Fat 0.5g*	1%	1%
Saturated Fat 0g	0%	0%
Trans Fat 0g		
Cholesterol 0mg	0%	0%
Sodium 220mg	9%	12%
Potassium 50mg	1%	6%
Total Carbohydrate 23g	8%	10%
Dietary Fiber less than 1g	2%	2%
Sugars 4g		
Other Carbohydrate 19g		
Protein 6g		
Vitamin A	15%	20%
Vitamin C	35%	35%
Calcium	0%	15%
Iron	45%	45%
Vitamin E	35%	35%
Thiamin	35%	40%
Riboflavin	35%	45%
Niacin	35%	35%
Vitamin B ₆	100%	100%
Folic Acid	100%	100%
Vitamin B ₁₂	100%	
Phosphorus	4%	15%
Zinc	4%	6%

 Amount in cereal. One half cup of fat free milk contributes an additional 40 calories, 65mg sodium, 6g total carbohydrates (6g sugars), and 4g protein.
 Perrent Daily Values are based on a 2 000 calorie diet

10%

10%

Percent Daily Values are based on a 2,000 calorie diet. Your daily values may be higher or lower depending on your calorie needs:

	Calories	2,000	2,500
Total Fat	Less than	65g	80g
Saturated Fat	Less than	20g	25g
Cholesterol	Less than	300mg	300mg
Sodium	Less than	2,400mg	2,400mg
Potassium		3.500mg	3.500mg
Total Carbohydrate		300g	375g
Dietary Fiber		25g	30g
Calories per gram:	Fat 9 . Carb	ohvdrate 4	· Protein 4

INGREDIENTS: RICE, WHEAT GLUTEN, SUGAR, DEFATTED WHEAT GERM, SALT, HIGH FRUCTOSE CORN SYRUP, DRIED WHEY, MALT FLAVORING, CALCIUM CASEINATE, ASCORBIC ACID (VITAMIN C), ALPHA TOCOPHEROL ACETATE (VITAMIN E), REDUCED IRON, NIACINAMIDE, PYRIDOXINE HYDROCHLO-RIDE (VITAMIN B₀), RIBOFLAVIN (VITAMIN B₂), THIAMIN HYDROCHLORIDE (VITAMIN B₁), VITAMIN A PALMITATE, FOLIC ACID AND VITAMIN B₁2.

CONTAINS WHEAT AND MILK INGREDIENTS.

Exchange: 11/2 Carbohydrates

Selenium

The dietary exchanges are based on the Exchange Lists for Meal Planning, @2003 by The American Diabetes Association, Inc. and The American Dietetic Association.

NLI#05032

DUMDAAR TASTE

- ✓ More Masala = Tastier
- **Iron Fortified**
- Vegetable Bits (Carrot)
 - 1-15% more Masala as compared to MAGGI Masala Noodles

GOOD TO REMEMBER

MAGGI Masala Dumdaar Noodles is a source of Iron, which is found in green leafy vegetables 8 is an essential micronutrient for you at all stages of life.

Make your Noodles more nutritious and delicious by adding paneer/vegetables.

GOOD TO TALK

Nestlé Consumer Services PO Bag No 2, New Delhi-110001 contact@in.nestle.com 0124 4121212

INGREDIENTS:

NO ADDED MSG

NOODLES: Wheat flour, Edible vegetable oil, Salt, Wheat gluten, Mineral (170(i)) and Guar gum.

MASALA DUMDAAR TASTEMAKER®: Mixed spices (23.87%) (Onion, Coriander, Chilli powder, Garlic, Turmeric, Curnin, Aniseed, Black pepper, Ginger, Fenugreek, Clove, Nutmeg, Green cardamom and Capsicum)), Hydrolysed groundnut protein, Noodle powder (Wheat flour, Edible vegetable oil, Salt, Wheat gluten, Mineral (170(i)) and Guar gum), Sugar, Carrot (11.2%), Tapioca starch, Salt, Edible vegetable oil, Mineral (508), Acidifying agent (330), Mineral*, Flavour enhancer (635), Colour (150d) and Raising agent (500(ii))

CONTAINS PERMITTED NATURAL COLOUR, ADDED NATURAL FLAVOUR AND ARTIFICIAL SAVOURY FLAVOURING SUBSTANCE

MAY CONTAIN TRACES OF SOYA POWDER. STORE IN A COOL, DRY AND HYGIENIC PLACE BEST BEFORE NINE MONTHS FROM MANUFACTURE

Net Weight:



D

U

M

A



boiling water.



Cook for 2 minutes in an open pan. Stir occasionally. Do not drain remaining water.

Good Food, Good Life The



Nestle.

NUTRITION® PER INFORMATION 100g Energy (kcal) 412

Protein (a) 9.2 Carbohydrate (g) 58.9

-Sugar (g) Fat (g) 13.6

Calcium (mg) 160.0 1 Iron® (mg)

Potassium (mg) 335.0

See side panel for: M.R.P. (Incl. of all taxes); Rs. Lot No:

CMFD./MFG. By: (Refer letter after MFD. & see below) in case of A, B, D, G & H MFG. By Nestlé India Limited

A) Ludhiana - Ferozepur Road, Moga - 142 001, (Punjab)

- B) Village Maulinguem (North), Bicholim Taluka - 403 504 (Goa)
- D) Plot No. 1A, Sector 1, Integrated Industrial Estate, Pantnagar - 263 145, (Uttrakhand)
- G) Industrial Area Nanjangud Mysore - 571 301. (Karnataka)
- H) VPO-Nangal Kalan, Industrial Area Tanliwal, Tehsil-Haroli, Una - 174801
- E) SAJ FOOD Products Pvt. Ltd. Centre, P.O. Birshibpur, Howrah - 711 316. (West Bengal)

Marketed By: NESTLÉ INDIA LIMITED, M-SA CONNAUGHT CIRCUS, NEW DELHI - 110 001

GOOD QUESTION

What 3 key nutrients does MAGGI Masala Dumdaar Noodles provide?

GOOD TO KNOW

76g of MAGGI Masala Dumdaar Noodles provides 24% RDA+ of Iron. 10% RDA+ of Protein 8 20% RDA+ of Calcium.

+ RDA for Adult Sedentary Male as per ICMR, 2010 ® Reg.Trademark of Société des

NUTRITIONAL COMPASS™

Produits Nestlé S.A. Approximate Values



100% VEGETARIAN PROPRIETARY FOOD Instant Noodles with TASTEMAKER^Q







Nutrition Facts

Serving Size 1 container (64g)

Amount Per Serving

Calories 300 Calories from Fat 120

% Daily Value*

12%

MEN

RATER

Vitamin C 4%

Iron 30%

Total Fat 13g 20%

35% Saturated Fat 7g

Trans Fat Og

Cholesterol 5mg Sodium 1410ma 59%

Total Carbohydrate 37g

Dietary Fiber 2a

Sugars 2g

Protein 6g

Vitamin A 6%

Calcium 2%

* Percent Daily Values are based on a 2,000 calorie diet. Your daily values may be higher or lower depending on your calorie needs:

Calories:	2,000	2,500
Less than	65g	80g
Less than	20g	25g
Less than	300mg	300mg
Less than	2,400mg	2,400mg
ydrate	300g	375g
er	25g	30g
	Less than Less than Less than Less than ydrate	Less than 65g Less than 20g Less than 300mg Less than 2,400mg ydrate 300g

INGREDIENTS: ENRICHED WHEAT FLOUR (WHEAT FLOUR THIAMINE RIBOFLAVIN, FOLIC ACID), VEGETABLE OIL (PALM OIL, SESAME OIL), SALT, CONTAINS LESS THAN 2% OF SPICE AND COLOR DRIED RED BELL PEPPER, DRIED CORN, MONOSODIUM DRIED GREEN PEA. SUGAR, GARLIC GLUCOSE, WHEAT, SOYBEAN, POTASSIUM CARBONATE SODIUM CARBONATE, SODIUM TRIPOLYPHOSPHATE, ONION POWDER, CALCIUM SILICATE, NATURAL AND FLAVOR, CARAMEL COLOR, MODIFIED FOOD STARCH, SHRIMP EXTRACT POWDER: DISODIUM GUANYLATE, DISODIUN AUTOLYZED YEAST (PRESERVATIVE), SODIUM ALGINATE, RENDERED CHICKEN FAT POWDERED CHICKEN, AUTOLYZED TORULA YEAST EXTRACT CONTAINS WHEAT, SOYBEAN, AND SHRIMP.



MANUFACTURED BY: NISSIN FOODS (USA) CO., INC. 2001 W. ROSECRANS AVE., GARDENA, CA 90249

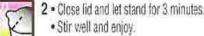
MANUFACTURED IN A FACILITY THAT PROCESSES MILK, EGG. PEANUT, TREE NUTS, CRUSTACEAN SHELLFISH, AND FISH **PRODUCTS**

WWW.THERAMENRATER.COM

SALSA PICANTE SHRIMP Flavor Recommended Cooking Directions



- Pull back lid to dotted line.
- . Fill cup to inside line with boiling water from kettle or microwave.



Do Not Microwave.

Caution: Product is hot; please handle with care. Do not purchase if cup is open or torn.

Cup/Noodles.®

For the Very Best in Ramen Noodle Soup.®

www.nissinfoods.com





INGREDIENTS

Rolled Oats (52%), No Added
Sugar Wheat Flakes 27.8% (Wheat,
lodized Salt, Malt Extract and Antioxidants INS 322 & INS 306), Apple Juice Concentrate,
Broken Rolled Wheat, Wheat Bran,
Oat Bran & Antioxidant (INS 306).

Nutritional Information#

Nutrients	Per 100g	Per 30g
Energy Value	398 kcal	119 kca
Protein	9.9g	3.0g
Carbohydrate	74.5g	22.4g
-Sugar**	1.4 g	0.4g
Dietary Fibre	10.6g	3.2 g
Fat	6.7g	2.0 g
Saturated Fatty Acids	1.4g	0.4 g
Monounsaturated Fatty Acid	ds 2.8 g	0.8 g
Polyunsaturated Fatty Acids	s 2.4g	0.7g
Trans Fatty Acids	0 g	0 g
Cholesterol	0 mg	0 mg
Iron	3.4 mg	1.0 mg

Serving Size = 30g



INGREDIENTS

Rolled Oats (40.2%), Whole Wheat Flakes 27.4% (Wheat, Sugar, Iodized Salt, Malt Extract and Antioxidants -INS 322 & INS 306), Invert Syrup, Raisins (4.7%), Corn Flakes (4.6%), Almonds (3%), Broken Rolled Wheat, Wheat Bran, Oat Bran, Honey (1%) & Antioxidant (INS 306).

Nutritional Information#			
Nutrients	Per 100g	Per 30g	
Energy Value	399 kcal	120 kcal	
Protein	9.1g	2.7g	
Carbohydrate	77.2g	23.2g	
-Sugar**	6.5g	2.0g	
Dietary Fibre	13.5g	4.1g	
Fat	6.0g	1.8g	
Saturated Fatty Acids	1.1g	0.3g	
Monounsaturated Fatty Acids	2.7g	0.8g	
Polyunsaturated Fatty Acids	2.1g	0.6g	
Trans Fatty Acids	0g	, 0g	
Cholesterol	0mg	0mg	
Iron	2.8mg	0.8mg	

Approximate values

Serving Size = 30g

*As per Codex Alimentarius Commission Guidelines

**As Sucrose

INGREDIENTS: Oats (74%), Maltodextrin, Dehydrated Vegetables (Dehydrated Carrots, Dehydrated Onions, Dehydrated Tomatoes, Dehydrated Green Peas), Salt, Spices and Condiments (Coriander (0.5%)) Sugar, Com Starch, Hydrolysed Vegetable Protein, Wheat flour, Emulsifier (414), Flavour Enhancers (627 & 631), Edible Vegetable Oil. CONTAINS ADDED NATURAL & NATURE IDENTICAL FLAVOURING SUBSTANCES.

MUNICOTENTS: Oats (76%), Sugar, Raisins (4.5%), Wheat May Spices and condiments (Turmeric powder, Cardamom Mowder, Saffron), Edible starch, Colour (160a(i))

CONTAINS PERMITTED NATURAL COLOUR AND ADDED FLAVOUR NATURAL AND NATURE IDENTICAL FLAVOURING SUBSTANCES)

IFAKFAST SPECIALS PORRIDGE

"PROPRIETARY FOOD"

Typical value for 100g 30g serving with 120ml of skim milk				
Energy Energy From Fat	373 kcal 5 kcal	147 kcal 2 kcal		
Total Fat Saturated Fatty Acids Monounsaturated Fatty Acids Polyunsaturated Fatty Acids Trans Fatty Acids	0.6 g 0.1 g 0.1 g 0.3 g 0.0 g	0.3 g 0.1 g 0.1 g 0.1 g 0.0 g		
Cholesterol	0 mg	0 mg		
Total Carbohydrates of which Sugar (Sucrose) Dietary Fibre	87.7 g 34.4 g 1.7 g	31.8 g 10.3 g 0.5 g		
Protein	6.0 g	4.8 g		
Sodium	0.65 g	0.7 g		

Approximate values



Implications

Nutritional Metabolic Health



Nutritional attributes

Food	Glycemic index
Cornflakes	103 - 123
Rice [brown, high-amylose, white]	53 - 79
White breads	90 - 130
Barley breads	39 - 69
Noodles, instant	67 – 76
Noodles, beans	37 – 56
Noodles & Vermicelli, rice	83 - 87

GFS Malaysia-2014



Nutritional attributes

Food	Glycemic index	
Spaghetti, gluten-free	97	
Spaghetti, protein-enriched	38 - 45	
Macaroni	64 - 69	
French fries	63 - 68	
Potato (boiled)	78 - 82	
Beverages [cola's]	76 – 97	
Juices	63 - 97	
GFS Malaysia-2014		



Metabolic

Diets high in refined Crabs, SFA + reduced physical activity + genetic predisposition

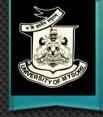


IGT – hyperinsulinemia – insulin resistance

- impaired lipid profile, fatty liver -



NCD risk



Indian consumer market

- Dominated by youth sophisticated & brand conscious
- Largest population in the world < 45 y [> 890 million]
- More English speaking compared to Europe
- Rising income, consumption expected to grow

4-fold [2006 to 2025]

GFS Malaysia-2014



Needs Of Indian Consumer From Processed Foods

Annual Household Income	Number of Households	Need from Processed Food
INR (in lakhs)	(Million)	
>10.0	1.2	Lifestyle and aspiration(cheese, wine, gourmet food)
5.0-10.0	2.4	Convenience& time saving(RTE,RTC, purees)
2.0-2.5	10.9	Food inflation protection (frozen fruits and vegetables, fruit juices)
0.5-2.0	91.3	Wholesome nutrition (milk, juices, meat)
<0.5	101.0	Basic nutrition (fortified atta, iodized salt)

GFS Malaysia-2014



Dietary Diversity - Advantages

- Diverse diet increases likelihood of meeting nutrient requirements
- Variety of nutrient sources
- Interactions between foods can improve benefit
- Diverse diet positively associated with nutritional status



Diet Diversification

- Explain the **reduction in malnutrition** among children between 1-5 y in India.
- Incidence of moderate malnutrition fell from 45.1 % to 41.3 %
- Severe malnutrition fell from 11.1 % to 6.4 %



Diet Diversification – impact

- **Protein intake** No significant improvement despite diversification to non-cereal foods.
- Fat intake in rural areas from 24 g to 36 g / day
 urban areas from 36 g to almost 50 g / day.



Human Biological Adaptability

- Nutritional adaptation adapting to local nutritional opportunities led to evolution of related genetic differences among populations
- Many Indians in US described as 'thrifty genes'- unusually efficient at utilizing calories in their food, subsequently, consume less than other people of their size stable weight.

Excess energy stores are for a famine that never comes



Health implications

- Matter of ongoing debate
- Diets contain more energy-dense, semi-processed foods, SFA,
 sugars bobesity, higher incidence of NCD.
- Nutritional implications of dietary shifts are + ve or ve is an empirical issue.



Health implications

- Incidence of under nutrition in India is decreasing
- Obesity, hypertension and diabetes associated with a highcalorie, energy-dense diet is increasing (urban areas)
- SFA Consumption is predicted to double next 30 years.
- Changes in consumption pattern signal a need for changes in Cropping patterns and Regulatory environment.



Questions

- Do we need to adapt?
- What makes people accept?
- What is the long term impact?



Some Solutions

• Vertical integration of the food market from <u>farm to firm to</u>

<u>fork</u> to achieve efficiency and serve the interest of every stakeholder in the food chain-the farmer, the processor, the retailer and the consumer.



Global Food Security Forum 7 July 2014 Tee, E.-S. and Soon, J.M.

What's for dinner in 2035?

Changing Trends in Dietary Pattern and Implications to Food and Nutrition Security in ASEAN

Global Food Security Forum
7 July 2014
Tee, E.-S. and Soon, J.M.





Food Security

When:

- All population,
- at all times
 - have physical and economical access



to safe and nutritious food

Is food readily available? (Availability)

Ease of physical access(Accessibility)

Ease of economical access (Affordability)

Nutrients metabolism and utilisation (Utilisation)

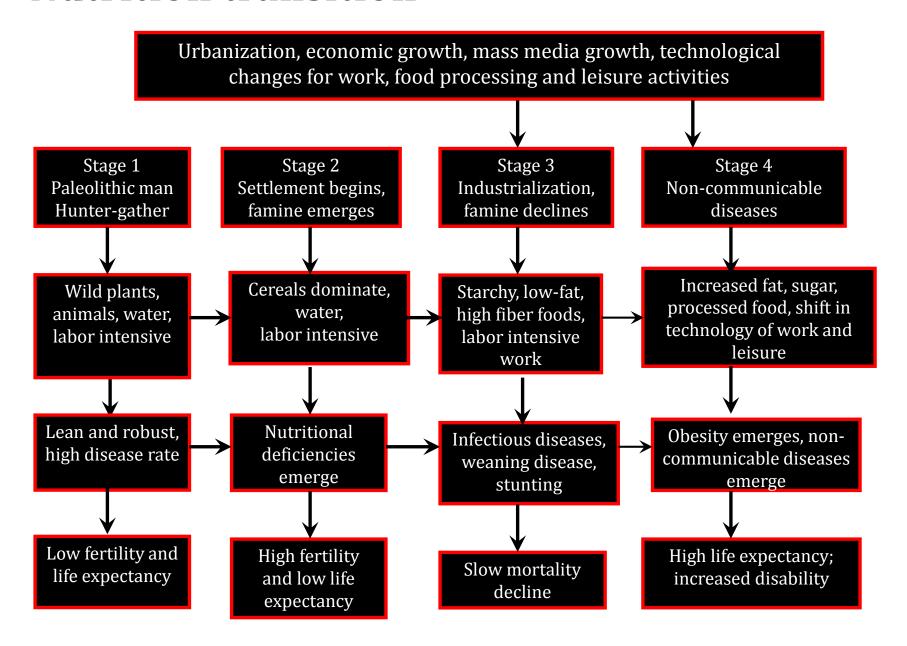


Nutrition transition



http://latitudes.nu/travel-guide/

Nutrition transition



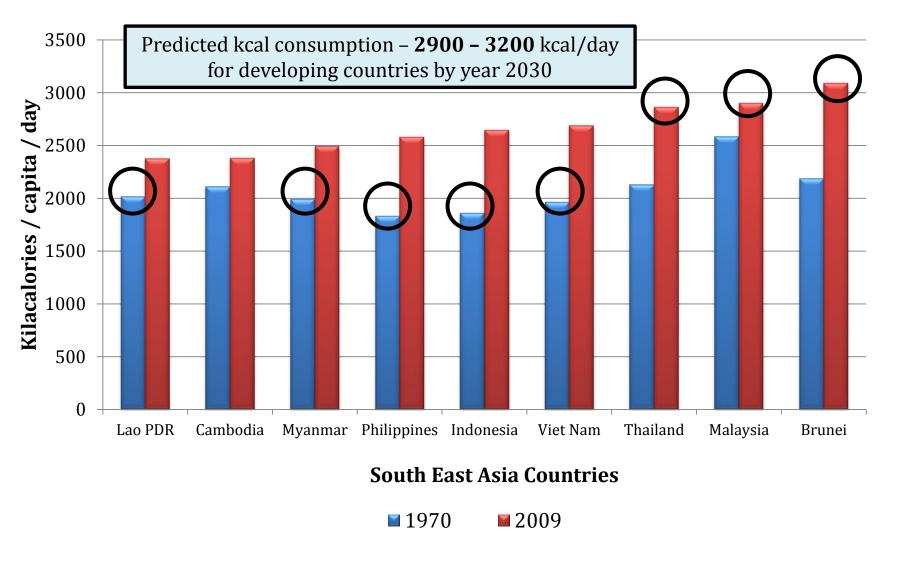


Figure 2. 1970 vs. 2009: Energy availability in ASEAN countries (kcal/capita/day)

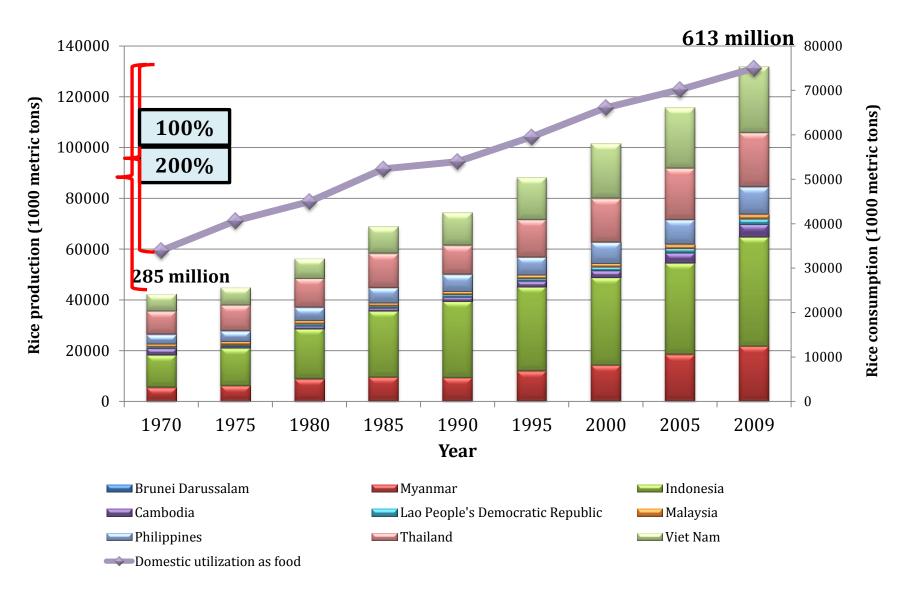


Figure 3. Rice production and consumption in SEA countries

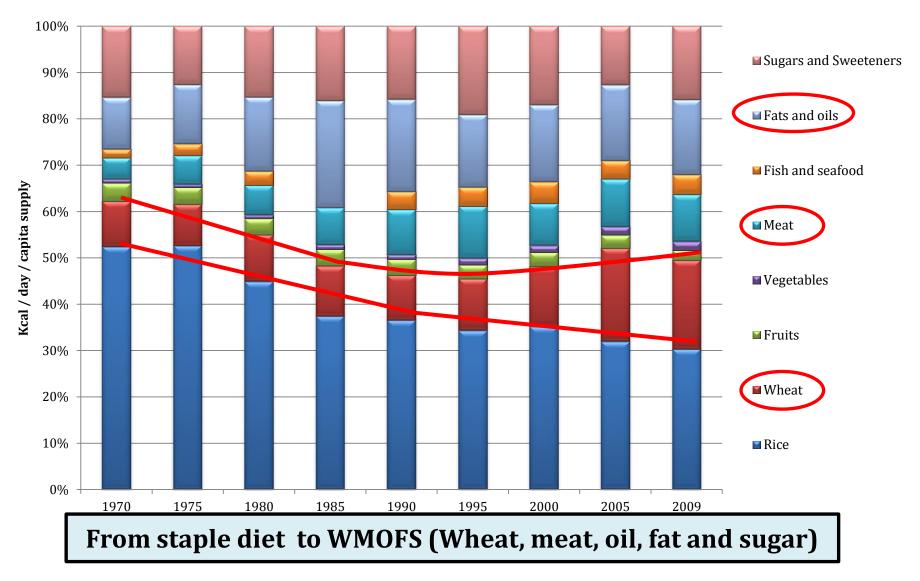


Figure 4. Kilocalorie contribution of various food commodity in Malaysia



International food trade Burgerization



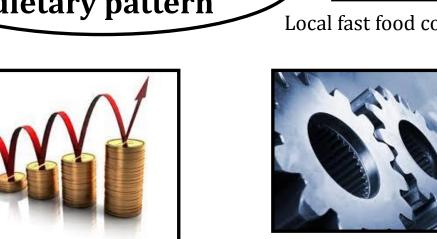
Urbanization and access to social and mass media



Foreign direct investment

Emergence of supermarkets and fast food chains

Drivers for change in dietary pattern



Increase in income and socioeconomic gains



Local fast food consumption

Shift from fish, forestry and agricultural sector to manufacturing and services

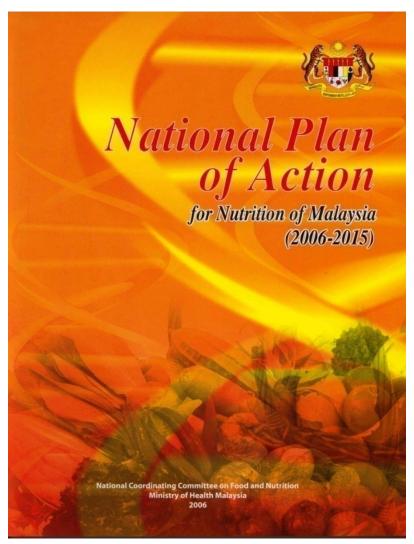
Implications to food and nutritional security

- Increase in non-communicable diseases
- Consequences of production and consumption of meat and fish
- Increasing pressure on environment
- "Food miles"
- Dietary change, less physical activities, sedentary lifestyle and occupational changes

Intervention Strategies

- Promote healthier food options
- Economic measures
- Malaysia's nutritional policies and National Plan of Action for Nutrition

National Plan of Action for Nutrition II (2006 – 2015) (NPAN II)



Malaysia's nutritional policies and National Plan of Action for Nutrition

- General Objective of NPANM II:
 - to achieve and maintain optimal nutritional well-being of Malaysians
- To ensure effective implementation, monitoring and evaluation of the Plan of Action, strategies of the Plan are oriented into
 - Foundation
 - Enabling and
 - Facilitating Strategies

General Objective: TO ACHIEVE AND MAINTAIN OPTIMAL NUTRITIONAL WELL-BEING OF MALAYSIANS

Specific Objectives

To enhance the nutritional status of population

To prevent and control diet-related non-communicable diseases

Enabling Strategies

Improving household food security especially among the low income group

Promoting optimal infant and young children feeding practices

Preventing and controlling nutritional deficiencies

Promoting healthy eating and active living

Supporting efforts to protect consumers in food quality and safety

Facilitating Strategies

Ensuring all have access to nutrition information

Continuous assessment & monitoring of nutrition situation

Promoting continuous research & development

Ensuring nutrition & dietetics are practiced by trained professionals

Strengthening institutional capacity in nutritional activities

Foundation Strategy

Incorporating nutrition objectives, considerations and components into national development policies and programmes

Conclusion

- Significant changes in dietary pattern in Southeast Asian countries
- Per capita energy availability has risen significantly over the years
- Changes in consumption pattern and lifestyle have led to obesity and non-communicable dietary related diseases
- Action plan and intervention strategies





