

## INTRODUCTION: Nutrition and Health in Urban Areas

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Latin America, like other parts of the world, is becoming urbanized at an ever greater rate. The population of some countries and the problems they face are extremely city-based. The diagnoses and recommendations made in the papers brought together in the area of health and nutrition (Part I), as well as the relevant aspects of the social science papers relating to the nutritional problems of metropolitan populations (Part II) make implicit reference to the importance of the seemingly irreversible problem of urban growth. However, even in recent times, human groups with high urbanization levels and highly complex technological advances which seem to separate them from their environment and drastically reduce the "friction" of distance, have been conditioned by and subject to their surrounding environment. Of course, this relationship cannot be seen in a simple or direct way; it is affected by societal history and evolution in terms of forms of economic and political organization. Acknowledging these facts and biosocial interdependence inspired the II Latin American Workshop on Nutrition and Health in Urban Areas.

In this publication a group of papers that were presented by express invitation at this workshop is brought together. More than 200 participants were at the event, sharing the round tables and using the auditorium of the Inter-American Center for Social Security Studies (CIESS) in the week from the 2nd to the 6th of March, 1992, in Mexico City.

In addition, this issue includes (Part III) the titles and an overall analysis of 71 registered posters to the event, a report of the features, aims and role played by the Mexican and international foundations that attended the workshop, a synthesis of the result obtained in the round tables on the improvement of methodology in the preparation of projects and a description of the Zopp method that steered the papers. Finally, a directory of participants is included.

The workshop papers clearly show that there are numerous points where the attempts of biomedical and nutritional as well as social scientists to explain and overcome nutrition and health problems in urban areas come together and overlap. One of the most important, we feel, is social equity as a precondition for the solving of food and general well-being problems affecting the urban populations of Latin America. Another is related to the need to refer the phenomena analyzed by different methods, though often with similar techniques, to particular demographic, economic and political situations and dynamics. Thus, although generalizations may be made and levels of reference on nutrition and health established, these cannot be maintained as anything other than what they really are. Each place, region or country needs adjustments in international norms and demands an operating definition of the terms in which the social needs and the states of nutrition and health of their population may be described and explained. This was highlighted by the social scientists and biomedical science specialists whose task it was to report on the nutritional and health situation in some of the large Latin American cities.

One more aspect that in our opinion was also clearly stated -related to the above and despite divergencies more of a procedural than a fundamental nature- is the need to include in every intervention model criteria ensuring greater efficiency and efficacy. Both concepts are discussed in planning theory: on the one hand, integral solutions and, on the other, discriminatory and selective criteria. The former refers, in our case, to the fact that although nutrition and health problems are not the same in rural as in urban areas,

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their solution cannot be exclusive to either of these environments. Besides, when looking at them, sociodemographic, economic, political and cultural aspects that characterize the population must be considered; these will determine or at least condition the expected results. The latter emphasizes the need to abandon policy proposals of a universal nature which implicitly or explicitly consider populations and places as homogeneous and which try to reduce or eliminate geographic and social differences.

To achieve consistency and coherence in actions, the importance was stated of putting into perspective and crossing over these considerations in any action model or strategy. Different groups, children, women, old people, etc., must be taken into consideration and these, in turn, must be defined in social terms according to income and occupation but also in geographical terms in cities (large, medium or small and within these in the central or old zones and the suburban or new ones) or the countryside (and there are differences here between traditional and isolated outlying regions, or integrated and modern areas).

However, there are other aspects: the factors involved are not complete with demographical variables alone. It must include sociopolitical variables that, though implicit in the former, must be specified and made operational. In addition, the information matrix is insufficient on one single plane; the temporality of the phenomena is also important since places, regions and communities are susceptible to outside influence and continuous change.

Below, we briefly highlight what in our opinion are the main conclusions to be drawn from the papers presented at the workshop and which we feel could be used as models for an analytical model of the nutritional and health situation of the urban populations of Latin America. We feel that all the papers have already been widely and brilliantly discussed during the workshop by all participants.

In the first article, **O'Donnell** clearly points out these relationships by presenting the problems and causes of mortality and morbidity in the context of Argentinian urbanization. Fact: urbanization is a seemingly irreversible process and, though it has brought benefits, it has also caused social costs which are expressed, among other things, in the population's health and food levels. Fact: almost all food consumed by the population is bought on the commercial circuit and is exposed to market fluctuations. The ever more critical economic situation in the years of what is known as the lost decade is expressed in the family shopping basket that must be bought with an ever smaller wage. Thus, nutrition and health studies in Argentina, but also in the other countries of the region, point to a deterioration and a more or less critical situation among the working-class population of the large cities: iron deficiency among under two-year olds; low consumption of ascorbic acid among the infant population; insufficient calcium consumption. And although food deficiency does not appear to be common in the urban environment, diseases resulting from eating habits or a sedentary lifestyle are ever more prominent in morbidity and mortality figures thanks to causes that, as time goes by, make the urban populations of our countries more like those of western industrialized and developed nations.

Almost all writers agree with **O'Donnell** on the need to pay attention to the prevention of cardiovascular and degenerative diseases in general. This goes back to considering the quality of life and, therefore, environmental, poverty and educational problems. Almost all agree, these will be the major themes of the coming years. Specialists, above all those who work directly in the health sector, call upon international agencies (IA) and non-governmental organizations (NGO) to refocus their vision and priorities on this urban reality in Latin America -without of course neglecting rural communities where extreme poverty persists. In the interior of these countries, actions must include the different sectors: health, education, economic, urban, etc. development and incorporate social and human science research projects to ensure their effectiveness.

**Atalah**, in his analysis of the situation in Santiago de Chile, discovers paradoxes: on the one hand, nutritional deficiency problems in the child population (under six) have fallen, whilst there is inadequate access to food in wide sectors of the population which shows itself, among other things, in low physical development among the school-age population, as well as in iron-deficiency anaemia which, this specialist says, is a public health problem. Likewise, whereas malnutrition is prevalent in older adults (over 65), as in large cities the world over, predominant problems in adults are nutritional diseases caused by excesses -making them susceptible to chronic and degenerative diseases.

It should be stated that all the participating specialists acknowledge the major role played by child breast-feeding programs. For these programs and in the prevention of adult diseases or malnutrition among the aged, education is a fundamental ingredient in any economic and social policy for the development of human capital and equity. To put it bluntly, this is a development problem. However, most agree that there are economic, administrative and political limitations to an integrated solution to this problem.

Perhaps it is the mega cities of Brazil that show most overwhelmingly the problems of urban poverty. **Vanucchi and Oliveira** refer to the huge population increases in the favelas in the outlying districts of the metropolitan regions. The annual growth rate is reaching extremely high levels which, if maintained for long periods, will have critical consequences for urban equipping, rising social tension, crime rates and a significant worsening in health and nutritional systems. The differences between social groups and between urban areas grow to the detriment of the majorities; food shortages and the resulting morbidity and mortality rates are

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increasingly affecting the child population. In addition to these problems, with socioeconomic features, are others of supply: deficient food keeping and storage, inadequate hygiene standards and unsuitable industrial processes which often threaten the health of urban inhabitants.

In the case of Venezuela, **Lara** points to a return to situations overcome years ago. They are now, however, fundamentally different because of changes in the geographical location of the population. Thus, while the lack of availability of food acts today as a conditioning factor in malnutrition due to the lower buying power of growing sectors of the mainly urban population, thirty years ago, the lack of productive capacity of the rural population was the fundamental determinant. Migration and migrants to the cities have put pressure on health systems and on primitive or traditional supply systems. At the same time, local, regional or national cooking traditions have been "colonized" by marketing and supply systems which reflect the immigrants culture. This is clearly seen in the cultural patterns portrayed in the mass media.

Costa Rica, **Murillo** informs, U.C. has not been spared the phenomenon of rapid population growth and concentration. Now 60% of the population is found in the mainly urban central valley. However, this writer states that one of the main public health worries is the high rate of endemic parasitic infection with deficiencies in physical infrastructure (water, drainage) and public services (mainly garbage collection). Therefore, this specialist suggests focussed and intense intervention to improve the well-being of the urban "marginalized" population of her country.

**Plasencia and Grillo** describe the advances made in nutrition and in health indicators in Cuba faced with a siege situation due to the American blockade. Unlike other Latin American countries, they say, in Cuba "the vast majority of the population receive 72% of energy and protein input by means of daily rations that guarantee society will be fed". However, and despite the fact that "in the last thirty years diet has been constantly improved", food habits survive that lead to nutritional problems whose effects can be seen in the causes of death. In addition, some food taboos have been maintained among certain population groups that prohibit the consumption of some foodstuffs. This affects the nutritional condition of children while sugar, salt and saturated fat consumption rises. Finally, in Cuba, the "lifestyle" has an impact on the population's health and nutrition which, as in other countries, must be improved through educational and public awareness programs.

**Mendoza**, in the Guatemalan economic and cultural context, describes the shortcomings in health and nutrition of the population of his country. He says that in the infant population the main causes of mortality and morbidity -as is characteristic of "poor" regions- are digestive and respiratory infections. And, although there is little information as to the nutritional situation among young adults and the whole middle and high socioeconomic strata population, it may be said that there are social and geographic differences: "the inhabitants of Guatemala City seem to be in a better nutritional state when compared with the rural areas of the region and the country".

For his part, **Bourges** emphasizes the fact that of all the eight cities analyzed, Mexico City is the oldest and the one that has grown most in the recent past. In its almost 700 year history, it has suffered from overpopulation on several occasions, the current case being due to a process of accelerated urbanization resulting from rural migration to the city. This, says **Bourges**, leads to food habit changes with losses in fiber and starch from the diet and increases in the consumption of sodium, saccharine, cholesterol and total and saturated fatty acids, encouraging the chronic-degenerative diseases which are ever more frequent in our context.

Thus in all countries except Cuba, the level of development (urbanization and industrialization) defines the health and nutrition problems as well as the eating patterns and habits of the populations. The importance of the urban problems is also clearly linked with sectorial (health, education) and economic policies.

The papers the social scientists presented invite us to reflect on the different intervention possibilities and the conditions or prerequisites for success. They are in depth diagnoses of the situation showing the causes and those policy elements that should be considered in development strategies and actions aimed at improving the health and nutritional conditions, with a change in the eating habits of the urban populations.

In a paper useful as a reference work on the social focus of health and nutrition problems, **Hewitt de Alcantara** reminds us that in the last decade the societies of Latin American countries felt the impact of a deep recession accompanied by macroeconomic restructuring policies (elimination of subsidies for producers and consumers, among other measures) and institutional restructuring (trade opening and privatization) that overwhelmingly affected the life of the entire population. The writer states that not all urban social groups underwent the change in the same way, so there were changes with differential access to food.

General indicators (such as changes in consumer prices, the drop in real wages, the proportion of income spent on food consumption, etc.), whilst allowing some understanding of the problem, hide circumstances particular to different groups -some are more vulnerable than others- and specific types of responses to the crisis.

With this in mind, the writer defines an urban “food system” as the totality of family and community strategies conditioned by a network of economic, social and political relationships. These link the agricultural producer to the urban or rural consumer. Any action, concerted or otherwise, deliberate or not, on the part of any of the social agents in their role as producers or consumers would therefore affect the options of those making up this system. It is obvious, says the writer, that the State is a central element in the macrosocial context that conditions food options, especially of the most vulnerable groups. Nevertheless, their actions are not free of inconsistencies and distributional dilemmas which have led to the setting up of civil organizations to mobilize the groups affected. For **Hewitt de Alcantara** it is through these actions that the local groups, whose income has been affected to a greater or lesser degree, have overcome with supply strategies, the crisis of the eighties.

The problem, she finally says, is that the population has few options to: “independently ensure an adequate family income, organize in mutual aid groups [...] or depend on charity”. Meanwhile, globalization and the need for economic restructuring “establish real limits on the role the public sector can assume in the food system of Latin American countries”.

The future does not appear to be bright. If the population growth rate remains stable for the next thirty years, we will have, according to **Lunven**, more than 3,400 billion people living in cities -more than 50% of the world population. The phenomenon will bring seemingly insurmountable problems for developing countries, i.e those with the greatest growth rates. Neither the necessary means nor resources exist to face these problems; agricultural production is affected by the imposition of a food model that rejects traditional food; cities take up agricultural land, water is extracted from distant river systems, other natural products or resources are used including forests, all of which help to destroy the natural environment and, as we have seen, the planet’s ecological conditions.

**Lunven**’s proposal concerns itself with the design of realistic policies. He refers to FAO missions in various countries in Africa, Asia and Latin America as a background, presenting an interesting synthesis of the problems, intervention strategies and their limitations. Based on this, he concludes that although an adequate urban infrastructure must be created, fiscal and monetary measures must also be taken; and the population must be educated and personnel trained. It is essential to revitalize the countryside.

**Christen**, for his part, makes concrete reference to an example of intervention in Cucuta, Colombia, on the border with Venezuela. When designed, the aim of the project was to initiate a process that would establish a situation of self-sustained development in the community. The following strategy was contemplated: the sale, at a very low price, of a food basket; the identification of families who could be paid with a basket for some kind of work to be carried out by a family member and thirdly, on a community basis, the creation of a rotational credit fund, made up of the income from the sale of this food, to be used to support the implementation of small productive projects (microfirms), and to purchase materials for construction and for social infrastructure works.

The results were successful. **Christen** reports that at the end of the project, more than 170 microfirms were running. Thus, not only were families made self-sufficient but also productive. In fact, the writer says, paradoxically the emergency project implemented by the World Food Program (WFP) in Cucuta “really began to be a development project the instant the period of emergency aid from the WFP as such ended”.

Another form of intervention, besides that by international agencies, is that carried out by non-profit (NPO) or non-governmental organizations (NGO). With respect to these organizations, **Reiner** describes their scope and form and why they are important as well as their impact on the solution to nutrition problems in urban areas. He compares them with other organizations and considers what can be expected of their participation and how this can be specified. Finally, to end his brief article, a consideration, based on concrete experiences, is made of the opportunities for NPOs working with the State on specific projects and the possible consequences of such collaboration.

Any analysis of poverty must be linked to if not based on the analysis of food poverty in particular. **Boltvinik** refers to a conceptual framework for integrating problems such as malnutrition, underfeeding and food needs. To do this he attempts a theoretical integration between the concept of entitlements developed by Sen (1981) in his book on Poverty and Famines, ways of access routes for providing consumer satisfaction and sources of well-being at home.

The analysis of the evolution and degrees of poverty must be our countries over the last two decades must be complemented with an analysis of the sociodemographic characteristics of homes and the association between the macroeconomic process and the rates of food poverty. **Boltvinik** makes reference to his own work where he translates these concepts into empirical variables. It is not a question -he tells us- of referring to food poverty in terms of food quantity since we must “distinguish between human food needs and animal food needs and hence the distinction between food poverty and deficient nutrition” (our underlining). It should equally be stated that food needs in the urban environment are satisfied mainly though not exclusively through commercial sources. This leads to the conclusion that shortages in this source of well-being are explained by the income of families or homes. He states

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that this concept of entitlement, is, "the ability [rights] of the persons to control food [and other goods] through the legal means available in a society. Perhaps this means include ancestral customs not necessarily institutionalized in law. The production, distribution or marketing of food needs particular attention...". Here, of course, family customs may be included in which members have or assign themselves the right to have priority over other family members where food is concerned. In other words, in the limiting conditions of extreme poverty and as part of a survival strategy, the father or male members, for example, have a right to the best part, leaving the mother and other female members of the family last in the pecking order or to go without. And this is where Boltvinik's point about linking the sociodemographic characteristics of the population in the analysis becomes extremely important.

Ultimately, the importance of these macrosocial and anthropological considerations in the measurement of poverty cannot be taken lightly.

Hernandez Laos presents us with a long-term project model "to eradicate poverty in Mexico" in which the possible conclusions and interpretation of the results depend on the correct measuring of the phenomenon. He makes reference to several definitions of poverty as used by different bodies that have tried to measure it, such as the concept of basic needs and poverty line. All start with the ability of households to satisfy essential needs. Hernandez Laos emphasizes the difference between insufficiency of income in households and social inequalities in income distribution, as poverty determinants and, therefore, of the acquisition of food goods.

Based on this distinction the writer proposes three prospective long-term scenarios (the year 2007) which could eliminate poverty from Mexico. The difference between them lies precisely in the way of combining economic growth -which could have an influence on family income- and the distribution of household incomes or equity. This is all in the context of Mexican trade opening up and the imminent Free Trade Agreement (FTA) that would have a direct effect on the production of basic goods and a certain effect also on food consumption guidelines, especially in the urban population. In accordance with his estimates, in the period 1963 to 1984, the rates of extreme poverty in urban and rural areas of the country fell systematically thanks to the reduction in extreme poverty in urban areas. These made up an ever greater percentage of the national population. Unlike this trend, extreme poverty in rural areas grew in the sixties, fell in the seventies and grew once again in the eighties to include a little more than half of the rural population of the country.

However, with a transfer of population from the countryside to the cities over the last three decades, the absolute importance of urban poverty increased, to account for -in the first half of the eighties- 60% of the country's total population (our underlining). Hence, it may be concluded that in absolute terms poverty is currently a mainly urban phenomenon, although in absolute numbers the poor in the countryside are even poorer.

In their paper, Jusidman and Manjarrez refer to various aspects of the food consumption of Mexico City's urban poor. They describe for us the recent experience of public intervention through the establishment of organizations and a framework of legislation and rules to attack food problems in Mexico. These changes occurred against a background of crisis and economic recession which, in the nineteen eighties, affected the low-income population, both in wages themselves and in consumption (due to inflationary effects).

The paper makes explicit reference to the studies carried out by the National Consumer Affairs Institute (INCO) to understand the impact of the crisis on the food levels, structures and habits of Mexico City's poor population. In addition the type of interventions carried out by the INCO are noted. They emphasize the importance of disseminating information that is timely and correct but, moreover, that responds selectively to different needs. In effect -they say- "the population shows a great appreciation for scientifically founded information and advice on food", since the matter worries and preoccupies most people. However, the food and nutrition advice and education programs and actions, on private commercial media, are not optimum since they are not differentiated and are portrayed with attributes which are often alien to a community that prides itself on its differences and plurality of opinions and needs.

In their paper on Mexico's demographic situation and the progress made in the National Population Program, the National Population Council (CONAPO)'s agents point to, among others, interurban inequalities, emphasizing marginalization, poverty and malnutrition as the right indicators for measuring them. They state that in accordance with recent INCO information, in 1989 the lowest-income urban sectors assigned 60 percent of monthly wages to the purchase of food, whereas the best off only spent 25% of their income in this way. On the other hand, whereas subsidies for basic products fell, the "basic food basket" went up in price by an annual 22 percent.

Faced with this deterioration, they inform us that the State has cut back its support in food improvement as far as the numbers receiving benefits are concerned. Thus, for example, 232 rations per capita were provided in 1984 to 865,000 school pupils, while in 1990 figures show that 4,624,000 people were helped but with only 25 rations per capita, a dramatic reduction of 58 percent from

one year to the next. Hence Urbina, Sandoval and Pamplona insist that there is an emergency situation among the groups previously receiving aid who are now vulnerable, including both adults and children.

According to the follow-up survey carried out by the INCO, Mexico City's low-income population reduced its expenditure on basic foods by approximately 30 percent, while it increased purchases of products made from refined flour, sugars and alcoholic drinks in line with what the Cuban specialists said about their country. In this context, and with 40 percent of the 30,000,000 Mexicans living below the poverty line in cities, feeding the urban (and rural in extreme poverty *vid. supra*) population becomes a strategic matter considered from the point of view of food production. Urbina et al state that the 1990-1994 National Food Program (PNA) recognizes it as such. The great challenge, as they say, is to find in the strategies of the different sectors and programs those common points that will encourage their collaboration in joint and integrated actions for the good of the weakest population whose family income does not allow them to cover their basic food needs.

The politicians themselves recognize the importance of sectorial and institutional measures. The Mexican Federal District Council member **Sodi de la Tijera** clearly states in his overall view the limits characterizing the mechanisms that control the wholesale and retail food trade in Mexico City. There must be greater competition in the wholesale market and, in general, action must be taken to integrally modernize the city's retail market. In the case of the former, **Sodi de la Tijera** says that there is a high concentration of a few companies not only in the distribution of products but right from their production. Here there are single production-transportation-storage structures and large-scale selling that do not allow for intermediates. In fact, he says, there is a hierarchy of wholesalers facing the small producers who, having no access to credits and lacking resources, technology, storage facilities, etc. have no other option than to hand over their products to the former to have them sell in gross wholesale terms to the bulk buyers.

As far as the retail trade system is concerned, **Sodi de la Tijera** distinguishes between that serving the needs of the high-income groups that "compete advantageously with the most modern stores in the world" and that network of popular small stores that sell to Mexico City's poor classes. This subsystem includes sidewalk stalls, street markets, "corner stores", etc. in which one may not expect to find health controls or advanced food handling technologies. And although these last examples sell more cheaply or in "very small" or "convenient" portions, as the writer puts it, they sell "'third-class' goods at 'second-class' prices", increasing profits for the shopkeepers while endangering the health of the customers.

In the context of privatization (for example, the national food supply chain CONASUPO) it is not clear if a market solution such as that proposed by **Sodi de la Tijera** would avoid greater concentration or would improve health control and protect consumer interests. He himself emphasizes the fact that greater government participation is needed through overall programs including production, obtaining the best quality products, investing in basic infrastructure (water) and training in hygienic food handling, from the producer to the final consumer. This will be -we feel- just the beginning in a modernization project that will increase efficiency but reduce inequity in Mexico.

For our part, we are convinced of the immediate need to research and go further into these aspects in order to support intervention models and policies to solve the nutrition and health problems of the urban majorities that preoccupy us all. The synthesis of the results of the working groups applying the Zopp method, which we include at the end of this issue, together with the titles of the summaries of the posters and their global analysis presented by Gross, also make this interest obvious.

The effort to bring together the opinions of organizations is an example of how important it is for everybody to take part in the discussions and projects, since the solutions are not only in the hands of researchers. Cooperation of the State and non-governmental organizations, invited to the workshop, is also necessary.

With the complete publication of the papers, the aims of the sponsors and organizers of this event have been established. If the message inspired by holding the II Latin American Workshop on Nutrition and Health in Urban Areas managed to enter the hearts and minds of those who attended or are assimilated by those who will read this publication, small we shall feel fully satisfied at the effort made by those who supported us, including those who gave it their financial backing.