Published: 19/08/2023

On eating's pleasure of women of low-income socioeconomic status in Petare, Caracas, Venezuela

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Abstract: Eating is a key biological, social, cultural, historical, geographical, agricultural, religious and hedonic act. Whether the pleasure on eating can be developed from scarcity might be controversial, as the development of taste involves the exposure to a variety of foods during critical periods of time and will be associated to what is available for the people in their daily lives. This study aimed to study the preferred foods and dishes, of women within low and very low-income settings in Caracas, Venezuela during the month of June 2022, the willingness to grow ingredients at home and/or community gardens and what would they cook if money restriction was not a problem. Interviews were implemented by focus group to 18 pregnant and lactating women and community workers (women) on soup kitchens established in two very low-income settings in Eastern Caracas, Venezuela, to fulfil the aims of this study, and to understand the characteristics of the preferences. In general, the results obtained show absence of traditional Venezuelan complex dishes that have been replaced by foods that are either basic in its components, have international references, and can be prepared with foods that people have access to, thus the culinary memoires of the future younger generations can be compromised as there is an absence of those in the imaginary and dreams of the family mothers and cooking volunteers whose dream is to enrich with animal protein a basic carbohydrate already available. An Venez Nutr 2022; 35(2): 110-116.

Keywords: pleasure of eating, food insecurity, low socioeconomic status, food, culture, culinary traditions.

Acerca del placer de comer en los estratos socioeconómicos bajos venezolanos

Resumen: Comer es un acto biológico, social, cultural, histórico, geográfico, agrícola, religioso y hedónico. El hecho que el placer de comer pueda desarrollarse a partir de la escasez es un tema controversial, ya que el desarrollo del gusto implica la exposición a una variedad de alimentos durante períodos críticos del desarrollo y estará asociado a lo que se encuentra disponible para las personas en su vida diaria. Esta investigación tuvo como objetivo estudiar los alimentos y platos preferidos de mujeres en entornos de bajos y muy bajos ingresos en Caracas, Venezuela durante el mes de junio de 2022, la disposición a cultivar ingredientes en huertos familiares y/o comunitarios y qué cocinarían si la restricción de dinero no fuese un problema. Se implementaron entrevistas mediante un grupo focal a 18 mujeres embarazadas y lactantes y trabajadoras comunitarias (mujeres) en comedores populares establecidos en dos entornos de muy bajos ingresos en el este de Caracas, Venezuela, para cumplir con los objetivos de este estudio y comprender las características de las preferencias de las mujeres. En general, los resultados obtenidos muestran la ausencia de platos complejos tradicionales venezolanos que han sido reemplazados por alimentos básicos en sus componentes, con referencias internacionales y que pueden ser preparados con alimentos baratos a los que la gente tiene acceso, sacrificando así las memorias culinarias del futuro que las generaciones más jóvenes pueden ver comprometidas por su ausencia en el imaginario y en los sueños de las madres de familia y de las voluntarias cocineras cuya fantasía es enriquecer con proteína animal un carbohidrato básico ya disponible. An Venez Nutr 2022; 35(2): 110-116.

Palabras clave: placer de comer, inseguridad alimentaria, estrato socioeconómico bajo, alimentación, cultura, tradiciones culinarias.

Introduction

Eating is a key biological action of human beings. As humans we all need to feed ourselves in order to maintain

a productive and fulfilled life. However, intake of foods goes beyond a physiological need as it is intertwined with cultural, social, historical, geographical and climate factors to say the least (1).

The eternal question: why we eat what we eat is profoundly deep, as it is primarily a consequence of the fact that people eat what is available around them, you cannot eat what is not available right? afterwards the

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senses come into play. Do we like what we eat? That most probably responds to what we are used to, what we developed as flavors, probably when we were kids, and if we had a good sense of taste and olfactory system and were exposed to the surrounding foods. Then, how do we choose what we will eat? that will be answered most probably on how the food looks like, what is the smell like, what texture is intrinsically within the food, and finally what does it taste like, for which we had to had the exposure to different foods to know whether we like or dislike whatever foods are in front of us. (2).

Basically, in Venezuela as much as alike in other Latin American countries, in terms of foods and culinary traditions, we are the result of a transformation in the social, cultural, religious and politics inherited spaces, as a consequence of the "hybrid mixed blood" integration that not only occurred in the New World but also in the Old World (Spain/Europe) as well (3). Venezuelan colonial foods express complexities added by the spices used in the old world that were brought by conquerors, the use of sweet-sour-sweet flavor together with local ingredients which started a new influence, initiated back then and preserved into the modern Venezuela and expressed in dishes such as "Asado Negro" (4, 5)

Coming from this complex culinary "mixture" it is understandable that Venezuelans as much as other people living within humanitarian emergencies have faced in recent times: the struggles of not being able to have some ingredients for cooking according to the traditions, and experiencing a life immersed in a persistent lack of availability of foods due to loss of crops, or living with the fact that certain foods are allowed or not to be consumed according to cultural and social traditions, or there is no economic access to foods, or there are some other external influences reaching certain communities, as an expression of colonialism of diets, meaning how imposed diets by ways of defining the only availability or the cheapest available foods determine what people eat and in some cases, which inevitably shows a transculturation of the daily intake of foods (6, 7).

Therefore, the fact that people experiencing food insecurity face lack of foods, is a determinant of what people will eat, what they will eventually like and appreciate, and what they will display at the table, if any at their household. Chances are that if you only have three to four foods to eat, those will be your foods references, and introducing new flavors, particularly if not introduced at a young age will not be as easy, therefore developing the palate for tasting different flavors, enjoying new aromas and get a sense of what is

like to eat a variety of foods and a quality diet can get difficult (8).

Venezuelan population has been immersed within a crisis, and for the majority, access to basic needs have been challenging. Food insecurity is about lack of food either because there is no availability, or the access to foods is impaired most probably because people cannot economically afford buying foods, or there is an alteration in public services which do not allow the proper utilization of foods, or there is no stability on the previous three dimensions, therefore an impairment of the households availability of foods is expected (6).

If food security relies on four pillars: availability, access, bio-utilization, and the stability of the previous three (6), is easy to understand why an impairment of the sense of taste and the development of flavors and a palate will come out if any of those pillars are fragile. No wonder people eat what they have available, since our ancestors' times we eat what we find in our surroundings, gathering and hunting, now the availability, linked to the economic capacity to access those foods make a true quest for foods, and if we are talking about low and middle income countries we will experience electricity, gas or other fuel shortages, which at the end will not allow to cook properly.

In addition, the impose by business and large chains of fast foods, is also an indicator of how people eat today. Some authors refer to this effect as a colonialism of the diet, which has had an impact on how people eat, and in people's health, taking advantage of urbanization and demographic transition processes and what those have been able to establish as a new normal in people's daily lives (9,7). Less time allocated to cook, less time for sharing family meals are examples of what the modern hectic life has imposed to families and societies in general, thus the fact that ready to eat foods are available had a convenience implied for those who could afford it, and the immediate benefit was there no matter what the long-term effects might be (10, 11).

We also live in a global world, and even the most disadvantaged people know there are different types of foods across the globe. Italian, Chinese, and Mexican foods are international cultural and culinary values that transcend frontiers and have been able to become part of people's life far away from Italy, China or Mexico. Now with global migration, Venezuelan food has been introduced at the international gastronomic space (12).

In Venezuela there are large communities of immigrants that integrated with local people giving birth to people liking other's cultures culinary traditions, flavors, and ingredients. Spanish, Italian, Portuguese, Lebanese, and Chinese foods are somehow immersed into the Venezuelan culinary scenario, and we can find elements in Venezuelan domestic and public tables that evoke these countries gastronomic memoires.

The aim was to the very first qualitative study (13) to explore on preferred foods and dishes women would be willing to prepare if money was not a problem. The first study was conducted during the month of November in 2020, in the middle of a very dark period of the COVID-19 pandemic in Venezuela, since the COVID-19 crisis came in addition to the already existing complex humanitarian emergency. The results showed women would prefer to prepare a dish that includes rice or pasta and to complement with a protein of chicken or beef, no mention of traditional culinary preparations existed in this first study.

This is a second part of the qualitative exploration on the consequences of the food insecurity crisis on everyday meals within the very low income households of Petare, a low income community in Caracas. Therefore, the aim of this second part of the study was to continue exploring what would be the preference for the dishes to be prepared if money was not a problem for accessing to foods, what was the preferred food of mothers and community cooks, during the first trimester of 2022, and explore their willingness to grow some foods and ingredients within the community or home gardens, so they can privilege local foods and introduce some economic benefits to their communities and households as well.

Methods:

A qualitative study was conducted in pregnant, lactating and community collaborators women (cooks and community coordinators) attending the network of kitchen soup serviced by "Proyecto Nodriza" (14) to identify preferred foods, what food would they grow on a family garden and what foods would they prefer if economic access was not a problem.

A brief description of the soup kitchen network includes it is an organization that brought assistance to pregnant and lactating women and their children until the end of 2 year old (first thousand days) who live in very low-income areas of Caracas, the capitol city of the Bolivarian Republic of Venezuela and Carabobo state, a central state in Venezuela. We did not include all the centers and only 2 centers in Petare, Caracas were included.

Location:

Two soup kitchens were addressed within the network of establishments of "Proyecto Nodriza" network. Both located in the largest slum area of Venezuela, and one of the largest in Latin America only second to Neza-Chalco-Itza in Mexico. Petare, is located at eastern Caracas, is part of the Metropolitan area and corresponds to the Sucre municipality. According to 2011 National Institute of Statistics INE there were 372 106 inhabitants in Petare (15), but the estimates in 2020, of the municipality is 448, 861, and it has a historic colonial center and its history goes back to 1621 when founded under the name San Jose de Guanarito (16)

Within Petare, the two locations chosen were: San Isidro and Fila de Mariches, both separated by 30 minutes of distance by car.

Sample:

A convenience sample was taken of all the lactating and pregnant women, and mothers working in the centers, 18 in total. Those were all that came the days selected for the interview. All mothers were interviewed when incorporated to the assistance program to verify that they were living in food insecurity, therefore they need to eat foods at the Nodriza soup kitchens. Among the criteria to be accepted at the centers are: low weight (undernourishment of mothers and/or children), not having enough money to buy foods, or skipping meals to feed the children.

Ages: 16-43 years old

Data collection:

In a previous study, conducted at the same network of soup kitchens, the questions to be performed were established, and previously proved to ensure they were understandable enough and applied through trained interviewers.

The following questions were made through a focus group methodology which intended get answers, but also intended to obtain the participant's perspectives on what they eat and why.

First, we made an introduction to know about the housing living conditions of the participants, it was not the principal objective of this study but it gives an idea of what is like the daily life of these women. Also, we asked what they usually cook with a simple question derived from what is available on the government beneficiary program CLAP, do you cook rice and pasta?

Ouestion #1:

What is your favorite food that you eat sometimes in your quotidian life?

Question # 2:

What would you grow at your family/community garden if you had the chance?

Ouestion # 3:

What is the favorite food you would prepare for you and your family if money was not a problem?

Besides these questions the interview team took the opportunity to ask about the circumstances for choosing the preferred foods, and what they usually cook at home.

Frequency analysis:

For the purpose of this study only frequencies were described, as the main objective was to identify what foods would they prepare if money was not a problem. Frequencies may show more than 18 answers if women referred to more than one option, or less than 18 if they would not tell what their favorite food was.

Results:

From the eighteen women interviewed, 3 were cooks at the centers, while the rest were beneficiaries women (pregnant or lactating women) attending to the soup kitchens.

Age range was from 16 to 43 years old, three women were 43 years old and they were the community cooks and coordinators volunteers. The rest were either pregnant or lactating and the range of age was between 16 and 37 years old.

All of them had access to a fridge, either because they have one at home or they use a neighbor's. All of them had access to a stove operated with gas, however the use of wood has been increasing due to shortages in gas and electrical power. The availability of safe running water is two times per week in average and when water is not available, it should be carried out in cubes from a communal source which is not proven to be safe and clean. That was reported to happen at least once per week.

At the simple question: do you cook rice and pasta? Was performed, they responded usually cook rice and pasta because this is what they have mostly available through the food beneficiary program CLAP (Local committees for supply and auto-production), which has important delays in their food boxes deliveries and shows up in

Table 1. Favorite food

Favorite food	Frequency
Pasta with shredded beef (Pasta con carne molida)	2
Pasta withcheese (Pasta con queso)	2
Pasta with chicken (Pasta con pollo)	2
Fried ripe plantain (Tajadas)	4
Salad (Ensalada)	2
Rice with smoked pork ribs (Arroz con chuleta)	2

a range of every two weeks to every six months. The content of these food boxes is mainly rice, pasta, corn meal, eventually canned tuna, oil, salt, and sugar, and is consistent with other studies findings (6).

Results are shown in tables according to the question described in the methods section. Table 1 includes answers on favorite foods, table 2 on what would grow on home and/or community garden, and table 3 what would you eat or cook if there were not economic restrictions.

Table 1 shows favorite food in general, which the most mentioned food was pasta (6 mentions), followed by fried ripe plantain, chicken and beef were mentioned by two women each, rice and pork by two women each.

Table 2 shows what foods would people be willing to grow in a home and/or community garden. Yucca, a traditional tuber was the highest, along with herbs and condiments used in traditional cooking such as green

Table 2. Home/community garden

X7 (X7)	
Yucca (Yuca)	4
Black beans (Caraotas)	2
Green onions (Cebollín)	2
Papaya (Lechosa)	3
Banana (Cambur)	2
Cantaloupe (Melón)	3
Plantain (Plátano)	2
(Aliños)	5
Cilantro (Cilantro)	3
Sweet Chile (Ají)	2

Table 3. What would you eat if economic restriction was not a problem

What would eat if economic restriction was not an issue	Frequency
Lasagna (Pasticho)	6
Salad (Ensalada)	5
Desserts (Postres)	4
Would make a BBQ (Parrilla)	3
Fresh fruit juices (Jugos)	2

onions, sweet chile and cilantro (altogether 7 mentions) Fruits (altogether 10 mentions).

Frequencies may show more than 18 answers if women referred to more than one option, or less than 18 if they would not tell what their favorite food was.

Table 3 shows what women would eat and cook if there was no economic restriction for purchasing foods. The favorite food was the Lasagna (Italian origin), salads (Venezuelan style with lettuce, tomato, cucumber introducing carrots and beets), desserts, BBQ (international origin), fresh fruit juices very popular in Venezuela, more concentrated compared to Mexican fruit "agua fresca" (17).

Discussion

Our interviews show that women are applying strategies to eat what they have, meaning they would rely on the foods provided by the CLAP program complemented by some of the foods they can afford with the family income. Therefore, their favorite foods include those foods they can afford and are available for them.

Nowadays, we can see the new face of "what is available at home" as a combination of what is available at the markets of the community, if they exist, plus the capacity to afford foods of the family, and the content of the food distribution programs (when available), as opposed to ancient times where foods available referred to what the first ancestors were able to gather and/or hunt, establishing the new normal for access to foods, with a foundation on the economics relationships between local and global, domestic and business, formal employment vs informal employment, that will have an impact on purchasing power of families (18).

In addition, within the new era toward the ending of the COVID-19 pandemics, where families, and particularly low income families need to face the challenges of living

on a daily income – if the case- dealing with taking care of measures for non-getting contaminated with a highly contagious virus, the need for understanding the quality of life of vulnerable individuals is a must. Moreover, where the pandemic crisis came to overlap an already existing crisis, such as the Complex Humanitarian Emergency in Venezuela (19), knowing how vulnerable communities are eating and what they are experiencing is a key factor for checking what people might eat in the future as developing a culinary identity is important within the several dimensions of being humans (1).

As much as studies shows the fact that in developed countries many individuals might not be eating enough fruits, vegetables, and whole foods, which redounds in low quality diets, low and middle income countries, show also deficiencies by eating monotonous diets derived from scarcity (20). The emphasis promoted in recent years to encourage healthy eating has been precisely done from the healthy foods consumption perspective, but has had a limited success on changing people's behavior toward healthier options (21). Taking into account the context in which healthy eating's behavior might occur, particularly in LMIC is relevant to explain why we eat what we eat.

Taste is a key determinant of food choices, and what people has been exposed to is important to understand the perception they might have on what foods taste better than other (22). People might have the perception that healthy foods are tasteless as opposed to unhealthy foods (23), however what is the taste and pleasure the population might have if there is no variety within the regular diet?

Lately, several cross-sectional studies have shown an association between higher eating pleasure and better nutrition status (23). Being in a disadvantaged community and hearing about their struggles for feeding themselves and their families gave a hint on what the hypothesis to be developed in these circumstances would be. We can elaborate the hypothesis that women from the referred disadvantaged communities in Caracas exposed to insufficient and monotonous diets, are losing their eating's pleasure, therefore a deficit nutrition status might be expected.

We did not address nutrition status in women included in this study, however we have some data provided by internal in press reports of the NGO, showing a trend to being at risk for undernourishment (24).

Other interesting finding of this study is the fact that the type of favorite foods and what would be a "dream" food

to cook and eat if there was not an economic restriction, are not related to the traditional most consumed foods in the previous decades. However, it is interesting the willingness to cultivate fruits and vegetables to improve their intake since this is a global effort being done (25). It is worth to mention that in the middle of a humanitarian crisis women of very low-income status refer fruits and veggies as a priority for their own grown.

The culinary Venezuelan identity refers to arepas (corn meal bread), hallacas (traditional Christmas time complex tamal), empanadas (elaborated with corn meal as opposed to Argentinean and Chilean wheat empanadas), cachapas (corn pancakes) and other complex dishes such as "Asado Negro" (round beef piece with a complex sauce that include molasses, pepper, sweet chile, onions, and other spices), the elaborated fish dishes from the population by the Venezuelan Caribbean coast (5), however none of these appeared in the responses of the interviewed women. In the first publication (13), the upcoming Christmas holiday season were a reason to expect that women would mention the traditional foods associated with this period: hallacas, hen salad (carrots, potatoes, shredded hen, with a mayo dressing) and pork leg oven roasted. These have been at least a century ago, the traditional foods that identify Christmas in Venezuela.

When addressing food insecurity, and food scarcity traditionally the key evaluated elements go after nutritional status of the population and when implementing actions to recovering if needed, the attentions go to the foods or therapeutics foods that will recover people from the nutritional deficit diagnosed. However, the understanding of what is like living in food insecure conditions goes beyond statistics and anthropometric measures, as it refers to the quotidian life unnoticed impairments that only will appear once installed and usually with consequences, such as the lack of utensils for eating in cultures that traditionally use fork, spoon and knives, or the absence of a table to gather the family around meals, again in cultures where traditions indicate the use of a table (8).

Conclusion

Living in food insecure conditions will restrict the availability of foods for daily intake, but also to be enjoyed as a family. The eating pleasure of very low income women in this study is restricted to what is available combined with the dream of including a protein if possible. Further research is needed to understand what goes unnoticed behind a deficit in nutritional

status, as enjoying foods is part of being human and might be a contributor factor to eat healthier foods.

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Recibido: 10-12-2022 Aceptdo: 20-01-2023