KEY MESSAGES

- People spend 1/3 of their adult lives at work. By leveraging the workplace as a connector to people, we can bring access to and knowledge about healthy nutrition to millions of people around the globe through workforce nutrition.
- Major opportunities to further expand workforce nutrition policies in India include applying minimal nutritional standards to food provisioning in workplaces, extending the current policies to supply chain workers, and incentivising employers to roll out existing EatRight campaigns through the work structures.
- With supportive policies in place, even greater impact can be achieved when ensuring minimal accountability and compliance mechanisms against these policies (at state-level).

SETTING THE SCENE

Malnutrition in all its forms, from undernutrition to micronutrient deficiencies and overnutrition, is a global public health burden. It is estimated that 2 in 3 women of reproductive age are affected by nutrient deficiencies. In India, the Global Nutrition Report in 2021 highlights the high prevalence of anaemia among women of reproductive age (53%) with limited progress on meeting targets to reduce Non-Communicable Diseases such as diabetes. Never has there been a greater need to engage all actors and options to address the malnutrition burden the world faces. People spend one-third of their adult lives at work, therefore, by leveraging the workplace, access to and knowledge about healthy nutrition can be brought to millions of people around the globe. Workforce nutrition is an underutilised opportunity to deliver proven benefits for employers, workers, and communities. A definition and framework for workforce nutrition can be found here.

In recent years, India has taken some critical steps to identify the role of employers in enabling good nutrition for workers, most notably in the Occupational Safety Health and Working Conditions Code (2020). Further improved action in the policy arena could help start or scale up workforce nutrition programmes and contribute to addressing the Sustainable Development Goals, including SDG 2 (zero hunger), SDG 3 (good health and wellbeing), SDG 5 (gender equality), and SDG 8 (decent work and economic growth).

WIN-WIN-WIN APPROACH

As elaborated in a GAIN evidence brief, poor-quality diets and insufficient food quantity are linked to reduced work capacity. This suggests that the malnutrition burden can be partly addressed through a win-win-win approach which improves individual lives, business outcomes, and national economies. Individual outcomes observed as a result of workforce nutrition programmes have included increased job satisfaction, reduced sick days, higher consumption of healthy foods, and increased duration of exclusive breastfeeding, amongst others. Business outcomes are reduced absenteeism, enhanced productivity, reduced medical costs, and significantly lower rates of accidents and mistakes, which together could lead to an increase in the national GDP. Thus GAIN, as part of the Workforce Nutrition Alliance, urges regulators and policymakers in India to support employers by implementing public policies for improved workforce nutrition.

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IMPROVING WORKFORCE NUTRITION RELATED POLICIES

An outline of the four nutrition pillars for workforce nutrition and the related existing policies in India is presented in Table 1. Based on an analysis of these policies, the table also provides opportunities to further employer-driven approaches to improve nutrition among formal worker populations. Even greater impact can be considered when expanding existing policies to include reaching workers in supply chains (as opposed to only those directly employed by the company) as well as establishing minimal accountability and reporting requirements against these policies.

Table 1: Existing policies and opportunities to further strengthen policies on workforce nutrition in India for the different nutrition pillars, based on an analysis of the national labour and nutrition policies

<table>
<thead>
<tr>
<th>Nutrition pillar</th>
<th>Existing workforce nutrition related policy components</th>
<th>Opportunities to further strengthen policies on workforce nutrition</th>
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| Healthy Food at Work | • In establishments with >100 workers, one or more canteens need to be established9.  
• Workers’ representation in canteen management is mandated8.  
• National Food Security Act guarantees food security for all. | • Apply or incentivise minimal nutritional requirements to canteen offerings based on national Dietary Guidelines’8.  
Consider including fortified and/or biofortified foods wherever possible in worker meals and/or rations.  
• Support state-level and sector-specific roll out of government EatRight Campaign.  
• Incentivise self-help groups (e.g., under the Mahatma Gandhi National Rural Employment Guarantee Act (MGNREGA)) to reach informal and casual workers with healthy meal options available at or near the workplace. |
| Nutrition education | • Mass media campaigns on non-communicable disease awareness, healthy diet, and exercise exist10, but there is no specific mention of worksites or workers7. | • Incentivise employers and worksites to reinforce government mass media campaigns for workers on healthy eating and good nutrition, connected to EatRight. |
| Health Checks | • No direct reference found under existing laws, rules, or policies on the inclusion of health checks in worksites, aside from occupational health checks.  
• Universal Health coverage18 is guaranteed by the government.  
• Nutrition counselling promoted for pregnant women and children11. | • Advocate for inclusion of diet-related diseases in health check within Occupational Safety Health (OSH) requirements at the state government level.  
• Promote nutrition counselling for workers (all workers or targeted to those at risk, as identified by health checks).  
• Counselling can be linked to existing mass campaigns of the Ministry of Health or related NCD campaigns at the worksite level. |
| Breastfeeding Support | • Law requires 26 weeks of maternity leave (up to 8 weeks prior to childbirth) which reduces to 12 weeks for adoption/surrogacy cases and for those with 2 or more children12. Leave per average daily wage, paid at 100%  
• Multiple suggestions for childcare provision under MGNREGA – a rural employment guarantee scheme covering a significant percentage of rural women14.  
• Two nursing breaks per day until a child reaches 15 months in age15.  
• Employer shall allow four visits a day to the creche / childcare facility by women with children under 5 years of age16. | • Support compliance and enforcement of existing policy at the state level as relevant.  
• Consider parental leave for supporting spouses, suggested for at least 2 weeks as per International Labour Organisation (ILO) recommendations.  
• Require non-dismissal policy of women from announcement of pregnancy through to at least 1 month post maternity leave, as per ILO recommendations with Ministry of Labour. |

A CALL TO ACTION

India has taken several positive steps on provisioning of food to workers and universal food security, improving breastfeeding and maternity entitlements, childcare facilities across the formal and informal sector. Further refining and expanding existing policies to encourage minimal but broad workforce nutrition standards would help address the burden of malnutrition and associated non-communicable diseases. Essential considerations include applying minimal nutritional standards to food provisioning based on national Dietary Guidelines and incentivizing employers to roll out EatRight campaigns through the existing work structures. Finally, even greater impact can be achieved when ensuring minimal accountability and compliance mechanisms against all policies. When combined, these actions will contribute to healthier lives of citizens, improved commercial results and more stable labour relations.

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5Sec(24)(1)(v) Occupational Safety Health and Working conditions (OSHW) Code, 2020  
6Factories act 1948, Section 46(1)(d)  
7National Institute of Nutrition, Dietary Guidelines for Indians. (2011)  
8National Multisectoral Action Plan for Prevention and Control of Common Noncommunicable diseases  
9National Nutrition Mission, National Nutrition Strategy  
10Ayushman Bharat Scheme  
11Niti Ayog’s Nutrition Strategy, 2017  
12Sec 5(3) Maternity Benefit Amendment Act (MBAA) (2017)  
13Niti Ayog’s Nutrition Strategy, 2017  
14Section 66, Social Security Code 2020  
15Section 11(A), MBAA, 2017; Sec(24)(3) Occupational Safety Health and Working conditions (OSHW) Code, 2020; Section 67(1), Social Security Code, 2020