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Title
Fast Food, Slow Death and the Propaganda of Health: Jewel Thais-Williams’ Radical Battle for Black Survival

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Residents of West Los Angeles and other affluent neighborhoods throughout the United States enjoy weekly farmer’s markets with fresh produce, and convenient grocery stores that provide healthy food and organic options. Meanwhile, South Los Angeles (and other underserved communities across the country) has a plethora of fast food restaurants, liquor stores, convenience markets, and a few sub-par grocery stores. What I’m illuminating here is a disparity within and between the built environments in Los Angeles, particularly the food environments. Because the term “healthy” is so subjective, I am defining “healthy” foods as unprocessed foods, foods that are organic or without pesticides, and foods that are hormone and chemical-free.

Discourse around food is often situated in the context of price and choice: you get what you pay for, and if you value your health you will pay a bit more for your food. It is also assumed that if you simply educate yourself you will make better nutritional decisions. However, discussions such as these neglect to account for socioeconomic disparities and the fact that certain people simply can’t afford to buy healthy food. These discourses also overlook the matters of access and availability, which often prevent entire neighborhoods from enjoying healthy food options. While the element of choice is undeniably significant, it is
crucial to also address the structural factors in place that prevent certain groups from obtaining optimal health. As Marion Nestle argues, it is necessary to “...refocus attention on the environmental –that is, the social, commercial, and institutional– influences on food choice, rather than on the personal” (Nestle, 2007).

The environmental –and particularly the food environment— is becoming an increasingly important part of conversations about health and wellness. In South Los Angeles, the built environment renders organic and other healthy food not only unaffordable, but virtually inaccessible to many families and individuals, considering the distance that they must travel to get to it (incurring the additional cost of transportation and travel time), and assuming that they have a means to get it back home. Much of South LA is considered to be a “food desert”, or an area in which access to affordable and nutritious food is limited. Food desert status may also be determined by an imbalance in the types of food that are available in an area: namely a ratio of more “fringe food” outlets such as fast food restaurants, gas stations and liquor stores than grocery stores.

Food deserts can occur in both urban and rural areas, and the factors that contribute to their development are particular to the region in question. In this case, the lack of healthy food access in South LA is largely the result of deliberate abandonment for economic purposes. As put best by George Kaplan from the University of Michigan, “Food deserts are defined as “areas with no or distant grocery stores.” But the word “desert” is also a verb – “to leave someone without help or in a difficult situation and not come back.” In urban South Los Angeles, there were several moments in which the community was abandoned and
neglected, the most obvious perhaps being the LA riots. The 1965 civil unrest influenced grocery chains to flee the inner city, many of which never returned. When the city exploded in flames again in 1992, there was another mass exodus of retailers and food suppliers, and South LA is still reeling from this desertion. The grocery outlets that did return now sell products whose quality pales in comparison to stores located in wealthier parts of the city. The fruits and vegetables sold at inner city venues are often on the verge of spoiling, and rarely are they organic. So why is this important? Why can’t South LA residents simply leave the neighborhood to do their shopping?

In 2006, a report “Examining the Impact of Food Deserts on Public Health in Chicago” found that African Americans generally “have less ability to compensate for low geographic access to grocery stores” (Gallagher 2006). What this means is that due to discrepancies in socioeconomic status—which can be measured by income, education, or occupation—African-American residents are more likely than Whites to be reliant on public transportation, and are thus less likely to leave their communities to purchase healthy food. LA’s transportation system, though it is improving, is not yet comprehensive enough to ensure access for South LA residents to the grocery stores on the periphery of the neighborhood. It becomes even more of a burden when we are talking about the multiple single parent female-headed households of color in South LA, in which the mother is employed either fully or partially, and thus has limited time and energy to complete the shopping for the household (which has traditionally been reserved as “women’s work” even in co-parented households). Female-headed households consistently report lower incomes than male-headed households, and
women of color are three to four times more likely to live at or below the poverty line. So understandably, many South LA residents choose to shop locally at the fringe food outlets or subpar grocery stores, sacrificing health for the sake of ease.

As we all probably know, the implications of consuming a toxic diet are numerous and deadly. In 2008, a Blue Ribbon Commission on L.A’s Grocery Industry and Community Health found that families and kids in underserved communities suffer from disproportionately high rates of diet-related health problems”. Diet-related health problems can manifest as illnesses such as hypertension, diabetes, high cholesterol, depression, and obesity to name but a few. Obesity rates among teens in South LA are up to 8 times higher than West LA teens¹, indicating a very real connection between diet and health, and a severe divergence between the two neighborhoods. Economically, the individual, state and federal costs of treating diet-related health problems are in the billions of dollars, suggesting that eating cheap ironically comes at a heavy price. Instead of addressing the causes of our poor health, doctors and drug companies prescribe medications with side effects arguably worse and more harmful than the conditions being treated: prescription medicines have been shown to cause strokes, paralysis and in extreme cases even death.

So what is to be done? Or rather, what is being done? Individuals and organizations in the South LA community have been actively responding to the food crisis for decades in many different ways from planting community gardens to advocating for new farmer’s markets and more healthy retailers. One

particularly inspirational woman has devoted much of her adult life to the
transformation and survival of Black Los Angeles, mind body and soul, and is an
important model for radical health reform and lifestyle transformations. Jewel
Thaïs-Williams: an amazing 71-year-young activist and entrepreneur, who is
perhaps best known for her LGBT friendly nightclub “The Catch One”. In her
enormous pink building in the heart of South LA, Jewel also provides donation-
based alternative health care, and she served delicious vegan soul food until last
December when she sadly had to close down the restaurant, (and hers is just one
of the vegan food options in South LA to close its doors in the last year). What is
more, her space also serves as a regular meeting place for political organizing and
community town-hall style gatherings. Jewel is more than just one individual
saving lives. Her wholistic approach to health inspires a collective community to
be responsible for each other’s survival. With Jewel and others like her as a
model for radical health reform, we can continue to actualize the healthful world
that we know is possible.

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