Race, Racial Equity, and the DC Food System

2020 Discussion Series

Session 6:
How Racism and White Supremacy Influence Nutrition Education

October 2, 2020
Land Acknowledgement

Gratitude for the Indigenous people of this land:

Nacotchtank (Anacostan)

Piscataway

native-land.ca
Working Agreements

How we will communicate

We take care of ourselves
Listen deeply
Make "I" statements
Keep it here
Intent vs. Impact
"Oops" and "Ouch"
Request Clarification
3 Before Me
Take space, make space
Stay curious!
Speakers

Tambra Raye Stevenson, Founder/Principal, NativSol Kitchen; Founder/CEO, Women Advancing Nutrition, Dietetics, and Agriculture (WANDA)

Patrilie Hernandez, Health and Nutrition Specialist, Founder of Embody Lib
How White Supremacy, Colonization Drive Nutrition Education

Presented by: Patrilie Hernandez, MS

Health & Nutrition Specialist

Founder, Embody Lib
HEALTH IS A RIGHT, NOT AN OBLIGATION
While we recognize that the pursuit of “health” is not a moral obligation, the opportunity to equitably access and achieve health is our right.

WHAT OR WHO IS HEALTHY IS DETERMINED BY DOMINANT SOCIAL SYSTEMS
Our body image, relationship to food, and what we perceive as health is largely informed by the dominant social systems. Our dominant social system values colonialism, heteronormativity, patriarchy, and white supremacy.

THE SYSTEMICALLY ADVANTAGED (IDEAL) BODY IS THE WHITE, THIN, CIS BODY
Our pursuit of health often translates in a pursuit of a physical body that most closely aligns with systemically advantaged identities (thin, Eurocentric beauty standards, cisgender, able bodied)
How do we define Nutrition Education*?

"Any combination of educational strategies designed to facilitate voluntary adoption of food choices and other food- and nutrition related behaviors conducive to health and well-being..."

- Isobel Contento, 2007

*Nutrition Education Plan (2018) DC Office of the State Superintendent of Education (OSSE)
The impact of food choice & behaviors on health & wellbeing

Examples of personal health behaviors:

- Sexual activity
- Diet & Exercise
- Alcohol & drug use
- Tobacco use
- Sleep and stress management
- Health care seeking behaviors (going to the doctor, getting health screenings, adhering to prescribed medical treatments, etc)
It is us who assigns value to food and who is not worthy of eating it.

“It is a lie that food is just fuel. It has always had layers of meaning, and humans for the most part despise meaningless food...'race' endures alongside the sociopolitics of food; it is not a stretch to say that that race is both on and at the Southern table.

It is not enough to be white at the table. It is not enough to be black at the table...Complexity must come with us - in fact it will invite itself to the feast whether we like it or not.

We can choose to acknowledge the presence of history, economics, class, cultural forces, and the idea of race in shaping our experience, or we can languish in circuitous arguments over what it all means and get nowhere.”

— Michael W. Twitty, The Cooking Gene: A Journey Through African American Culinary History in the Old South

DC FOOD POLICY COUNCIL DISCUSSION SERIES
Case Study: Colonization, White Supremacy & Racialized Food Hierarchies
White supremacist culture and colonialism still manifests in nutrition education efforts today

• In clinical settings
• In the media & wellness "influencer" culture
• In community-based settings
• In educational settings (academia, school based)
An Anti-Racist and Decolonized Approach to Nutrition Education requires you to...

- Apply intersectional social justice frameworks into your practice
- Center equitable food access
- Check for bias, privilege, and for BIPOC, internalized oppression
- Advocate for Food Sovereignty
- Embrace & promote body diversity
Contact Me
FOR QUESTIONS, CONSULTING, PUBLIC SPEAKING AND TRAINING

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