# Food Knowledge and Migrant Families in Argentina
## Collective Identity in Health

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**Abstract:** This article presents an analysis of different aspects of the migration process of a large group of people in Argentina, who originally come from the rural uplands (Jujuy Province) but who currently dwell in a lowlands peri-urban area (Buenos Aires Metropolitan Area). In particular, it presents some of the results of a long-term research project on food practices deployed in both geographical zones, which are united by a considerable migrant flow that intensified during the last three decades. From an anthropological perspective, it analyses the features of the nutritional transition of this social group regard to changes in its food knowledge and cultural heritage. It suggests that this qualitative factor can contribute to a better understanding of the health issues that have been faced by this group.

**Keywords:** Argentina, cultural heritage, food knowledge, migrant families, nutritional transition, upland-to-lowland migration

This article presents an analysis of food practices of family groups that migrated from a rural territory in the uplands to an urban area in the lowlands of Argentina, with an emphasis on the change in how the groups obtained and consume food and on how such change affected their health. Using an anthropological approach, we take into consideration both material aspects (ingredients, meal preparation) as well as symbolic aspects (food knowledge system, representations) of consumption. The relevance of this analysis is not only in the understanding it can provide of knowledge transmission and reproduction, identity processes, and collective memories in the context of food, but also in its results, which can be used to strengthen local governmental programmes aiming to improve the quality of life of this migrant population. And it is our hope that the latter can be accomplished (in part) by looking to different intercultural relations, considering (Danesi 2012) dietary change following migration; and the socio-cultural dynamics of both the upland and lowland territories. This allows us to consider food as a 'situated event' (Aguirre 2005) – that is, an articulated set of social practices and processes as well as their products, and their consequences, including their material and natural resources – both in its presentation and its consumption. In addition, food comprises particular inherited representations, beliefs, knowledge and practices that those individuals within a specific socio-cultural group learn and share, and in which certain regularities and features are established (Contreras and Gracia Arnaiz 2005). For example, José Muchnik says: 'From family cuisine to regional meals, products build individual and social identities . . . to eat identifies the individual and the community they belong to' (2006: 95).

This article covers two different geographical areas in Argentina (Figure 1): one area in the uplands and one in the lowlands. The first is located in the northern area of Quebrada de Humahuaca, a narrow mountain valley, in the Humahuaca and Tilcara Departments (Jujuy Province), where, in several areas, the rural population accounts for 40 per cent of the total (Golovanevsky and Ramírez 2014). The second,

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meanwhile, is located in the area just below the Buenos Aires Metropolitan Area in the district of Florencio Varela, one of the city's peri-urban border areas, where 1.76 per cent of the population is involved in agricultural activities (Belliard 2016; Census 2010). Great amounts of migrant families from very different places of origin make-up the local population, which make Florencio Varela a large migrant reception area.[1]

The study of the food practices of these migrant family groups in Argentina is an opportunity to better understand the ways in which they adapted to their new lowland surroundings and transmitted knowledge from one generation to the next. In this regard, our previous research discussed such issues as (a) the identity-building process as achieved through the preparation and consumption of specific meals (Fabron et al. 2017); (b) the reproduction in the lowlands of similar agricultural patterns (i.e. family farming) (Fabron and Castro 2019); (c) specific issues within both the uplands and lowlands having to do with the culinary knowledge and its mode of transmission (Castro et al. 2019); and (d) the 'food alliance' between these families and other upland migrant families (e.g. those from the Bolivian high plateau) (Castro and Fabron 2018). In this article, we look at (e) local health care through the lens of food consumption.

We argue here that the repetition of food practices and representations of food knowledge outline 'dynamic information networks' (Nora 1989), which incorporate material and symbolic innovations over time. Meanwhile, this information flow shapes collective memories in specific ways over time, ways which sometimes strongly influence daily practices, such as commensality norms, and social values regarding health care.

To address these issues, we adopt a mixed approach, implementing and articulating both qualitative and quantitative methods. Our qualitative approach was in our data-collection method, as we gathered different types of information through ethnographic fieldwork (Bernard 2006) in both areas for the past ten years.[2] During these field studies, more than 40 in-depth interviews were carried out, and observations were made in private places (households, com-

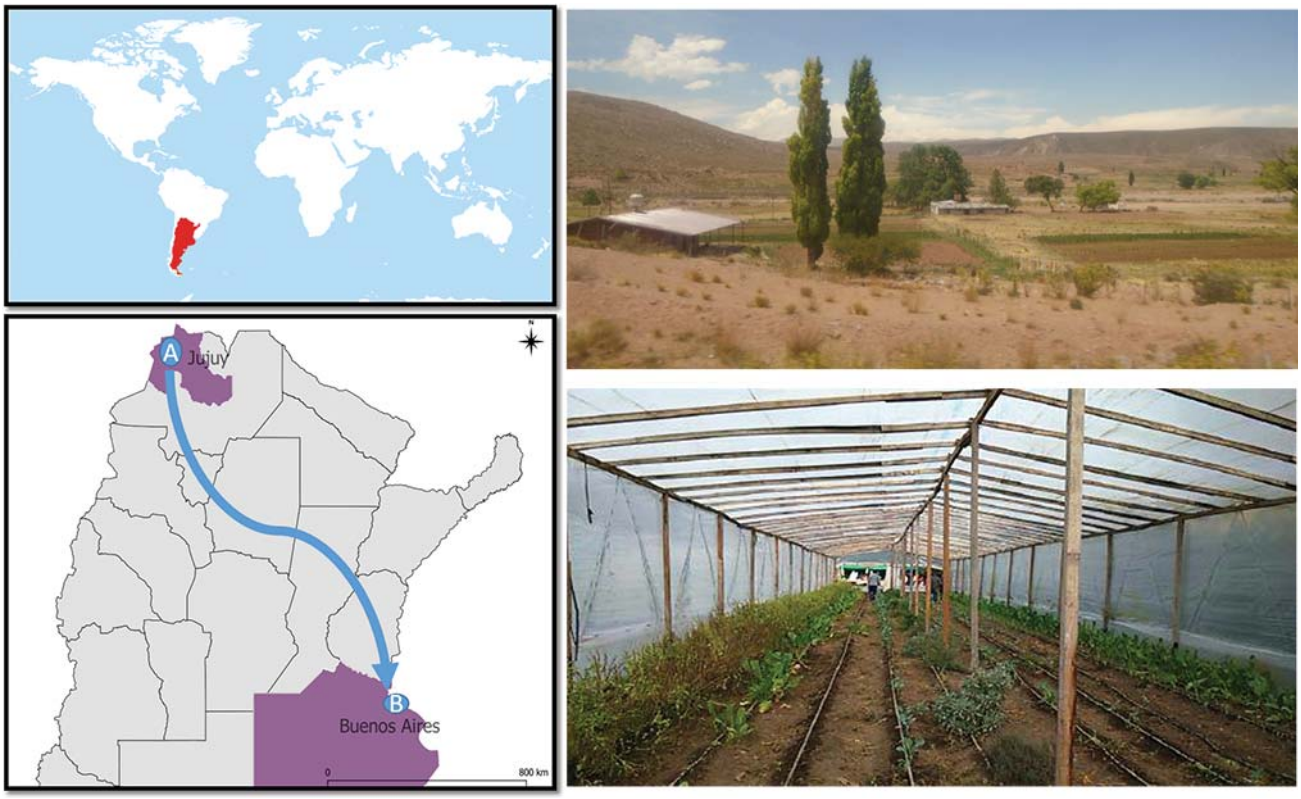


**Figure 1.** Migration flow from the uplands (A) (Humahuaca and Tilcara Departments, Jujuy Province; illustration on right) to the lowlands of Argentina (B, Florencio Varela District, Buenos Aires Province; illustration on bottom right). (Source: OpenStreetMap and QGIS 3.6.3, own elaboration).

munity centres) and public places (markets, fairs). We participated in different local activities both as spectators (festivals and shows) and as organisers (workshops, visits, meetings). Finally, we recorded 'culinary grammars' (Aguirre 2005), especially the combination of gastronomic elements, the ways in which food was consumed, and the frequency of certain meals during the year. All the information gathered during fieldwork was complemented with data obtained through secondary sources like national population and agricultural censuses, photographs, satellite images and historic documents. Our quantitative approach was in the methods we used for data processing and systematisation, which included the use of index files with the food and dishes mentioned during the interviews and/or during our observations. This information was organised into a database, making it easier to reach different levels of aggregation and develop graphs for relational analysis, which did through the use of the RStudio framework (Castro et al. 2019).

## Case Study

Regarding the area of origin, the food pattern there has a long-term trajectory which can be observed from the archaeological record (Díaz Córdova 2015; Nielsen et al. 2016; Samec et al. 2016). On top of this complex heritage lies an important cultural component of local identity, in as much as it involves the entire productive system and/or local agri-food sector (especially, horti-culture, floriculture, and animal herding for self-supply and exchange). In addition, a long-term relationship was developed in this geography between the people and the territory structured according to social links forged via food, the body, and sustainable health.

However, for the last three decades, a profound change in food practices has taken place in this region, including a change in the food supply and therefore in residents' everyday diet, with fresh, natural foods being replaced by industrial food. This change made people slowly abandon their traditional and local food practices, and it has negatively affected social relations and health (see, for example, Aguirre 2009; Bojorquez et al. 2014; and Wandel et al. 2008). Therefore, the impact of the increased presence of industrial food in the area can be observed mostly in changes in eating habits. One interviewee noted 'the increased consumption of rice and pasta (like noodles), which are gradually replacing the consumption of local and traditional ingredients, . . . people lost some local meals because they replaced them with food already made or with noodles or rice' (Interview E., 2014). It was also visible in the children's preference for *milanesas*[3] with rice, yogurt with cereals and confections such as sweets, ice cream and *alfajores*.[4] Particularly, some kids said that 'cereals [like cornflakes] have a lot of vitamins and they are very healthy' (Interview I., 2014). This representation of certain major food industry items shows how strong the effect is of corporate marketing messages and packaging strategies, which are virtually omnipresent in both areas.

These new ultra-processed foods incorporated into the daily diet hide in their composition high fat content in addition to unhealthy amounts of sugars and carbohydrates: they have a far more negative impact on individuals' health than do slow or non-processed foods (Ng et al. 2014). Moreover, this kind of food also has a major presence in urban areas, which, consequently influences the way all kinds of food is obtained and consumed in both the uplands and lowlands.

Patricia Aguirre defines this change as a 'nutritional transition' that, 'with noticeable variations in various regions within one and the same society, points to the dropping of traditional nutrition patterns and the adoption of out-of-season, non-specifically region-related, industrialized diets rich in saturated fats, sugar, and other refined carbohydrates while low in fibers and polyunsaturated fats, in addition to insufficient physical exercise' (2009: 106). Nevertheless, both in rural and urban areas there is a strong cultural memory regarding highland foods as a central element of individual and community identity (Kuhnlein et al. 2013; Treakle and Krell 2014), and many people recreate, for special occasions, those meals they remember having been made by their mothers or grandmothers at home (Castro and Fabron 2018).

Although not immediately obvious, in many interviews and observations we identified a clear preference for industrial foods over locally produced meals such as *cuajada*[5] or *mote*[6] or spicy chicken. However, the dynamics of these preferences are related to a rather complex system of prestige in the migrant community: the latter operates in a multitude of ways. In this case study, prestige was easier for us to see during our observations than in our interviews. For example, when there were celebrations such as birthday parties, religious festivities, or community or family gatherings, we could always see ultra-sugary sodas, extra fatty snacks, and other ultra-processed items. So we could see that the host family had man-

aged to obtain those urban-like/industrial items and had the financial wherewithal to purchase such things for their celebrations. At the same time, however, prestige also comes from the preparation of traditional, low-cooked foods in these events, so in the end two distinct messages are being sent: the making of a significant economic effort to buy food to offer guests is respected but so is taking the time and using the resources necessary – and having the requisite knowledge – to make traditional, meaning-filled meals that remind guests of home (i.e. the uplands).

In Florencio Varela, upland meals are made by replacing ingredients and modifying the cooking base, trying to keep the seasoning base as similar as possible. In this sense, some of our interviewees in the lowlands have mentioned the following when they find places selling these elements: 'I found my place to buy my stuffs' (Interview D.G., 2017), expressing the importance of food ingredients like '*Andean potatoes, chuño,*[7] *mote . . .* [and spices that] make the flavour similar of those from home' (Interview D.G., 2017).

A particular feature of the Florencio Varela district is that it is one of the few within the peri-urban area of Buenos Aires that has designated 44 per cent of its total area for urban use (83.6 km²) and 56 per cent for agricultural exploitation (106.4 km²). However, there is no space reserved for cattle-raising (GDUDD n. d.). The possibility for families to continue developing their agricultural activities in their migrant context is key not only to their ability to obtain the raw materials ( = ingredients) needed in their meals but also to maintain their unique rural traditions of commensality. Our fieldwork revealed that these groups' attempts to produce the same vegetal species in the south as they once had in the north (e.g. certain varieties of potatoes, maize, and *ajies*),[8] have ended up producing foods with different sizes and flavours.

However, currently there are many social strategies for obtaining ingredients or elaborated meals which allow migrant families to continue consuming the same products they had always eaten: purchase, exchange or trade through family connections. In this sense, availability and access to significant food items are key issues that different communities have managed to overcome, especially through fairs and 'ethnic' retailers (often first-generation migrants) (Koc and Welsh 2001) who provide the community with their traditional cooking ingredients. It is important to highlight an emotional aspect of food: every person we have interviewed recalled with great emotion the meals they used to have in their home territory and expressed nostalgic feelings pointing towards the people they shared these meals with. Migrant families always mention their constant craving for local food (even those family members of the following generations who have never been to the home territory). For example, a young woman mentioned to us: 'My grandmother worries very much about bringing me peppers and tomatoes she grows. It is somewhat strange because you can find those in here [lowlands]. As well, when she comes to visit me, she brings *tamales*,[9] which you need to freeze, wrap in newspaper and put in the bottom of the bus floor (where the air conditioning flows better) so they arrive in good condition' (Interview M., 2014).

Thus, the fact that in both areas people practise similar agricultural activities and possess similar consumption habits has an important role in the dynamics of migration: the families in the lowlands were able to reproduce particular family farming techniques. The collective memory of meals made of maize, potatoes and/or peppers is one of the substantial elements that links all these families together and strengthens their connection with their home territory (Severi 2007). In this sense, it is noted that in the territory of origin meals usually have certain characteristics that make them more difficult to replicate in the territory of arrival: foods often have to prepared in different types of ovens; the frequency of production and consumption is often higher in the past than in the present; special ingredients often take a long time to use (time which modern families seem to have less of); and the seasonality of various ingredients used to prepare meals on special occasions means that they are often not available in the territory of arrival (Fabron et al. 2017). Many interviewees mentioned that they need to replace the ingredients and their ways/forms of cooking. For example, one interviewee told us: 'I always do my best effort . . . now I make my own recipe . . . of course when my mother travelled [to the uplands], she used to bring us ingredients, something to eat' (Interview C., 2016).

It should be noted that food identity and the particularities of each region are linked with health in concrete practices, for example, the notion that healthier foods are related to those elements produced at home, that is to say, home-made meals and ingredients are better for your health than those obtained elsewhere. Regardless of the truth value of such a belief, this is a strong belief that structures many of the family members' practices and desires. For instance, 'there are only a few cases in which everything is homemade; now we buy all the ingredients already processed. Almost nobody grinds the flour in the millstone [like maize flour]' (Interview F., 2013). In this sense, one informant mentioned that

> when I travel to highland, I try to get what is produced in my mum's land . . . it is very pure, especially *chuño*, maize, wheat and quinoa[10] . . . when I cook, I mix things, sometimes with cereals and sometimes with pasta . . . I try not to eat pasta all week long because of health issues . . . primarily for my children I try not to do many fried food . . . if we have soup today, tomorrow stew, the next day peeled maize in soup or a '*segundo*'.[11] (Interview C., 2017)

Different interviewees have reported that they have changed their ways of cooking. One told us: 'My grandfather cooks meat in the electric oven and serves it with boiled vegetables [cultivated from the family garden]' (Interview M., 2014). Others have also highlighted the need to maintain family gardens for fresh vegetables and fruits: 'Carrot and maize of the valley grow in family gardens, while in the greenhouse celery, onion, tomato [in May], chard [during winter] and parsley grow, all for self -consumption' (Interview A.S., 2019). Also, when possible, breeding one's own animals, for example lamb or *llama*, has a similar importance for them. Particularly in recent years, llama has become fashionable[12] but in the past its consumption in rural areas was infrequent but highly valued. For example, one interviewee said: 'I love my *llamitas* . . . When I was young, I didn't have my own cattle, they were difficult to breed because there were a few in the area and we didn't have much. But when the community celebrates [All Souls Day, Pachamama] it is an honor to offer an animal to eat all together' (Interview C.V., 2019).

Regarding health in terms of quantities and quality of food, a few younger migrant family members (between 20 and 30 years old) have mentioned that they are trying to avoid meals with large percentages of carbohydrates and fats: 'My grandmother [when visiting her] makes me eat a lot [of food] because she thinks I don't eat well . . . for example, she cooks for me a big plate of chips and fried eggs . . . sometimes, it's so much that I don't know how to tell her that it's a lot' (Interview M., 2014). Others are looking for healthier ingredients because it makes them feel better: 'Yes, it fills you and it is different [*mote* or boiled maize or just maize] . . . besides that it changes your life, your vitality and your strength . . . because there are meals that are not based on pasta, based on flour . . . it is natural and it is part of the land' (Interview C., 2017).

## Discussion

As many other case studies show (e.g. Bertran Vilá 2010; Bojorquez et al. 2014; Wandel et al. 2008), 'dietary habits and lifestyle have undergone quick changes as a result of industrialization, economic development and market globalization over the last century, and have made a serious impact on people's health and nutrition. The economic transition, which contributed to define political developments in the 20th Century, was accompanied by demographic, epidemiological, and nutritional transitions' (Aguirre 2009: 3).

In this global context, if we consider the migration phenomenon and the fact that families in this case study moved from rural to urban areas, then we can see that they are under two kinds of pressure. On the one hand, they experience a contextual adaptation to new food patterns, and, on the other hand, there are particularities in adapting to such urban places where these changes are both fast and profound (Bertran Vilá 2010).

Thus, in this case study we were able to see numerous changes in the socio-cultural environment that may occur with migration (Wandel et al. 2008), among which are (a) changes in socio-economic status; (b) general adaptation to a new environment; and (c) low-protein dietary change (with an important increase in the consumption of foods rich in carbohydrates, fat and sugar). Thus, these changes are not generally taken into account in the schools the children of these families attend, by the health care providers they have access to, or in the places where they socialise. So, variations in socio-economic status, the pressure of living in a different context, and the changes in everyday diet all combine to have a serious impact on these families and deeply affect their general well-being. For the individuals within these migrant families, this could lead to obesity, diabetes and numerous cardiovascular diseases. In this context, it should also be noted that in Argentina the rate of non-communicable diseases is already alarmingly on the rise[13] and is already predicted to continue to rise over the years to come, introducing new health-care issues both for vulnerable populations in particular and the health care system (National Ministry of Health 2019). This complex situation is the result of different circumstances that are presently in the process of converging: the quality of life of migrant populations is deteriorating. Although this is a public health matter, there has been almost no support coming from public institutions. Indeed, this state of affairs has to be considered as a failure of the Argentinian state's public health programmes to understand the precise nature of both global and local pressures (Gillespie 2018). In several cases, these programmes do not take into consideration the food practices and processes of migrant populations.

Given the geographical features of Florencio Varela, the fact that migrant families are able to obtain farming small-holdings in the peri-urban lowland areas that respond to Andean patterns, and hence the possibility of jobs in which they are able to use knowledge and memories from their home territory (Sillitoe 1998, 2006), has consolidated the migrant process through family farming practices (with regard to the type of organisation, the predominant reliance on family labour, and the technology, cultivated species and farming techniques used) (FAO 2012). This case study shows the importance of family farming both as a vital economic activity and as a vital cultural heritage. In terms of the latter, it provides food that sustains migrants' physical and mental well-being and maintains a vital historical and cultural connection between the territory of origin and the territory of arrival. In this sense, migrant families carry certain knowledge along with them and are connected to the new territory through practices and representations taken from their highland home. These practices and representations accrete new meanings as a result of migration and thereby strengthen the importance of farming as a means to access food and a maintain balanced diet (Gillespie 2018).

## Conclusion

From the analysis presented here, we can draw two complementary (and preliminary) conclusions. First, the invasion of the food industry in both areas, with its processed and ultra-processed products becoming a big part of daily consumption habits, not only changed the diet of people but also generated a positive system of prestige and classification of these products in terms of 'modernity' and 'urbanity'. This has resulted in new ways for migrant families to negotiate meaning and identity through food ways, and has also formed a kaleidoscope of food preferences that send diverse messages: a strong link towards the family's ancestral territory, the belonging to modernity through industrial items, a collective sense of commensality with different kinds of meals (regarding the time to process ingredients, the selection and origin of ingredients, and the cooking process itself), and so on. Second, in scenarios where low-income migrant families lack access to social services (Wang and Beydoun 2007), there is a decisive trap which involves the diminution of a long-term culturally significant food and the rise of a context in which these families are forced to engage in and with practices and representations of food that are 'good to sell but not to eat' (Aguirre 2009: 120). This trap leads to alarming epidemiological changes in health and disease patterns regarding chronic illness (e.g. type 2 diabetes, heart disease) (Ng et al. 2014) for adults and children in both the uplands and the lowlands which, we suggest for further analyses, can be slowed down or even turned around with sufficient effort and the appropriate approach. As we mentioned above, in this case study we observed that many interviewees were attentive to what they ate and the way they prepared food, and they identified those ingredients that they preferred. These features, which currently constitute this 'dynamic information network' (Nora 1989), display a certain criterion that we identify as 'collective memory related to family territory'. In addition, there are others patterns of practice and representations of food and social values regarding health care that are strongly influenced by individual trajectories and the socio-economic environment, including the food industry advertising sector and the medical–industrial complex. This is an important fact to highlight because beyond the longing for meals from the place of origin and/or traditional ingredients for cooking, many times the information supplied in advertisements and in the media may be inappropriate for the maintenance of a healthy diet, creating structural tensions between individual and collective health.

The complexity of food practices and representations and their nutritional and epidemiological consequences require us to find suitable approaches for a better understanding of this phenomenon (Bertran Vilá 2010). There is a need for a combined policy-making initiative covering best practices in health care, education and cultural heritage. Currently, there is a narrow view on food phenomena from health-care professionals, as they are mainly considered from a biological perspective. However, there is a strong call for including in this biomedical approach certain cultural aspects and for considering local and collective identities in health-related issues. We agree with Emilia Ferraro and Juan Pablo Barletti that 'ignoring place when engaging with categories for social analysis does nothing but support the subordination of the local to the global' (2016: 3).

To consider the biosocial complexity of food phenomena can only be achieved through interdisciplinary approaches (Gracia Arnaiz 2012) which lead to a more comprehensive understanding of nutritional and epidemiological processes and their consequences in multi-cultural contexts (Bertran Vilá 2010). Based on our case study, our findings might provide a strong basis on which to initiate or consolidate dif-

ferent types of programmes, such as family farming programmes (national and international), that consider social trajectories in the uplands. These qualitative results might also be used to promote health care and migrant population well-being through the maintenance and strengthening of traditional food practices that are culturally adequate for every group, given their importance for food identity and local cultural heritage.

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## Notes

1. If we compare the population in both study areas, Florencio Varela (190 km$^2$) has a greater population number and density. According to the last National Census of Population, Households and Dwellings from 2010 (INDEC 2012), the Department of Humahuaca (3,792 km$^2$) has 17,366 inhabitants and a population density of 4.60 inhabitants/km$^2$ and the Department of Tilcara (1,845 km$^2$) has 12,349 inhabitants and a population density of 6.69 inhabitants/km$^2$. Florencio Varela has 426,005 inhabitants and an approximate population density of 2,242 inhabitants/km$^2$.
2. The Ethics Committee of Arturo Jauretche National University (UNAJ) approved this study, and all the participants gave their informed consent for their testimonies to be included in this article.
3. *Milanesas* is a very thin, breaded and (mostly) panfried cutlet made from cow, chicken or llama.
4. Alfajor is a traditional confection made with two round cookies with different sweet fillings between them, typically, *dulce de leche* (a very dense sweet made out of milk).
5. *Cuajada*: curd.
6. *Mote* is a type of maize with a thick grain.
7. *Chuño* is processed potato, which is dehydrated by exposing it to freezing temperatures for a few days.
8. Peppers.
9. Is a widely spread Latin American traditional dish made of corn-based dough which is steamed or boiled in a wrapping of corn husk. *Tamales* can be filled with meats, cheeses, vegetables, peppers, and both the filling and the cooking water may be seasoned.
10. Is a locally produced pseudo-cereal that is very important in both nutritional and symbolic terms. It is one of the iconic foods from the Andean region.
11. This is a very colloquial way to mention the second part of the meal: first it goes the soup and then a strong dish with meat, cereals and vegetables.
12. In 2003, Quebrada de Humahuaca was declared a World Heritage Site by UNESCO. This situation led to a greater influx of tourists, and this had an important impact on local food production and on local food preparation.
13. According to the National Ministry of Health (DEIS Vital Statistics 2016), 16.6 per cent of deaths are caused by communicable diseases (maternal, perinatal and nutritional conditions); 77.5 per cent of deaths are caused by non-communicable diseases; there is a 23.11 Mortality Rate among people between 30 and 69 years of age that is caused by cardiovascular diseases, cancer, type 2 diabetes and chronic respiratory diseases (= over ten thousand inhabitants). The prevalence of obesity in the population over 18 years of age was 20.8 per cent in 2013.

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