

World Nutrition

This pdf is currently a free service offered by the Association

Please access our website at: www.wphna.org, renewed every month, for:

All our world news, information, discussion and services

Complete monthly issues of **World Nutrition**

Details of how to join the Association and to contribute to our work.

Volume 2, Number 2, February 2011

Journal of the World Public Health Nutrition Association

Published monthly at www.wphna.org

The Association is an affiliated body of the International Union of Nutritional Sciences

For membership and for other contributions, news, columns and services, go to: www.wphna.org

Editorial

The global game plan of Big Snack



This editorial gives a context for the commentary in this issue of *WN* on ready-to-use therapeutic food (RUTF) (1), whose original stated purpose is the relief of severe acute malnutrition, especially within Africa. The title of this editorial, and the picture above, therefore seem to be on a very different topic. But they are not.

The nature of transnationals

Transnational drug corporations as a class are commonly called 'Big Pharma', and transnational cigarette corporations are known collectively as 'Big Tobacco'. 'Big Food' and sometimes also 'Big Drink' are terms commonly used to refer to transnational food and drink corporations, to indicate their collective power.

Whatever the apparent nature of their business, transnationals have many similarities. They operate globally. They concentrate their investment in the countries that offer them the best deals and opportunities. They tend to drive national or smaller companies out of business, or else take them over. They make gigantic profits, with sales that may be greater than the gross national products of many or even most countries. They pay top dollar for executives, scientists, and other specialists. They often employ vast numbers of people as salaried staff or casual workers. Their advertising and marketing spends, characteristically colossal, are focused on imprinting recognition of and loyalty to their name and the brands of their products. Techniques include symbiotic associations with media stars, and sponsorship of global sporting events, made exponentially more effective by television and the internet. Unlike politicians, their top executives are not subject to the uncertainties and disruptions of regular election, and therefore are better able to plan strategically.

The biggest transnational corporations are in some ways more powerful than the governments even of large countries. Their task includes setting the agenda for global research, public policy and accepted ideologies in their fields. As a means to this end, they engage prominent people after, or between, public service in international or national government, the professions, and civil society organisations. They endow, fund or in other ways support friendly influential academics and other qualified scholars in relevant areas.

Transnationals may invest \$US billions in new initiatives. They challenge unfriendly decisions of governments and their agencies whose purpose is to protect the public interest, in national and international courts, and they are free to move their business out of an unfriendly country. Part of their global strategy is 'regulatory capture', whereby they directly or indirectly gain extraordinary influence within UN and other international and national governments and agencies whose responsibility is to enact legislation and regulation in the public interest. They often invest in factories and other business in countries in great need of sources of employment, everywhere or in impoverished areas. They may set up foundations whose charitable initiatives, often targeted at people in desperate need, are effectively publicised.

The damage being done

In a rough old world, none of this might matter much, if the products produced by transnationals were generally nourishing, and benign in other ways. But in *WN*,

Carlos Monteiro has made an impregnable case against transnational food, drink and associated industries (2). Global food supplies have been reshaped in favour of relatively energy-dense ultra-processed products. The ingredients that supply most of their calories are often largely or mainly the cheapest available refined oils, starches or sugars, or animal products, with preservatives and cosmetic additives. Together with greater physical inactivity, ultra-processed products are responsible for the global pandemic of obesity, including among children and young people.

Those who believe in what is known as ‘market forces’, a phrase that in reality refers to the force of deregulated global business power, generally also believe that the troublesome aspects of transnational corporations are outweighed by their benefits. With Big Food and Big Drink, such a view is unjustified.

One of the theories of the ‘free market’, a phrase that refers to freedom of big business to do anything legal that it reckons will improve its bottom line, is that the results include greater competition and a greater variety of goods and choices. This is certainly not the case with modern mass manufactured food and drink products. Thus, Coca-Cola™ and Pepsi-Cola™ are both carbonated sweetened water, together with formulations that add colour and flavour. Blind tested, some people can distinguish these two ‘classic’ products, and others cannot. The differences between mass manufactured cola drinks are mostly to do with their company and brand image, including packaging and promotion, and their relative penetration of specific countries and other markets, and deals done to place vending machines.

Similarly, the ‘classic’ burger, whether produced and sold by McDonald’s, Yum! Brands, or other big firms, is a prefabricated meat product ‘patty’ inserted in a white bread bun, often with a lettuce leaf or a tomato slice, typically served with thin-cut French fries (chips) with, on the table, packets of tomato ketchup, mustard, mayonnaise, pepper and salt, and sugar for accompanying sweet snacks. Burgers may also contain bacon, cheese and other items. One standard burger is much the same as another. Differences include price and other inducements such as toys for children. With mass manufactured food and drinks, the promotion is the product. Their apparent variety is largely an illusion.

Teaching the world to snack

Most ultra-processed products are similar in another respect, usually ignored in the teaching and practice of nutrition. They are ready-to-eat or ready-to-heat, when necessary with the addition of milk or water. They are snacks, consumed in the street, in shops, at work, or while watching television or playing video-games, while travelling, or when doing almost anything. All over the world now, in cities and often also in rural areas, they are ready-to-buy 24 hours a day, 7 days a week, in supermarkets and convenience stores, and from vending machines. It is a mistake to use the terms ‘Big Food’ and ‘Big Drink’ to characterise transnational corporations in

the business of manufacturing and selling what Michael Pollan calls ‘edible foodlike substances’ (3). Their meaningful collective name is ‘Big Snack’.

Competition between Big Snack companies is relatively superficial. In many ways they are all on the same side. Leading transnationals frequently support or create associations designed to protect their collective interests. They all want to be free to do whatever increases their profits. They are all in the business of penetrating ‘emerging markets’. This involves displacing traditional and established food systems that use locally appropriate staple foods and ingredients, with branded products, usually licensed or imported. All of them are the enemy of the meal, with all this implies, including coherent family, community and social life.

None of this is secret. What is said here is evident from media business pages, trade journals, and indeed company reports, readily available on the internet. Once upon a time a leading transnational drink company promoted its main brand with a global advertising campaign whose theme was ‘We’d like to teach the world to sing’. The overall mission of the relevant transnationals is to teach the world to snack. Meaning, to snack their branded ready-to-eat or ready-to-heat aggressively advertised and marketed branded products, all life long, from birth to death. They are succeeding.

The big snack gap

That’s the context. Now here comes the reason why this editorial introduces the following commentary on ready-to-use therapeutic food (RUTF), which has a much greater potential significance than might be supposed. There is one gap in the global whole birth-to-death snack market.

At the beginning of life, artificial formula feeds have largely displaced breastfeeding. These are of course ultra-processed products, in a sense snacks that make up the whole diet. They are the foundations of the fortune of Nestlé, and sustain other transnationals. The success of these ready-to-warm products, needing only the addition of water, has in recent decades been countered by civil society organisations, now with the active support of UN agencies and national governments (4). But the proportion of mothers who exclusively breastfeed their infants beyond the first few weeks of life remains very small. The beginning of life market remains largely captured by transnational and other very large businesses.

From roughly 5 years of age, the rest-of-life market is now exploited with little resistance and accelerating success. Commentators reckon that the markets in countries with high average incomes are now fairly close to being saturated. The big markets for Big Snack are the rapidly industrialising and urbanising countries of the South, notably China and India, and also others in Asia and Africa whose own food systems are undermined by foreign debt, cash cropping, and loss of natural resources, but whose populations increasingly use money as their main means of

exchange. Subsistence farmers are practically invulnerable to Big Snack, although their children may hanker for 'lifestyle' products. In sharp contrast, city workers and their families are liable to subsist on ready-to-eat and ready-to-heat products.

So this leaves the time of life between weaning and roughly the age of 5, as the big snack market gap. It is now being infiltrated by 'fortified' follow-on and other post-weaning products that make or indicate increasingly extravagant health claims. Parents are more likely to purchase products for their young children when they believe these will promote well-being and protect against disease. Also, Big Snack companies prudently feel inhibited from promoting products that are obviously fatty, sugary or salty, with nothing much good that can be said about them, to young children. The old line that such products are a great source of energy does not 'sit well' now, because most parents are aware that 'energy' means calories, and that energy-dense products make children fat.

Now look at this gap in the market from the point of view of Big Snack. What would be the ideal product? Suppose that a ready-to-eat snack product came on the market, designed for young children, after weaning (or even while breastfeeding continued) and until roughly the age of 5? And suppose that such a product was almost universally believed – by UN agencies and national governments, by nutrition scientists and medical and other qualified workers in the field, by civil society organisations, and by local community leaders and parents – to protect the health and save the lives of vulnerable children?

There is such a product, and it is the focus of the commentary that follows this editorial. It is ready-to-use therapeutic food (RUTF), a term now used to refer to an extremely energy-dense paste (500 calories in a 92 gram packet) made from ground peanuts, with added powdered milk, oil, and sugar, fortified with micronutrients. Currently the leading product is the patented and branded Plumpy'nut®. Its French manufacturer, Nutriset, in 2009 manufactured 14,000 tonnes of the stuff, mostly purchased and distributed by the UN Children's Fund (UNICEF), to be given to over 500,000 children, amounting to \$US 66 million in sales (9).

RUTF was originally formulated as a food that is also a medicine, with the purpose of relieving and treating severe acute malnutrition, which is life-threatening, and which afflicts an estimated 20 million children worldwide, mostly in Africa and Asia. It works. In circumstances of general severe deprivation, it can be a good choice. It enables outpatient treatment of children who otherwise would be in hospital, and it saves lives. However, a letter from a paediatric physician based in Darfur, Sudan, published in this issue of *WN* (5), points out that Plumpy'nut® is problematic. At \$US 60 for a 2 month treatment, it is not cheap. It creates social and family dependency, and some children once fed on it will eat nothing else. It is irrational in any part of the world where comparable products can be made from local foods – peanuts are abundant in various parts of Africa.

The focus of RUTF has now shifted. The move now, initiated by some of the most powerful players in the aid business, is to use Plumpy'nut® and other products to 'treat' milder forms of undernutrition (1) often so judged simply because apparently healthy children are smaller than is officially reckoned to be healthy. The further move is to use RUTF to 'prevent' relatively mild as well as severe undernutrition and clinically observable deficiencies (1). This is a whole different global game plan. Most young children in most African and Asian countries can be identified as at risk of malnutrition. The global market of children defined as suitable cases for RUTF moves from 20 million to say 200 million, or to 300 million, to be 'on the safe side'.

Filling the snack gap

The Darfur physician also wonders what will happen when the supply of Plumpy'nut® dries up. Here comes the answer. Imagine you are a senior Big Snack executive. Would you want your company to own a product prominently branded with its own name and also with the name of your company, that mothers believe protects the health and even the lives of children? Would you think that such a product, endorsed by UN agencies, national governments and other relevant actors, could fill the snack gap, and build lifelong loyalty to any or all of the other snack products made by your company? If most of the very profitable products made by your company were what's known as 'junk food', would you reckon that a product believed to be life-saving would burnish your company's image? Would you also believe that the patent on Plumpy'nut® now held by Nutriset could be set aside or circumvented, or else that Nutriset could be taken over? Yes, you would.

Transnational executives are intelligent and farsighted. The gap between roughly 6 months and 5 years is Big Snack's greatest prize. RUTFs branded with transnational company logos could indeed become multi-billion-dollar sellers, and, when used by mothers who are led to believe that the products are life-savers, would be potent ambassadors for equivalently branded baby foods, soft drinks, and solid snack foods. Any company that took the lead in filling this gap, with universally available branded products that had the image of medicine as well as food, would become a colossus. And what would happen as a result? Hundreds of millions, and then billions, of people all over the world, initially slim children most of whom never had anything wrong with them, would consume energy-dense snack products every day. And they would become obese.

Is there a flaw in the argument advanced here? We suggest not. The biggest of the Big Snack transnationals is PepsiCo. Is Pepsi interested in the RUTF market? It seems so (6). Recently the Pepsi senior vice-president responsible for its global health policy, and his boss the Pepsi-Co chief scientific officer, with two other Pepsi colleagues, wrote an article for the *American Journal of Public Health* (7). Its topic was 'Can the food industry help tackle the growing global burden of undernutrition?'

They said: 'Josette Sheeran, executive director of the United Nations World Food Programme, believes that there is need to create incentives for food companies to develop a wider range of healthy weaning foods' and added 'especially for populations suffering from acute and chronic malnutrition'. They then went on to say 'There are many initiatives underway to develop new products... Nutriset produces Plumpy'Nut, a fortified ready-to-use therapeutic food (RUTF) for extremely malnourished children'. They added: 'However, the global demand for a high-quality, safe, and nutritious RUTFs is not being met. Food companies could play a more decisive role in this field if incentives were better aligned with health gains'.

RUTF stuff, indeed. Childhood obesity? We ain't seen nothing yet.

References

- 1 Latham MC, Jonsson U, Sterken E, Kent G. RUTF stuff. Can the children be saved with fortified peanut paste? *World Nutrition* February 2011; **2**, 2: 62-85
- 2 Monteiro C. The big issue is ultra-processing. [Commentary] *World Nutrition*, November 2010, **1**, 6: 237-269.
- 2 Pollan M. *In Defense of Food. An Eater's Manifesto*. New York: Penguin, 2008.
- 3 World Health Organization/ UN Children's Fund. *Global Strategy for Infant and Young Child Feeding*. Geneva: WHO, 2004.
- 4 Serventi M. RUTFs are not the answer in Darfur.[Letter] *World Nutrition*, February 2011, **2**, 2: 98-100. Obtainable at www.wphna.org
- 5 Arie S. Hungry for profit. *British Medical Journal* 9 October 2010, 341, c5221.
- 7 Yach D, Feldman Z, Bradley D, Khan M. Can the food industry help tackle the growing global burden of undernutrition? *American Journal of Public Health* 2010, **100**: 974-980.

The editors

Acknowledgement and request

Readers are invited please to respond. Please use the response facility below. Readers may make use of the material in this editorial if acknowledgement is given to the Association, and WN is cited. Please cite as: Anon. The global game plan of Big Snack. [Editorial] World Nutrition, February 2011, 2, 2: 55-61. Obtainable at www.wphna.org

*The opinions expressed in all contributions to the website of the World Public Health Nutrition Association (the Association) including its journal **World Nutrition**, are those of their authors. They should not be taken to be the view or policy of the Association, or of any of its affiliated or associated bodies, unless this is explicitly stated.*