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Decolonize Your Diet

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Executive Summary

With the industrialization of the food system in past decades, convenience foods have become the cornerstone of the standard American diet. Dietary intake high in artificial ingredients and additives has played a significant role in the obesity epidemic in the United States recent decades. This spike in obesity rates has been more impactful for some populations than for others. In low-income communities of color, fast and processed foods are often the most accessible and affordable source of sustenance. Accordingly, these communities are at a disproportionate risk for obesity and weight-related illnesses such as hypertension and diabetes. Although health disparities are merely one example of the social barriers faced by predominately low-income people of color, they are critical indicators of status and well-being. Using food as a symbol of power, a number of social movements have resisted against systemic inequality and oppression.

The Decolonize Your Diet project channels principles of resistance into its mission to improve the health of Oakland residents. As a model for communities of color to reclaim and reconnect with ancestral ways of eating, the program aims to inspire a sense of empowerment through food. Through the application of a decolonial framework, the workshop will promote meaningful dialogue around the value of reclaiming one’s cultural inheritance and organizing for social change. Led by knowledgeable and passionate chef-educators who emphasize healthy, culturally-specific cuisine, each workshop will discuss the history and cultural significance of an ancestral dish. And through that dish, the event will create a visceral experience for participants helping them gain a greater understanding of the power of food, as well as their power as individuals and a collective community. The Decolonize Your Diet project has the power to improve the well-being of its participants not only through health, but also through engagement.
in social and political actions.

**Literature Review**

After a steady incline over the past few decades, it is estimated that two-thirds of American adults are either overweight or obese (Wallinga, Schoonover, & Muller, 2009). While it impacts populations regardless of age, gender, or race; working class communities of color are disproportionately impacted. Although there is no singular cause for the obesity epidemic in the United States, nutrition is one of the critical lenses through which to analyze it (Alston, Sumni, & Volsti, 2006). Accordingly, food can be another important lens in that analysis. The evolution of the standard American diet from natural and plant-based to processed and convenient can be traced through changes in methods of food production. In an effort to better understand the health issues impacting society today, researchers have turned to agricultural policies and practices for answers. Their research has affirmed a positive correlation between chemically intensive food production and the deteriorating health of American adults and children. Changes in the production of food have also meant changes in the way that food is marketed and sold. As a consequence of these changes, low-income neighborhoods became the recipients of the unhealthiest food products available. Various grassroots movements emerged from resistant attitudes to discriminatory food marketing and the inaccessibility of healthy foods. Aimed at producing an equitable and sustainable food system, these movements continue to seek innovative and impactful solutions to the health problems that afflict marginalized communities. In accordance with the belief that culture is a powerful tool against oppression, ancestral foodways are being recognized for their potential to help communities reconnect with past traditions and improve their mental and physical well-being.
U.S. Agricultural Policies and the Industrialized Food System

Wallinga, Schoonover, and Muller (2009) analyzed the relationship between food and health by examining United States agricultural policies and their impact on the country’s obesity epidemic. The provisions of the policies were found to have a direct impact on the food industry through subsidies, research, and various farming incentives and deterrents (Wallinga et al., 2009). The food that ultimately becomes available to the American consumer is decided by these agricultural policies by means of influencing which crops farmers cultivate and the price point at which they are offered (Wallinga et al., 2009). These guidelines were initially put in place to help protect the agricultural industry from unpredictable natural elements as well as prevent a decrease in prices by helping farmers to manage their degree of production (Wallinga et al., 2009).

Wallinga, Schoonover, and Muller (2009) noted that throughout the past decades, U.S. farmers have been strongly incentivized to produce commodity crops such as wheat, soybeans, rice, and most notably, corn. This policy shift took place in 1971 after the Nixon administration’s appointment for Secretary of Agriculture; an ally to agricultural corporations, the new secretary encouraged the overproduction of commodity crops (Wallinga et al., 2009). Food production management systems continued to dissolve with the implementation of 1996’s Freedom to Farm Act which resulted in farmers increasing their levels of production leading to a subsequent decrease in market prices (Wallinga et al., 2009). Today, complex government policies enable an overwhelmingly industrialized process of food production marked by a cycle of overproduction and low market prices (Wallinga et al., 2009).

In a separate study, Wallinga (2009) shifted from a focus on policy and offered a brief overview of industrialization and how it transformed the way that food is grown, distributed, and
purchased in the United States. The study revealed that new systems of production not only impacted the way we eat but they also reduced the diversity of our ecological landscape (Wallinga, 2009). In the Midwest region known as the Corn Belt, small and moderate-sized farms are quickly disappearing and more farmland is being used exclusively for the growth of corn (Wallinga, 2009). Farms were once recognized as local, self-sufficient, family-run businesses where an array of commodities might be produced (Wallinga, 2009). Now, they’re more akin to massive factories that specialize in the production of only one or two commodities (Wallinga, 2009). Technological innovation is one of the most notable factors in this transformation. From innovations in plant and animal breeding to farm machinery and transportation methods, nearly every aspect of food production can be outsourced for greater time and financial efficiency (Wallinga, 2009).

A review of the United States’ food supply can further explain how agricultural policies and industrialization impact the health of Americans. In their research, Alston, Sumni, and Volsti (2006) pointed out that while the policies do not necessarily have a direct impact on the foods we opt to consume, they do have a direct impact on the commodities farms opt to produce. Due to the benefits of government support and the aforementioned technological innovations, farmers minimize their risks by choosing to farm only one commodity, such as corn, as opposed to a variety of fruits and vegetables (Alston et al., 2006). Wallinga, Schoonover, and Muller (2009) inquired about the effects of the over-abundance of commodities like corn and soy on the U.S. food system. These low-cost commodities attracted corporations who added them to finished food products in the form of high-fructose corn syrups and hydrogenated vegetable oils (Wallinga et al., 2009). Over time, this led to a drive in the production of cheap, fast foods simultaneously placing whole, nutritious foods at a competitive disadvantage (Wallinga et al.,
because they are more expensive to grow, they are more expensive to buy. This supports the widely-held belief that by favoring the production of commodities that can be converted into cheap food ingredients, U.S. agricultural policies were instrumental in increasing the availability and consumption of processed, energy-dense foods (Alston et al., 2006).

In addition to government policies, there is another system operating in the industrialized food industry that fosters the availability of unhealthy foods – marketing. Defined by the American Marketing Association as “the activity, set of institutions, and processes for creating, communicating, delivering, and exchanging offerings that have value for customers, clients, partners, and society at large” (Chandon & Wansink, 2012, p. 571), marketing has clear potential for influencing the food that we purchase and consume. Food marketing’s impact on consumer health can be traced through the mechanisms which food marketers commonly refer to as the 4 Ps – product, price, promotion, and place (Chandon & Wansink, 2012). These mechanisms reveal how products are designated for accessibility and consumption by particular communities. The pricing of a product is arguably the most influential variable of consumption as it dictates who can afford it and how much they consume (Chandon & Wansink, 2012). The promotion of a product, which includes branding and advertising, serves to inform consumers of what they can expect in terms of taste and nutritional value (Chandon & Wansink, 2012). Placing is the determinant of which products can be found in a particular environment (Chandon & Wansink, 2012). And finally, the product and it’s qualitative and quantitative properties are also variables of consumption (Chandon & Wansink, 2012). Each of these variables have been crucial in the evolution of the standard American diet.

Understanding how food marketing operates is essential to understanding the root causes of disparities in obesity and other health problems in low-income communities of color.
Williams, Crockett, Harrison, and Thomas (2012) explored the relationship between commercial food marketing and food culture to show how it correlates with the prevalence of obesity among African Americans and Latinos. Food cultures, also referred to as foodways, are the ways in which groups use food to maintain social bonds and assert their identity, both individual and cultural (Williams, Crockett, Harrison, & Thomas, 2012). Research showed that for food marketers, foodways represent an opportunity for profit; by tailoring their strategies to target specific groups and the way they eat, marketers can effectively maximize their sales (Williams et al., 2012). Although marketing activity is often geared towards meeting an existing demand, in many cases, it’s also geared towards creating that demand. One example of this practice can be seen when food or drink manufacturers pay small retailers to carry their products, incentives like these are known as slotting fees; it is also commonplace for manufacturers to offer retailers a discount for large purchases (Williams et al., 2012). In addition to pricing strategies, food marketers also use communication strategies to create a demand for their products. This often includes advertising aimed at appealing to a particular group through cultural cues such as language or music (Williams et al., 2012). But most importantly, consumers in racially and socioeconomically segregated neighborhoods are influenced by the salient advertisements of processed, junk food (Williams et al., 2012). These factors combine to produce a food environment that both encourages and facilitates poor dietary-intake among low-income people of color.

**Food Environments and Health**

Many studies have demonstrated how the features of an environment prove to be critical indicators of the health of its residents. Lovasi, Hutson, Guerra, and Neckerman (2009) supported this theory in a literature review of “obesogenic” environments and how they affect
health and health behaviors. To distinguish their review from previous analyses, the researchers focused on the effects of the built environment on three target populations: African Americans, Latinos, and individuals of low socio-economic status (Lovasi et al., 2009). The research demonstrated a direct correlation between the incidence of overweight, obesity, and weight-related illnesses and limited access to retailers of nutritious foods (Lovasi et al., 2009). Low-income neighborhoods are particularly disadvantaged due to the travel distance required to access a healthy food retailer; for residents of these neighborhoods, convenience stores and fast food restaurants are more feasible options because of their proximity and low prices (Lovasi et al., 2009).

Impoverished neighborhoods that lack healthy food retailers such as grocery stores and farmers’ markets are commonly known as “food deserts” (Lovasi et al., 2009) and researchers are better understanding how these environments influence food purchasing and consumption behaviors. Ghosh-Dastidar et al. (2014) examined the effects of certain food shopping conditions on obesity among African American residents of food deserts in Pittsburg, Pennsylvania. The study found that the distance required to travel to a grocery store was associated with higher obesity levels; in fact, for every mile traveled, the odds of obesity increased by five percent (Ghosh-Dastidar et al., 2014). In addition to examining the factor of distance, researchers also examined store characteristics, specifically the pricing and placement of products (Ghosh-Dastidar et al., 2014). Product pricing was found to correlate with incidence of obesity as inexpensive products have less nutritional value (Ghosh-Dastidar et al., 2014). Though it should be noted that traveling to a store that offered fresh fruits and vegetables at lower prices than a convenience store did not translate to their purchase by study participants. In accordance with lower prices for fresh foods, the prices for junk foods are lower as well making them a more
feasible option for shoppers on a budget (Ghosh-Dastidar et al., 2014). The findings of this study suggested that the presence of large grocery stores or supermarkets is insufficient in facilitating the purchase of healthy foods, consumers must also be enabled through competitive pricing (Ghosh-Dastidar et al., 2014).

From flavor and cravings to access to a car or kitchen, there are numerous factors at play when individuals choose what to eat. In their qualitative study of food consumption among a sample of African American men and women of mixed age, Lucan, Barg, and Long (2010) found that affordability is both a barrier to healthy food consumption and a promoter of junk food consumption. Researchers also found that other barriers to healthy eating included accessibility, freshness, convenience of alternatives, and time constraints (Lucan, Barg, & Long, 2010). The consumption of fast food was promoted by factors which included taste, cravings, and availability (Lucan, Barg, & Long, 2010). Findings from this study support the theory that food consumption and obesity can be attributed to multiple factors, many of which are systemic.

Food Movements

Systematic propagation of the industrialized food system has left many powerless over the kinds of nutritional sustenance available for purchase in their communities. Some have responded by directing those feelings of powerlessness towards challenging the system; Oakland in particular has been central for social movements like these. Although they all seek to improve the quality of food, it is important to distinguish the different types of food movements that exist. For the alternative food movement, activists focus on reforming the agrifood industry through practices that promote sustainability and localism (Sbicca, 2012). This approach is successful in addressing environmental damage caused by industrial farming practices but unsuccessful in addressing the pervasive racial and economic inequalities of the food system (Sbicca, 2012). Led
by predominantly white, middle-class individuals, the alternative food movement advocates for the cultivation of organic foods which are often too costly and inaccessible for many low-income, minority communities (Sbicca, 2012).

Werkheiser and Noll (2013) agree with this criticism in an analysis of the three sub-movements of the local food movement. In what they referred to as the individual-focused sub-movement of the local food movement, purchasing and consumption behaviors are oversimplified and reduced to an individual choice (Werkheiser & Noll, 2013). It also perpetuates the myth that supporting local food can co-opt the industrial food system’s power and solve public health crises (Werkheiser & Noll, 2013). Another sub-movement focuses on the systemic processes that shape food production and consumption; these processes include laws, policies, and organizations (Werkheiser & Noll, 2013). This sub-movement is critiqued for often being most beneficial to the wealthy and exacerbating the marginalization of poor, minority communities around the world (Werkheiser & Noll, 2013). Werkheiser and Noll’s (2013) third sub-movement is community-focused and considers the inter-connection of people and food within a culture. This sub-movement is concerned with positive human relationships and respect for the environment (Werkheiser & Noll, 2013).

In contrast with the first two sub-movements, food justice is more radicalized and focuses on a wide-range of social concerns (Sbicca, 2012). In a case study of People’s Grocery in Oakland, Sbicca (2012) describes the way that the organization uses food as an anti-oppression tool to mobilize and empower marginalized communities. In Oakland, the rise of the food justice movement can be attributed to the legacies of previous activism efforts such as the environmental justice movement and the black power movement (Sbicca, 2012). In fact, the
Black Panther Party (BPP) set an ideologic foundation for future activists using food as an instrument of social justice.

Heynen (2009) declared the Free Breakfast for Children Program one of the BPP’s greatest political undertakings. Founded in 1968 in Oakland, California, the program was founded to ensure the survival and social reproduction of the Black community in West Oakland and eventually, Black communities around the nation (Heynen, 2009). With participation from churches and non-BPP community members, the party organized the breakfast program in response to the scores of children attending school hungry (Heynen, 2009). The human body, without food, becomes weakened both physically and cognitively; in capitalist societies, this enables the manifestation of hunger as a bargaining chip that preserves dominance over groups of low socioeconomic status (Heynen, 2009). The BPP believed that by providing Black children with the most basic form of sustenance, they were providing them with the strength necessary to escape poverty and systematic oppression (Heynen, 2009). The success and revolutionary nature of the BPP’s “survival programs”, which also included health care and education, resulted in the group being labeled as a threat to the security of the United States by the Federal Bureau of Investigation (FBI) (Heynen, 2009). Government efforts to disrupt the BPP’s breakfast program and divert their political power led the state to develop and implement their own school breakfast program, one which was replicated around the country (Heynen, 2009). By essentially forcing the state to address the issue of child hunger, the BPP’s Free Breakfast for Children Program demonstrated the power of direct action politics in poor, marginalized communities.

Rooted in the idea that food is fundamental to life, the food justice movement today is alive and well as it strives towards equity in the food system. In Oakland, the Freedom Farmers’ Market continues to build upon the BPP’s groundbreaking efforts for self-determination. Myers
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(2015) discussed the market as a model for culturally-specific, historically rooted food liberation; one which prioritizes the celebration of culture and community empowerment over profit. By offering Black consumers a place to support Black farmers, the market is both an alternative to corporate foodways and an opportunity for self-sufficiency (Myers, 2015). And beyond important contributions to food accessibility and autonomy, the market is fostering another critical transformation within the community. The Freedom Farmers’ Market’s emphasis on culturally relevant produce makes it a valuable space for the Black community to reconnect with their ancestral knowledge and legacy (Myers, 2015). The use of food as a means for cultural reconnection is merely one component in the effort towards liberation and healing from colonial oppression and systemic inequity.

Decolonization

Today, a number of other communities around the world can be seen reclaiming past traditions and ways of life as a form of social resistance. Corntassel (2012) believes this process, commonly known as decolonization, starts with the cognizance of one’s struggles and how those struggles relate to colonial systems and institutions. But decolonization represents something much greater than political, social, or historical awareness, it is a commitment to conscious and consistent engagement in practices of resurgence (Corntassel, 2012). These practices of resurgence are cultural and place-based; they exist in many forms and vary from expressions of language and spirituality to acts of ceremony and dance (Corntassel, 2012). Whether the act be political, economic, social, spiritual, or cultural, the intended outcome is the restoration of a people’s relationship with their native land (Corntassel, 2012).

A psychiatrist and philosopher, Frantz Fanon is widely recognized for his writings on the subjects of racism, colonialism, resistance, and liberation. For contemporary scholars and
activists throughout the world, his analyses and support for decolonial movements cemented his status as a prominent revolutionary thinker. In one of his most influential works, *The Wretched of the Earth*, Fanon (1968) describes colonization as more than a political claim on a nation, but rather it is a calculated effort to rid the native’s mind of all pre-colonial customs and values. Throughout the world, colonial teachings resulted in widespread cultural estrangement for native peoples. In order to render them fearful and dependent on their oppressor, there was a concerted effort on the part of the colonizer to instill a sense of inferiority in the colonized (Fanon, 1968). In his writings, Fanon (1968) ardently promoted his belief that the retention and revitalization of national culture were crucial elements of anti-colonial resistance. Kirmayer et al. (2014) were in agreement; considering that much of the distress experienced by indigenous communities can be attributed to loss of culture and identity, restoring those lost cultures and identities is fitting. From woodworkers to storytellers, native expressions of culture are the building blocks of decolonization.

But before one can understand the value of anti-colonial praxis, it is important to first understand the damaging legacy of colonization. A number of studies have explored the concept of historical trauma to identify the adverse effects of colonization and understand their relationship to present inequities in health. Also referred to as post-colonial distress, historical trauma is a concept that comes from combining historical oppression and psychological trauma (Kirmayer, Gone, & Moses, 2004). This concept was developed to “contextualize indigenous health problems as forms of post-colonial suffering, to de-stigmatize indigenous individuals whose recovery was thwarted by paralyzing self-blame, and to legitimate indigenous cultural practices as therapeutic interventions” (Kirmayer et al., 2014, p. 300). Due to its potential for
positively impacting health interventions, post-colonial distress is commonly referenced in the discourses of health problems in indigenous and minority communities (Kirmayer et al., 2014).

Hartmann and Gone (2014) described historical trauma in indigenous communities through what they called the “Four C’s”. First, colonial injury describes the oppression and deprivation that results from indigenous conquest by European settlers. Second, collective experience details the extreme transformations in indigenous ways of life that occur after colonization. Third, cumulative effects are the ever-changing consequences of oppression and marginalization from the colonial system. And fourth, cross-generational impacts illustrate the continual legacy of instability and powerlessness for descendants of the colonized. Hartmann and Gone (2014) believe this cycle can and will persist unless disrupted by conscious practices of healing and resistance.

The pathways for transmission of post-colonial distress exist on multiple levels; transmission can occur at the individual level through strained parental and familial relationships (Kirmayer et al., 2014). It can occur on the community level through a disrupted sense of unity and stability (Kirmayer et al., 2014). Along with systematic cultural suppression, the damage done on both the individual and community levels result in the transmission of trauma on the national level (Kirmayer et al., 2014). Though it is difficult to establish a causal link between colonial oppression and violence and transgenerational health problems, studies of historical trauma in indigenous Canadian communities have demonstrated a greater risk for mental health problems and a shorter life expectancy (Kirmayer et al., 2014). Furthermore, the rates for alcoholism, suicide, sexual abuse, and domestic violence are significantly higher in indigenous communities compared to the national level (Kirmayer et al., 2014). Understanding the
relationship between systemic inequality and historical trauma allows health care providers to improve treatment and interventions for affected communities.

Decolonization is increasingly recognized as a pathway for healing the transgenerational impacts of violence and oppression. But the process is not an easy one and acts of resurgence can be disrupted through what are known as the politics of distraction (Corntassel, 2012). Corntassel (2012) described the three ways in which these politics are manifested: rights, reconciliation, and resources. Rights, or state recognition of indigenous autonomy, contradict the intention of restoring one’s relationship with the earth, a relationship that preceded the foundation of the state (Corntassel, 2012). Fanon (1968) was also critical of the pursuit of political and economic support from the state by formerly colonized peoples. Reconciliation is the process of minimizing historical injustices committed against indigenous groups while ongoing injustices are simultaneously disregarded (Corntassel, 2012). Resources refer to the capitalistic view of the natural world as a commodity, one which exists solely to be bought and sold rather than nurtured and protected (Corntassel, 2012).

According to Alfred (as cited in Corntassel, 2012, p. 97), collective community resurgence can be achieved through the following objectives. In order to return to Communities must first revitalize their relationship with the land. Second, they should adopt a traditional, plant-based diet. Noting that healthy and natural foods are essential for strengthening sick and weakened bodies, the importance of diet was reiterated by Alfred and Corntassel (2005) in a set of mantras for a resurgent indigenous movement. The third objective calls for elders to transmit cultural knowledge and customs to youth. Fourth, familial and social institutions must be strengthened. And finally, communities must implement initiatives that support land-based economies which produce supplemental resources. Although these decolonial processes were
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proposed for the resurgence of First Nation communities in North America (Corntassel, 2012), the five objectives may be modified to suit each community’s unique circumstances and needs.

Of the various pathways for decolonization and cultural revitalization, food is one of the most powerful. Often considered the foundation of health and well-being, sustainable and nutritious foods are vital for the resurgence of communities of color. As succinctly stated by Rueda Esquibel and Calvo (2013, p.2), “we cannot fight for our people if we are sick and sluggish.” Within our various histories and cultures lie vast knowledge of food and their nutritional and medicinal benefits; it is time for marginalized communities of color to reclaim that knowledge and resist the transgenerational effects of colonialism.

Agency Background

The impetus for this program came from the Oakland Food Policy Council’s (OFPC) involvement in celebrating the launch of a cookbook by two California State University Professors Dr. Luz Calvo and Dr. Catriona Rueda Esquibel called Decolonize Your Diet. This cookbook, a collection of plant-based Mesoamerican recipes, complements the Food Access group’s efforts to decrease educational barriers to healthy eating. I was drawn to working with OFPC because their approach to food justice is the most comprehensive of any organization I had researched. The council’s profound understanding of the food system and passion for serving all of Oakland’s communities makes them the ideal home for this project. Their desire to create a program which emphasizes the social and political implications of food was fundamentally aligned with my motivations for pursuing a graduate degree in Behavioral Health. Furthermore, I have a deep respect for the preservation of culture and tradition and this project presents an opportunity to promote the reclamation and preservation of those customs.
OFPC is based in Oakland, California and has approximately 21 volunteers. These volunteers come together to advocate for policy initiatives in the areas of economic security and development, local and sustainable food procurement, urban agriculture, and healthy food access. The formation of the council came at the request of then Oakland Mayor Jerry Brown’s Office of Sustainability which commissioned a report in 2005 that came to be known as the Oakland Food System Assessment (Unger & Wooten, 2006). The report, written by graduate students from the University of California at Berkeley, sought to evaluate each structural element of Oakland’s food system and ended with a number of a recommendations for improvements.

The first recommendation was the foundation of a local food policy council as, “the first step toward a comprehensive, sustainable food policy and plan for Oakland” (Unger & Wooten, 2006). Prior to the commission, there had been no comprehensive assessment of the food system in the city (Unger & Wooten, 2006). The report then suggests that this council could, “broaden the discussion of food, provide an ongoing comprehensive examination of the City’s food system, and increase communication and understanding between citizens and the City government” (Unger & Wooten, 2006). In 2009, the first members of the Oakland Food Policy Council were seated and since then, the organization has seen the participation of over 50 members and numerous interns. Council members include farmers and food retailers, health professionals, city and county staff, community-based organization staff, and others (Unger & Wooten, 2006). In the interest of aligning their efforts with the needs of Oakland residents, monthly council meetings are treated as community gatherings open to the public.

Their mission being, “to establish an equitable and sustainable food system,” the council has shifted from its original focus on sustainability to an emphasis on equity (OFPC). Each group is working to improve the health of underserved Oakland residents through a variety of
community-minded approaches. The Healthy Food Access work group, under which the Decolonize Your Diet project is housed, focuses on decreasing food access barriers, which include physical barriers, as well as economic and educational barriers (OFPC). Through research and collaboration, the food access work group makes policy recommendations for meeting the food security needs of all Oakland residents. Current initiatives include strategizing for an increase in SNAP participation for eligible residents, strategizing to promote the use of SNAP benefits for healthy food purchases, and researching the effectiveness of alternative food access models (OFPC). The urban agriculture work group advocates for residents’ rights to grow food and for the expansion of access to land on which to cultivate food (OFPC). The local and sustainable food procurement work group is collaborating with the Oakland Unified School District to improve school meals through the Good Food Purchasing Policy (OFPC). Finally, economic security and development is working on initiatives which would expand opportunities and create incentives for Oakland residents to establish food businesses that promote the principles of health equity, environmental sustainability, and local labor and economies (OFPC).

**Target Population**

Decolonize Your Diet’s primary target population is young adults of color residing in Oakland, California. Oakland, situated in Alameda County, is a fitting location for this program because of the city’s drastic disparities in health. According to the Alameda County Public Health Department ([ACPHD], 2015), life expectancy for residents of East and West Oakland, two areas known for their high levels of poverty, is approximately ten years shorter than the life expectancy for residents of affluent areas. Upon closer examination, statistics show that the rates of death caused by cancer and heart-related diseases are significantly higher in neighborhoods where more than 10 percent of residents live in poverty (ACPHD, 2013). Another one of the
most notable characteristics of neighborhoods with high poverty levels (30 percent of residents or more) is that 91 percent of residents are non-white (ACPHD, 2013). The prevalence and persistence of health inequalities in low-income, minority neighborhoods in Oakland are the primary impetus for targeting individuals of this age and racial background. To reach the intended audience, participants will be recruited through agencies affiliated with the Alameda County Food Bank. It should also be noted that participation will not be limited to residents of Oakland, residents of neighboring cities that wish to participate will be welcome to do so.

To narrow the scope, Decolonize Your Diet is aiming to enlist male and female participants between the ages of 17 and 25, but would not prohibit individuals older than 25. Participants younger than 17 years of age would likely decrease the effectiveness of the workshop as their agency in regards to food choice is limited by their parents or guardians. The ideal age group was selected for its potential for establishing positive and lifelong attitudes towards health. Early cultivation of behavioral skills improves the likelihood of long-term impact by preventing illness and facilitating health and well-being (Winham, Quiroga, Underiner, Woodson, & Todd, 2014). The collaborative nature of the workshop is the ideal setting for fostering a sense of identity and self-efficacy among young people (Winham et al., 2014). Furthermore, the program’s framing of dietary behaviors as a political act is an appropriate strategy for the target audience. Due to a heightened sense of invincibility, young people are more commonly aroused by an emotional appeal as opposed to a factual one (Winham et al., 2014). Finally, this target population would be appropriate for the project because young people are recognized for their potential as effective agents of social change.
Problem Statement

This project aims to address the issue of disproportionate health risks faced by low-income communities of color in Oakland, California. This population has been significantly impacted by obesity, and consequently, by illnesses such as cardiovascular disease, hypertension, and type II diabetes, all of which can be attributed to poor nutrition. The risk for poor health is exacerbated by issues of food accessibility present in predominantly non-white, urban neighborhoods. Limited access to affordable fresh fruits and vegetables combined with the vigorous marketing of fast, processed foods contribute to the acceptance of convenience and low price as the primary factors that drive daily food selection. Marketing efforts like these exploit groups with limited health literacy and reduced sources of fresh, healthful food. These factors have created a culture in which people of color have grown increasingly disconnected from their ancestral ways of cooking and eating, as well as from their traditional beliefs and practices surrounding the healing and medicinal powers of food.

While communities of color are particularly affected by this problem, the consequences are also visible on a larger scale. National obesity levels are on the rise as a result of the U.S. food system’s shift towards the mass marketing of processed foods. Now, more often than not, foods are laden with added salt, sugar, and chemicals to make them more palatable and sometimes, addictive (Moss, 2013). Over-consumption of convenience foods has had a negative, widespread effect on the mental and physical well-being of Americans. According to health statistics from the Centers for Disease Control (CDC), approximately 38% of African American men over the age of 20 are obese; for women, the number is staggeringly higher at approximately 58% (CDC, 2014). The numbers are similar for the United States’ Latino population. Beyond the risk that obesity poses to physical health, there lie a number of potential
economic and social consequences. It is estimated that obesity costs the United States approximately 73.1 billion dollars as a result of chronic absence and lost productivity of full time workers (CDPH, 2014). Meanwhile, additional costs are accumulating as a result of the health care required to treat obesity. In the state of California, Medicare and Medicaid finance approximately 41 percent of the 15 billion dollars spent treating obesity-related medical costs (CDPH, 2014). The numbers are staggering for Alameda County as well: between 2013 and 2014, one quarter of the total budget (approximately 654 million dollars) was allocated to health care costs and numbers suggest that about 135 million went towards treating obesity-related illnesses (ACPHD, 2014).

**Goals**

The overarching goals of Decolonize Your Diet address two components of the workshop: food and decolonization. The first goal is to facilitate the participants’ understanding of how the current food system impacts the diet and health of low-income communities of color in Oakland, California. By reframing the conversation around nutrition and health as being the result of systemic forces rather than just individual choices, the solutions can be reframed to address those systems. The second goal is to introduce the concept of decolonization as a way to promote the benefits of cultural reconnection for low-income communities of color in Oakland, California. By guiding participants to see their own cultures as avenues for empowerment, the project increases its viability for improving community health.

**Methods**

The ideation of this program begins with the assumption that poor dietary habits are evidence of a disconnect between ethnic minority groups and their traditional customs of eating a healthy, plant-based diet. In recognition of this disconnect, the workshop will employ the
concept of decolonization to show participants the benefits of recovering and reclaiming vital knowledge of food. Through the application of a decolonial framework, the program aims to create a meaningful dialogue around the value of reclaiming one’s cultural inheritance as an act of social and political significance. In addition to input from Decolonize Your Diet cookbook authors Dr. Luz Calvo and Dr. Catriona Rueda Esquibel, OFPC will also receive support from the Alameda County Community Food Bank in the form of facilities and materials.

During the workshop, participants will be led by knowledgeable and passionate chef-educators through a group discussion that touches upon topics such as the food system, health, culture, and decolonization. Workshops will include conversations about traditional dishes and their nutritional and cultural value, and may also include cooking demonstrations. This method of facilitated group discussions was chosen because it has shown to be more effective than lectures or other passive styles of teaching. Abusabha, Peacock, and Achterberg (1999) distinguished two common approaches to health promotion between a health professional and their client. The power-over approach is one in which the expert assumes a paternalistic role by dictating the problem and the solution while failing to solicit input from their clients (Abusabha et al., 1999). This method can be seen in most traditional nutrition education programs. As a space intended to empower its participants, the Decolonize Your Diet program will employ the alternative, known as the power-with approach. This method is a collaborative effort in which the expert develops an understanding of their clients’ needs and experiences to help them build their sense of self-efficacy in terms of behavioral change (Abusabha et al., 1999). Aside from the support participants will receive from the chef-educators, the format of the workshop will allow fellow participants to act as sources of support for one another. Facilitated group discussions are valuable for their participatory learning; when participants actively engage one another, they
improve their chances of internalizing positive changes (Abusabha et al., 1999). Overall, group discussions make for a more meaningful experience as they foster a supportive environment where participants can respectfully share their knowledge, experiences, and struggles (Abusabha et al., 1999). In addition to the group discussions, film screenings and other cultural demonstrations can be utilized to enhance the program’s message. Finally, participants will be connected with local resources for political and economic engagement.

The first short term outcome intended for the program is an increased interest in healthy food choice and preparation. Second, is an increased interest in social and political engagement. The achievement of these short term outcomes should then foster the achievement of the program’s long term outcomes which are a series of improvements for communities of color in Oakland. First, communities of color will see an improvement in their health and well-being. Second, communities of color will see an increase in social and political awareness and activity. Third, communities of color will see an emphasis on the reclamation and preservation of ancestral foodways.

These program outcomes will materialize through the application of the following four social justice principles: analysis of power in social relationships, centralization of identity, promotion of systemic social change, and encouragement of collective action (Ginwright & James, 2002). First, the practice of analyzing power in social relationships consists of identifying and reflecting on power systems and using that analysis to strategize around social problems (Ginwright & James, 2002). This practice is critical to the development of “sociopolitical awareness” (Ginwright & James, 2002, p. 34). Centralizing identity, a primary focus of Decolonize Your Diet, is critical for promoting a sense of individual and community pride, awareness of societal impact on identity, and unity through commonalities (Ginwright & James,
The practice of promoting systemic social change is achieved through supporting efforts which combat social inequality and oppression (Ginwright & James, 2002). This has the potential to facilitate a sense of purpose as well as optimism for the possibilities of the future (Ginwright & James, 2002). Finally, encouraging collective action translates to involvement in community organizing and political action in order to directly affect social change (Ginwright & James, 2002). This is another important practice the workshop will emphasize through suggestions for political engagement opportunities. For a visual representation of these methods, see Appendix.

**Program Recommendations**

The content of the Decolonize Your Diet workshop will revolve primarily around the concept of promoting food as a tool for cultural reconnection and political engagement. Treatment and prevention programs commonly express the notion that health is the consequence of individual choices and behaviors. This approach is problematic in that it minimizes the role of societal institutions, in particular the food system, in hindering widespread changes in dietary behaviors. To diverge from this hegemonic perspective on food and nutrition, the content in Decolonize Your Diet will help participants reimagine health as a community effort as opposed to a personal burden. Guided by the chef-educators, participants will have the opportunity to engage in a dialogue with their community about the impact of food choice and their food environments. Guiding questions for the workshop include:

- Do you find it hard to resist foods that are unhealthy?
- Do you feel connected to your culture and/or heritage?
- What do your elders think about the food that you eat?
- Do you believe your culture is a resource for healthy behaviors?
• Does eating a healthy diet mean you’re acting white?
• What does it mean to decolonize?
• How are food and politics related?
• How does the food system affect the foods that you buy and eat?
• How can food choice be a political act?

These guiding questions are intended to elicit experiences and observations from participants and promote sharing. Additionally, the questions will help to help gauge how participants relate to food and how familiar they are with the politics of the food system. Observation of the discussions can be analyzed to measure for knowledge, opinions, and behaviors.

**SWOT Analysis**

**Strengths**

One of Oakland Food Policy Council’s strengths in their efforts to ensure food security and improve public health, is the extensive support that they receive. At the request of the City of Oakland’s Office of Sustainability, the council was founded with the intention of involving multiple sectors of influence and interest in the food system. This emphasis on collaboration between local governance and community has led to the involvement of numerous organizations in the development of OFPC’s programs and policy recommendations. The extent of their support is demonstrated by the variety in their sources of funding. In addition to individual contributions, the council is financially backed by institutions which include the Alameda County Public Health Department, the Clarence E. Heller Charitable Foundation, the Clif Bar Family Foundation, Kaiser Permanente, the Rose Foundation, the San Francisco Foundation, and the Y & H Soda Foundation. And as volunteer representatives of food businesses, government,
labor, and health and education organizations, the council members also offer the opportunity to foster important professional relationships between their agency and OFPC. Decolonize Your Diet in particular will receive support from the Alameda County Community Food Bank (ACCFB) in the form of sites and materials. With all of these sources of support, OFPC has the resources necessary for outreach to the media, community, and government putting them at an advantageous position in their mission to establish an equitable and sustainable food system.

**Weaknesses**

Although council members and their connections to other vital sectors of the food system play an important role in the operations of the organization, their status as volunteers could be perceived as a weakness. OFPC formally employs only one staff member, the council director. The remainder of the stuff is unpaid for their work; every council member and intern has generously devoted their personal time to advocating for OFPC’s mission. On one hand, this could be considered a strength because it demonstrates the council members’ passion and commitment to the cause. On the other hand, it could be considered a weakness because, ultimately, it likely means that council members have other responsibilities and obligations which could take priority over their work for OFPC. Within the organization, volunteers have a certain degree of agency in the sense that they are allowed to work on the issues and projects that are of interest and importance to them. Again, this could be perceived as a strength but it also means that in the event of a council member’s absence, there is no guarantee that another will be available to step in and fill the role of the previous member. There is the possibility that certain projects, such as the Decolonize Your Diet workshop, could remain unfinished.
Opportunities

Fortunately, the project it’s taking place in a city and region with a rich history of progressive political activism which continues to evolve and manifest to this day. This ideology of decolonization is not novel and thus there are many other established groups working to promote this concept as a medium for social justice. One can regularly find social and political events throughout the Bay Area that emphasize the power of a group’s culture and traditions. It is realistic to expect the message to not only be received, but to resonate with the help of others who are promoting a similar message. Additionally, these other community groups present an opportunity for collaboration for other events and programs. This is particularly significant when you consider the structure of OFPC’s workforce; the project has the potential to find a new home in the event of insufficient support.

Threats

The primary threats to the project are related to the lack of staffing and limited financial resources at OFPC. The project is housed within the Healthy Food Access work group and while all of the council members in this work group have expressed their support for the proposal, few have knowledge or experience with this ideology. Therefore, unless at least one of the council members is willing to put forth the necessary time and effort to understand the framework behind the project, the likelihood of it continuing in the absence of an intern is minimal. Another threat to the project relates to the actual facilitation of the workshop. While the ACCFB has already been enlisted to contribute facilities and materials for the workshops, the matter of who will step in to lead the talks and demonstrations must also be carefully considered. The success of the workshops is partially dependent on the participation of experienced and passionate chefs who understand the importance of teaching culturally-tailored nutrition. It is unrealistic to expect that
these chefs and community members will be able to offer their assistance on a long-term basis without appropriate compensation. Without the procurement of long-term funding for the project, it may be challenging to enlist the help of chefs and other staff.

**Discussion**

**Implications for Practice**

The findings of this research have strong implications not only for health treatment and prevention programs, but for educational programs as well. Whether they are offered at hospitals, schools, social service agencies, or community-based organizations, culturally-tailored programs are critical. Acknowledging and addressing the needs of a specific population can improve the effectiveness of a treatment plan or intervention as it allows for adjustments as the population changes. To a certain degree, this is common knowledge. It can be seen in practice when programs offer, for example, instruction and educational materials in the audience’s native language. But there are specific factors to consider when tailoring a program to meet the needs of a specific population. Any efforts aimed at improving social conditions and opportunities for low-income communities of color require careful consideration of the audience’s social and cultural characteristics.

**Limitations**

The involvement of leaders who are knowledgeable, passionate, and committed to the cause at hand is imperative for a program’s effectiveness. Furthermore, the involvement of community members who can speak directly to the experiences of the audience can help the program’s message resonate with participants, thus improving the likelihood of effecting positive changes. It is also vital to consider the social and political climate in which the target population lives and how that climate may be impacting their beliefs and behaviors. Analyzing history and
politics can help improve the audience’s understanding of how systemic processes and institutions influence, and often determine, social conditions. Additionally, programs should direct participants to available and appropriate resources which might facilitate the intended outcomes. Through the careful consideration of social and cultural characteristics, future program developers can enhance the dissemination of their message to their target audience.

**Future Directions**

The findings from this research are also important to the Oakland Food Policy Council as they reinforce the organization’s commitment to community-centered food justice. By developing and implementing a program that aims to improve health through community reclamation of cultural knowledge and foodways, OFPC can extend their impact on the food system from a policy level to the community level. Furthermore, because the council is located in the San Francisco Bay Area, a region widely recognized for innovation, OFPC could potentially influence the programs offered by other food councils around the nation. With the successful implementation of this program in Oakland, the Decolonize Your Diet workshop can be replicated in other cities and communities.

Academic support for decolonization as a health intervention is critical for the promotion and adoption of programs like Decolonize Your Diet. Formal research studies are needed to reinforce the argument for the integration of politics and culture into health programs. Aside from the potential impact this type of program could have on dietary behaviors, its potential for promoting social awareness and community empowerment is also noteworthy. The United States is plagued by a very contentious social climate due to largely unaddressed discriminatory actions against people of color. This reality has led to a need for community unification and food is a powerful tool to facilitate that unity. Overall, OFPC is in a favorable position to continue
influencing the city of Oakland in a way that is equitable and aligned with the needs of marginalized communities.
References


DECOLONIZE YOUR DIET


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## Appendix

### Logic Model

<table>
<thead>
<tr>
<th>Assumptions</th>
<th>Inputs</th>
<th>Activities</th>
<th>Outputs</th>
<th>Outcomes</th>
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<tbody>
<tr>
<td>- Poor dietary habits are evidence of a disconnect between ethnic minority groups and the ancestral custom of eating a healthy, sustainable, plant-based diet</td>
<td>- Participants&lt;br&gt;- Oakland Food Policy Council&lt;br&gt;- Alameda County Community Food Bank&lt;br&gt;- 'Decolonize Your Diet' (Dr. Luz Calvo and Dr. Carliona Rueda Esquivel)</td>
<td>Workshop Series:&lt;br&gt;- Chef-led discussions on health, culture, the food system, and decolonization</td>
<td>Participants engage in critical thinking about the role of food</td>
<td>Short Term:&lt;br&gt;- Healthy food choice and preparation&lt;br&gt;- Interest in social and political engagement</td>
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<tr>
<td>- Recovering and reclaiming vital knowledge of foods and their benefits can be acts of political resistance</td>
<td>- Chef collaborators&lt;br&gt;- Facilities&lt;br&gt;- Food</td>
<td>Cooking demonstrations and/or food discussions</td>
<td>Participants gain greater understanding/knowledge of dish demonstrated</td>
<td>Long Term:&lt;br&gt;- Communities of color in Oakland will see&lt;br&gt;- An improvement in their health&lt;br&gt;- An increase in social and political awareness and activity&lt;br&gt;- An emphasis on reclaiming and preserving ancestral foodways</td>
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<tr>
<td>- Discussing food as a political choice has the power to promote healthy food choice</td>
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<td>Film screenings and/or other cultural demonstrations</td>
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<td>External Factors:</td>
<td></td>
<td>Connect participants with political engagement resources and opportunities</td>
<td>Participants learn how they can play a role in the system to affect change</td>
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<td>- Highly accessible fast, processed foods</td>
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<td>- Minimal access to fresh fruits and vegetables</td>
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<td>- Limited time for cooking</td>
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<tr>
<td>- Deeply ingrained dietary habits</td>
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<tr>
<td>- Aversion to healthy foods</td>
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