

REVIEWS

Understanding “nostalgic inequality”: A critical analysis of barriers to Latinos’ healthy eating practices in the United States

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ABSTRACT

Based on two mixed-methods studies conducted with first and second generation Latinas in New York City (NYC), this article questions simplistic notions of acculturation by stressing the impact of structural conditions (at the individual, social and physical levels) in determining Latinas’ food practices in the United States (U.S.). The term “nostalgic inequality” is used here to argue that Latinas’ retention of, and adaptation to, their traditional staples (i.e., nostalgic foods) tends to favor affordable and fat-saturated items (e.g., fried and processed foods) that through time contribute to higher rates of obesity and cardiovascular disease, among other deleterious health conditions. In the end, this review is aimed at raising awareness about the barriers to healthy eating experienced by disadvantaged minority groups in the U.S. urban milieu.

Key Words: Acculturation, Latinos, Hispanics, Food, Inequality, Nostalgia, United States

1. INTRODUCTION

This article discusses the consumption of traditional foods (labeled here as “nostalgic foods”) among Latinas in the U.S. Based on the results drawn from two mixed-methods research studies conducted with first and second-generation Latinas in NYC (N = 83), I build upon the concept of “nostalgic inequality” to argue that participants’ preference for (and reliance on) traditional foods is greatly shaped by structural factors, such as social and economic resources and place of residence. Instead of abandoning traditional diets in favor of American food (i.e., dietary acculturation) Latinas tend to favor high-calorie, low-cost and accessible traditional staples in detriment of healthier ones (e.g., fruits and vegetables), which are more expensive and harder to access.

The discussion of these research findings are placed in conversation with related studies found in social sciences and public health databases (including Lexisnexis, Medline, Social Sciences Citation Index, Sciences Citation Index, and CINAHL). The key terms used in the searches were the following: Hispanics, Latinos, diet, nutrition, eating behaviors, eating patterns, obesity, overweight, weight gain, memory and nostalgia. These relevant keywords were used alone and combined leading to new literature findings.

2. RISING OBESITY PATTERNS AMONG LATINOS IN THE UNITED STATES

According to the U.S. Census, Latinos (or Hispanics) are the fastest-growing immigrant population in the U.S. and

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present higher prevalence of obesity than their non-Hispanic white counterparts.^[1] Increased obesity and related chronic conditions (such as diabetes and cardiovascular disease) affect most Latino populations in this country. Lending more urgency to the problem, the proportion of Latinos is expected to double by the year 2050, becoming nearly 25% of the population in the U.S. Women suffer a disproportionate burden of disease attributable to overweight and obesity, with Latinas generally presenting more obesity-related chronic diseases than white women.^[2,3] Health conditions associated with excess weight include diabetes, cardiovascular disease, depression, and low self-esteem, making weight gain a serious public-health issue particularly among Latinos in the U.S..^[4-7] In addition, female obesity, both during and after pregnancy, influences the health and weight of the mother as well as her child.^[8]

When it comes to weight gain, Latinos' health disparities are evident even against the larger backdrop of what has been called the Hispanic Health Paradox — the fact that in addition to having better diets, newly arrived Latino immigrants have lower obesity and mortality rates than the U.S. population overall.^[9,10] Latino immigrants seem to present these health advantages even despite their relatively low socioeconomic status (SES), which is noteworthy since low SES is usually associated with increased risk of obesity and mortality. One of the most documented explanations of this paradox lies in the fact that first-generation Latinos tend to arrive in the U.S. with culturally-driven protective factors, such their preference for low-calorie foods and physically active lifestyles, both of which contribute to their non-obese trends.^[7]

Furthermore, newly arrived Latino immigrants are more likely to consume family-friendly (traditional) meals as part of their diets. This could explain their initial comparative advantage over other groups in terms of better health and optimal weight indicators, along with the progressive deterioration of these markers over time. The literature has reportedly showed that length of residence in the U.S. correlates with Latino immigrants' higher rates of obesity and diabetes as compared to non-Hispanic whites.^[11,12] On this line, the longer Latinas have been in this country, the higher their risk of weight gain.^[13-15]

Our research has found that while certain dietary practices originating in Latinos' countries of origin result in protective factors against obesity and chronic disease (e.g., the consumption of whole grains and fruits); others, such as the abundance of saturated fats and carbohydrates, are detrimental to their health.^[15,16] Although there exists a vast literature on the cultural and emotional significance of tra-

ditional meals among different migrant and ethnic groups, little is known about their effect on health. We now turn to further exploring this association by reviewing some of the most striking findings drawn from our long-term research studies on Latinas' retention of nostalgic foods in the U.S.

3. RESEARCHING NOSTALGIA THROUGH LATINAS' VOICES

In order to further understand the underlying causes of Latinas' higher obesity rates in the U.S., my team and I conducted two research projects aimed at deciphering the nutritional patterns of Latina immigrants and their families.^[7,12,15,16] Our work relied on a mixed-methods approach (that combined individual questionnaires and group interviews) which, among other aims, explored the relationship between eating patterns and women's perceptions about obesity trends and weight control. Initially, we were interested in Latinas' subjective views concerning weight gain and body dissatisfaction. Nevertheless, we soon discovered a close connection between Latinas' body image and their changing eating practices in the U.S.^[7] Thereafter, our research inquiry mostly focused on better understanding the barriers to healthy eating among Latinas and the role of familiar tastes (and ethnic nostalgia) in the selection, preparation and consumption of traditional foods. We also explored the psychosocial factors that might have an impact on Latinas' lifestyle habits and related weight gain, in particular regarding their limited access to healthy foods and enduring difficulties to engage in regular physical activity.

One of the most salient findings drawn from our studies has been the role of nostalgic foods in shaping Latinas' eating behaviors. We define nostalgic foods as ethnic staples and culinary recipes that are maintained, prepared and consumed by immigrants and their families in receiving countries, and that trigger emotional memories from their cultural and ethnic heritage.^[12,15-17] Our findings warrant a dual-interpretative framework since Latinas incorporate eating habits typical of their places of settlement, while still remaining faithful to the food traditions of their homelands. Study participants told stories of their easy access to vegetables from their childhood's gardens along with fresh fruits and eggs collected from chickens reared in their families' backyards. These vignettes offer living portraits of idealized versions of Latinas' homelands amid the romanticized lifestyles that they have left behind. An important related finding speaks to participants' idealization of their countries of origin as places where fresh produce and lean meat — in addition to being more accessible, fresh and tasty — were within arm's reach and assumed to have no preservatives, neither chemicals nor hormones.

Our Latina respondents openly addressed the social and economic barriers to consuming fresh produce, fish and lean meat that they encountered upon arriving in the U.S. Ready-to-eat, processed foods are ubiquitous in the neighborhoods where they lived and worked in NYC, including Washington Heights in Manhattan and The Bronx. In time, our respondents' traditional healthy staples were gradually replaced by meals high in fats and carbohydrates including processed foods, fried meats, and sausages. We concluded that while some aspects of traditional diets in the Latino population protects their members from obesity and chronic diseases; others, including the high consumption of carbohydrates, fats and fried meats, could be harmful. Our studies also revealed an interaction between the retention of heavy traditional staples that are cheaper and easy to access and the incorporation of obesogenic practices (e.g., snacking).

Participants' subjective experiences of health disparities were reflected in a sort of "food oppression". In other words, despite the fact that our respondents claimed to consume a mix of nostalgic foods from their countries of origin (i.e., fruits and vegetables combined with rice, fried cheese and cakes) most mentioned difficulties in acquiring fresh produce, such as fish and fresh vegetables in NYC. While the term food oppression was recently coined in reference to mainstream paradigms that dictate ideal female weight and shape,^[18] I use it here specifically to refer to the social and economic determinants that keep disadvantaged Latinas from accessing healthy foods. Due to their lower cost, good taste and availability, Latinas in our studies have become increasingly dependent on fatty foods having a low nutritional value. Ultimately, they acknowledged retaining traditional high-calorie ethnic foods while abandoning the healthy staples they use to consume in their countries of origin.

Our findings ultimately speak to the importance of structural barriers as deterrents to healthy eating practices in Latino immigrants' places of settlement. Study participants were vocal regarding the social determinants of unhealthy eating (e.g., financial barriers, lack of time to prepare home-cooked meals) along with the need to improve their culinary practices by using low-fat ingredients. They specifically described their post-migratory experiences as being conducive to weight gain and unhealthy lifestyles. These include lack of time for preparing healthy meals, the pressure of eating whatever foods were available, and munching on "comfort foods" (i.e., cheap snacks like chips, cookies, and doughnuts). Finally, these deleterious eating habits were coupled with a lack of physical activity and everyday stressors that often led them to developing overeating patterns.^[15]

4. THINKING OUTSIDE THE BOX: FINDING HEALTHY SOLUTIONS

When asked for suggestions for improving their diets, participants mostly mentioned the need for subsidizing programs that would allow them to regularly buy fresh fruits, vegetables, fish and low-fat meats. They also suggested the importance of public health messages that stress the benefits of foods low in calories, fat, and sugar, along with the pleasure associated with healthy eating. Such catchy statements should underscore the advantages of low-fat, protein-based diets. In this vein, community programs that include gardening, nutrition and cooking interventions have been proven to have a positive effect on dietary changes and reducing weight gain among Latinos.^[19] Ethnic marketing should emulate successful programs already in place, such as the healthy bodegas initiative and green carts.^[20,21] As noted by other studies, having access to green areas and parks — along with mixed land use that promotes walking and social integration — are key strategies to preventing obesity among Latinos.^[19,22]

Health messages should also acknowledge the role of nostalgic foods (both positive and disadvantageous) for Latino immigrant families. This could be achieved by sponsoring cooking initiatives that teach them how to prepare and eat familiar dishes in different ways (e.g., baking instead of frying and substituting fat content). Community interventions should go hand in hand with programs and policies aimed at retaining healthier traditional recipes.^[23] Our study participants were adamant that their families would not be interested in eating better if that meant moving away from the flavors they were used to. Learning how to prepare traditional recipes and using ingredients that are low in calories and fat were mentioned in all focus groups as an effective way to respect the familiar flavors of traditional foods while honoring their cultures of origin. Lastly, many participants suggested replacing highly fattening ingredients with low-carb ones towards ensuring the texture, smell and taste of culturally accessible foods.

5. CRITIQUES TO ACCULTURATION: BEYOND NOSTALGIC INEQUALITY

This review has coined the term "nostalgic inequality" to argue that Latinas' retention and adaptation of their ethnic foods is not just culturally based. In fact, it is actually determined, first and foremost, by structural conditions (e.g., financial resources, employment and the availability of social support) along with the effect of the built environment (e.g., place of residence and availability of healthy and affordable foods). Through time, Latino families tend to merge their culturally familiar foods with what is handy and reasonably

priced to them in the contexts of reception. This line of research is in tune with a recent trend in the literature that questions the construct of acculturation for oversimplifying the role of culture in determining health outcomes.^[24–28] The contradictory findings associating acculturation with dietary intake speak to the need for developing more comprehensive instruments that account for the social, economic, and political environments that affect immigrants' changing eating practices through time.^[15, 29, 30]

While previous research has mostly paid attention to individual-level acculturation measures, a growing trend in public health research recognizes the role of socio-economic constraints, such as food insecurity, as being the main determinants of immigrants' obesogenic tendencies and changing food habits.^[31] In order to reduce health disparities among Latino populations in the U.S., we need to understand the impact of such barriers in shaping health-related behaviors.^[32] As noted previously, my work has underscored the notion of "food oppression" in order to speak to the social inequalities reflected in the access, promotion and availability of healthy/unhealthy foods in urban milieus. This line of research is also aligned with policy initiatives advanced by social justice movements that advocate for healthier and more equitable food programs and policies.^[33]

Future research on Latinas' rising obesity trends should address the impact of social and environmental segregation, families' socioeconomic status and their access to resources, which, together, largely contribute to long-term patterns of nutritional intake and obesity trends. In Bourdieu's terms (1984),^[34] we could say that food "habitus" is not only molded by cultural practices but, first and foremost, by the socio-structural dimensions that shape immigrants' evolving lifestyles in their places of settlement. As revealed in my work, many Latina participants were aware of the importance of eating healthy foods. However, many were exposed to a

"triple shift" (i.e., working, studying and raising children) that prevented them from spending time shopping for affordable and healthy ingredients and from cooking low-calorie nutritious meals. They also tended to skip lunchtime due to their busy daily schedules and time constraints, which also led them to compulsively snacking on processed foods.

These research findings also suggest that the neighborhoods where many Latinas resided are "food swamps" characterized by liquor stores, fast-food restaurants, and bodegas, (i.e., corner stores that are rich in traditional junk foods).^[17] Therefore, studying the impact of the physical and social environment is pivotal for decoding Latinas' increasing obesity trends in the U.S.^[35, 36] As discussed in this article, low-income Latinas' difficulties in maintaining healthy eating habits cannot be simply explained by dietary acculturation (or cultural replacement), which is usually equated with abandoning one's culture in favor of the American one. Future research is needed to further understand the impact of the socio-economic constraints along with the role of the built environment on Latinas' increasing obesity trends in the U.S.

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CONFLICTS OF INTEREST DISCLOSURE

The authors declare no conflicts of interest.

REFERENCES

- [1] Ogden CL, Carroll MD. Prevalence of overweight, obesity, and extreme obesity among adults: United States, trends 1960–1962 through 2007–2008. *National Center for Health Statistics*. 2010; 6(1): 1-6.
- [2] Muennig P, Lubetkin E, Jia H, et al. Gender and the burden of disease attributable to obesity. *Am J Public Health*. 2006; 96: 1662-8. PMID: 16873748. <https://doi.org/10.2105/AJPH.2005.068874>
- [3] Shai I, Jiang R, Manson JE, et al. Ethnicity, obesity, and risk of type 2 diabetes in women: A 20-year follow-up study. *Diabetes Care*. 2006; 9: 1585-90. PMID: 16801583. <https://doi.org/10.2337/dc06-0057>
- [4] Bhupathiraju SN, Hu FB. Epidemiology of obesity and diabetes and their cardiovascular complications. *Circulation research*. 2016; 118(11): 1723-35. PMID: 27230638. <https://doi.org/10.1161/CIRCRESAHA.115.306825>
- [5] Casta-eda SF, Buelna C, Giacinto RE, et al. Cardiovascular disease risk factors and psychological distress among Hispanics/Latinos: The Hispanic Community Health Study/Study of Latinos (HCHS/SOL). *Preventive Medicine*. 2016; 87: 144-50. PMID: 26921653. <https://doi.org/10.1016/j.ypmed.2016.02.032>
- [6] Rosas LG, Lv N, Xiao L, et al. Evaluation of a culturally-adapted lifestyle intervention to treat elevated cardiometabolic risk of Latino adults in primary care (Vida Sana): A randomized controlled trial. *Contemporary Clinical Trials*. 2016; 48: 30-40. PMID: 26995280. <https://doi.org/10.1016/j.cct.2016.03.003>
- [7] Viladrich A, Yeh MC, Bruning N, et al. Do real women have Curves?

- Paradoxical body images among Latinas in New York City. *Journal of Immigrant and Minority Health*. 2009; 11: 20-8. PMID: 18807271. <https://doi.org/10.1007/s10903-008-9176-9>
- [8] Martinez SM, Rhee KE, Blanco E, et al. Latino mothers' beliefs about child weight and family health. *Public Health Nutrition*. 2016; 1-8. PMID: 27869046. <https://doi.org/10.1017/S1368980016002962>
- [9] Batis C, Hernandez-Barrera L, Barquera S, et al. Food acculturation drives dietary differences among Mexicans, Mexican Americans, and non-Hispanic whites. *The Journal of Nutrition*. 2011; 141(10): 1898-1906. PMID: 21880951. <https://doi.org/10.3945/jn.111.141473>
- [10] Ruiz JM, Hamann HA, Mehl MR, et al. The Hispanic health paradox: From epidemiological phenomenon to contribution opportunities for psychological science. *Group Processes & Intergroup Relations*. 2016; 19(4): 462-76. <https://doi.org/10.1177/1368430216638540>
- [11] Aldrich L, Variyam JN. Acculturation erodes the diet quality of US Hispanics. *Food Review OOD*. 2000; 23(1): 51-5.
- [12] Viladrich A, Yeh MC. To eat or not to eat? Immigrants' food choices and barriers to healthy eating in the United States. *Austin Food Sciences*. 2016; 2(1).
- [13] Goel MS, McCarthy EP, Phillips RS, et al. Obesity among US immigrant subgroups by duration of residence. *JAMA*. 2004; 292(23): 2860-7. PMID: 15598917. <https://doi.org/10.1001/jama.292.23.2860>
- [14] Kaplan MS, Hugué N, Newsom JT, et al. The association between length of residence and obesity among Hispanic immigrants. *Am J Prev Med*. 2004; 27: 323-6. PMID: 15488363. <https://doi.org/10.1016/j.amepre.2004.07.005>
- [15] Viladrich A, Tagliaferro B. Picking fruits from our backyard's trees: The meaning of nostalgia in shaping Latinas' eating practices in the United States. *Appetite*. 2016; 97: 101-10. PMID: 26593102. <https://doi.org/10.1016/j.appet.2015.11.017>
- [16] Viladrich A, Yeh MC. The uncanny power of emotional Bonds: Exploring the role of nostalgic foods in Latinas' eating behaviors and health. In C. Wilson & M. Morree, eds. *Vegetable consumption and health: New research*. Hauppauge, NY: Nova Science Publishers; 2012. 101-10 p.
- [17] Viladrich A. Curbing the obesity epidemics: Understanding Latinos' challenges to "healthy Eating" in the US. *Journal of Food & Nutrition Sciences*. 2014; 1: 1-2. <http://www.jscholaronline.org/articles/JFN/Curbing-the-Obesity-Epidemic-Understanding-Latinos%E2%80%99-Challenges-to-Healthy.pdf>
- [18] Bruner MS, Valine K, Ceja B. Women can't win: Gender irony and the e-politics of the biggest loser. *International Journal of E-Politics (IJEP)*. 2016; 7(2): 16-36. <https://doi.org/10.4018/IJEP.2016040102>
- [19] Davis JN, Ventura EE, Cook LT, et al. LA sprouts: a gardening, nutrition, and cooking intervention for Latino youth improves diet and reduces obesity. *Journal of the American Dietetic Association*. 2011; 111(8): 1224-30. PMID: 21802571. <https://doi.org/10.1016/j.jada.2011.05.009>
- [20] Dannefer R, Williams DA, Baronberg S, et al. Healthy bodegas: increasing and promoting healthy foods at corner stores in New York City. *American Journal of Public Health*. 2012; 102(10): 27-31. PMID: 22897534. <https://doi.org/10.2105/AJPH.2011.300615>
- [21] Gross C. Creating healthy bodegas. *Gotham Gazette New York City News and Policy*. New York: Citizens Union Foundation. 2008.
- [22] Wen M, Maloney TN. Latino residential isolation and the risk of obesity in Utah: the role of neighborhood socioeconomic, built-environmental, and subcultural context. *Journal of Immigrant and Minority Health*. 2011; 13(6): 1134-41. PMID: 21274631. <https://doi.org/10.1007/s10903-011-9439-8>
- [23] Fitzgerald N. Acculturation, socioeconomic status, and health among Hispanics. *Napa Bulletin*. 2010; 34(1): 28-46. <https://doi.org/10.1111/j.1556-4797.2010.01050.x>
- [24] Horevitz E, Organista KC. The Mexican Health Paradox: Expanding the explanatory power of the acculturation construct. *Hispanic Journal of Behavioral Sciences*. 2013; 35(1): 3-34. <https://doi.org/10.1177/0739986312460370>
- [25] Mier N, Smith ML, Irizarry D, et al. Bridging research and policy to address childhood obesity among border Hispanics: a pilot study. *American Journal of Preventive Medicine*. 2013; 44(3): 208-14. PMID: 23415185. <https://doi.org/10.1016/j.amepre.2012.11.013>
- [26] Rudmin FW. Editorial: Steps towards the renovation of acculturation research paradigms: What scientists' personal experiences of migration might tell science. *Culture & Psychology*. 2010; 16(3): 299-312. <https://doi.org/10.1177/1354067X10371140>
- [27] Schwartz SJ, Unger JB, Zamboanga BL, et al. Rethinking the concept of acculturation: implications for theory and research. *American Psychologist*. 2010; 65(4): 237. PMID: 20455618. <https://doi.org/10.1037/a0019330>
- [28] Yeh MC, Viladrich A, Roy C, et al. Determinants of Latina Obesity in the US: The Role of Selective Acculturation. *Journal of Transcultural Nursing*. 2009; 20: 105-15. PMID: 18948450. <https://doi.org/10.1177/1043659608325846>
- [29] Arandia G, Naltyp C, Sharkey JR, et al. Diet and acculturation among Hispanic/Latino older adults in the United States: a review of literature and recommendations. *Journal of Nutrition in Gerontology and Geriatrics*. 2009; 31(1): 16-37. PMID: 22335438. <https://doi.org/10.1080/21551197.2012.647553>
- [30] Freudenberg N. *Lethal But legal: Corporations, consumption and protecting public health*. New York: Oxford University Press; 2014.
- [31] Dinour LM, Bergen D, Yeh MC. The food insecurity-obesity paradox: a review of the literature and the role food stamps may play. *Journal of the American Dietetic Association*. 2007; 107(11): 1952-61. PMID: 17964316. <https://doi.org/10.1016/j.jada.2007.08.006>
- [32] Lopez-Class M, Castro FG, Ramirez AG. Conceptions of acculturation: A review and statement of critical issues. *Social Science & Medicine*. 2011; 72(9): 1555-62. PMID: 21489670. <https://doi.org/10.1016/j.socscimed.2011.03.011>
- [33] Freudenberg N, McDonough J, Tsui E. Can a food justice movement improve nutrition and health? A case study of the emerging food movement in New York City. *Journal of Urban Health*. 2011; 88(4): 623-36.
- [34] Bourdieu P. *Distinction: A social critique of the judgement of taste*. Translated by Richard Nice. Cambridge, MA: Harvard University Press; 1984.
- [35] Rundle A, Roux AVD, Freeman LM, et al. The urban built environment and obesity in New York City: a multilevel analysis. *American Journal of Health Promotion*. 2007; 21(4 suppl): 326-34. <https://doi.org/10.4278/0890-1171-21.4s.326>
- [36] Sharifi M, Sequist TD, Rifas-Shiman SL, et al. The role of neighborhood characteristics and the built environment in understanding racial/ethnic disparities in childhood obesity. *Preventive Medicine*. 2016; 91: 103-9. PMID: 27404577. <https://doi.org/10.1016/j.yjmed.2016.07.009>