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Q18

How do you account for the growing fast food industries given that there are increased health concerns in modern society? Illustrate your answer with the Indian experience.

UPSC Civil Services Mains 2025 · GS I · 15 marks · Indian Society and Diversity

Salient features of Indian Society, Diversity of India.

Core demand of the question

- **Explain the paradox:** more health talk, more fast food
- **Give global drivers, then the Indian experience:** cities, youth, delivery apps, regional fusion
- Keep it sociological, not a diet sermon

Revision summary

Fast food grows where work is hurried, advertising is loud, and delivery is cheap, even when health knowledge rises.

The same industry sells indulgence and low-calorie versions.

India mixed global chains, vegetarian **localisation**, and older fried snacks on delivery platforms.

NFHS-type data show more overweight and diabetes while undernutrition remains, a **double burden**.

The paradox is social and economic, not a simple failure of willpower.

Introduction

Modern societies talk more about **sugar, oil and heart disease** than any generation before them. They also eat more **food designed in a factory and served in minutes**. That is not hypocrisy only. It is a **social machine**: time, advertising, class, and a city that no longer cooks at noon. India has joined that machine without dropping its own snacks.

Body

Why the industry grows beside the clinic

Urban work leaves a short lunch. **Women's paid work** without public kitchens shifts cooking. **Youth** use food as identity and dating. **Advertising** links fried chicken to success. **Cheap vegetable oil and sugar** make calories profitable. Health concerns create a **second market** - salads, sugar-free, "grilled" - so the same industry sells the disease and the cure. Risk is discounted: the heart attack is later, the burger is now.

The Indian experience

India did not start with only pizza. It had **chaat, vada, samosa, biryani**. Global chains (**McDonald's, KFC, Domino's, Subway**) **localised: McAlloo Tikki, vegetarian lines, no**

beef in many stores. Domestic brands and **cloud kitchens** then used **Swiggy and Zomato** to put a tandoor or a burger on a scooter. Small towns followed metros. **Mall culture** and air-conditioning made the outlet a hangout, not only a meal.

- **Health data moved the other way: NFHS** and ICMR work show rising **overweight, diabetes and hypertension**, including in younger ages, while **undernutrition** still sits in the same country. The Indian paradox is **double burden**. A delivery app can reach a gated colony and skip a slum one kilometre away, or sell fried food into both.

Fast food grows because it fits **speed, caste-neutral public eating, and aspiration**. Health concerns grow because bodies keep the receipt. Policy (FSSAI labels, school rules, oil tax talk) lags the scooter.

Flow diagram

Urban time -> Fast food
Advertising apps -> Fast food
Fast food -> Health worry
Health worry -> Diet products from same industry
Indian chaat plus global chains -> Fast food

Conclusion

Fast food expands because urban time, advertising and delivery make it easy, even as clinics talk of sugar and fat. India's experience is global chains plus local snacks on an app, beside a **double burden** of obesity and hunger.

Facts & figures

Localisation

Global chains in India pushed vegetarian menus and potato patties to fit caste and regional taste.

Cloud kitchens

Delivery-only kitchens that cut dining space and spread branded food into smaller cities.

Double burden

India carries undernutrition and rising obesity-related disease in the same demographic transition.