What lies beyond urbanisation? Re-evaluating

poultry consumption in urban India

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Generation of stratified consumption outcomes with inequalities in consumption informed by misinformation/ rumors (industrial poultry generating hormonal conditions in humans) as a result of changing production and provisioning practice at urban level in Chennai

- Poultry consumption in India
 Historically low but demand is increasing
 Influenced by strong socio-cultural traditional and political dimensions
 Economic constraints, cultural and intrahousehold dynamics are barriers to consumption
 Growth of the organised industrial sector is associated with changes in the quantity, quality and safety of poultry provided in cities
 - Poultry health risks are not uniformly understood by consumer with different social backgrounds

Data collection

Factor	Category	N (107)	%
Gender			48.6%
Income			28.0%
			28.0%
	Middle - high income		18.7%
	High income		25.2%
Religion	Hindu		37.4%
	Christian		29.0%
	Muslim		33.6%
Social Group	Scheduled Tribes		
	Scheduled Castes	32	29.9%
	Other Backward Classes		57.0%
	Upper Castes		7.5%
			5.6%

Reflexive thematic analysis – Themes were created after reviewing of literature and transcripts

Theoretical framework

Systems of provision and social practice theory



provisioning practices at the consumption junction (Rai, 2021)

This study analyses poultry consumption in urban Chennai at the intersection between consumer norms and the provision of poultry

Results

Changes in systems of provision: increased availability and affordability
Broiler chicken and eggs are the most available poultry products at cheaper prices. Poultry is supplied by traditional shops (butchers, wet markets, "hotels") along with more modern shops, supermarkets and restaurants with. Ready-to- eat poultry (take away, online, to eat in place) is increasingly available and used as a way of provisioning food either from traditional or modern suppliers. The perceived quality/ hygiene of the products provided depends on the type of shop. These are not equally distributed across the neighbourhoods.

Concept of safe poultry

Country chicken and eggs are considered healthy because they are not grown industrially with the use of hormones vis a vis naturally grown country chicken in villages. Broiler chicken is associated with health conditions (early periods for young girls, infertility, skin conditions, "loose motion"). Thus, consumption is limited especially for young women. "Good" chicken also refers to freshly cut chicken, which comes without skin (no hair, not fat), as the skin is perceived as less hygienic and bad for digestion. Eggs are associated with health benefits, although the yolk is often avoided because of issues relating to ease of digestion and cholesterol (mostly by children and elderlies).

"Whatever the chicken eats, it comes to us and it is good for our health.... Another thing is that it is natural...broiler chicken is artificial. People are getting a lot of health issues because of broiler chicken"

"They cut it (clean chicken))in front of us and give us. That is fresh. Some cut it and store it and give it to us, that we don't buy. That is not fresh or good. They have to cut it in front of us with the machine and give us" - Hindu woman, low-income consumer

Changes in social connotations attached to poultry

Although it is considered unhealthy, eating broiler has been normalised in Chennai. There has been a shift in the way poultry is perceived from a ritualised point of view. Industrially produced poultry is said to produce less heat (less impure according to the Hindu religion), broiler is seen as a cleaner product by some as it does not eat the "dirt" that country chicken eat (lizards and worms) and it is said to have better organoleptic and cooking attributes (better smell, softer, faster to cook). It is for these reasons that the broiler is more consumed. In particular, among the male middle/higher class eating chicken (broiler) outside is a social activity for convenience and recreational activities.

"We are advocate... Chicken After working hours, we will go to the beach and from there also we will eat

"Country chicken causes a lot of body heat and country chicken has a lot of bones.... Broiler has lot of flesh hence children like broiler because it would be soft. Country chicken will be hard, that is why we don't buy that much" - Hindu man middle-low income consumer

Health risk information regarding poultry value chain
Information and misinformation amplified by the use of social media plays a considerable role in consumer knowledge regarding poultry safety and consumption. The government and doctors (campaigns), the private sector (advertising) and word of mouth (traditional beliefs and cultural aspects) are the main sources of information. Government and word of mouth from close community/family information are the most trusted. Low – middle middle– high income consumers, Hindu, female, are the ones that are the most affected by the information.

"My relatives told me not to have so much broiler chicken. My relative is getting fertility treatment and doctor told them to avoid.... So I strongly believe the news". - Hindu woman, middle-high incom

- Systems of provision for poultry in urban India are changing poultry availability and quality (larger-scale industrial production, more retailers, markets, supermarkets, restaurants, and fast food)
 Food practices and traditional values are changing along with the changing industry (food preparation, broiler, social dynamics)
 Poultry provisioning and production are linked to information/misinformation generation and various agents influence consumer perceptions (the safety of poultry products)













