

UNIVERSITY OF THE WESTERN CAPE

**A Closer look at Black South African Women's lifestyle and food consumption choices
and the effects of globalisation in contemporary South Africa.**

DEPARTMENT OF ANTHROPOLOGY AND SOCIOLOGY

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Plagiarism Declaration

I know that plagiarism is wrong.

Plagiarism is to use another's work as my own. This essay/assignment submission is my own work. I have not allowed and will not allow anyone to copy my work with the intention of passing it off as his/her own work.

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Chapter 1: Introduction

Background

Food consumption amongst urban black communities has recently become a matter of concern as many black South Africans suffer from nutrition-related diseases. These include hypertension, diabetes, obesity, respiratory diseases and gout, to name a few. The World Health Organisation (WHO) defines these diseases as non-communicable diseases.

According to the World Health Organisation (2016) stats, about 44% of deaths in South Africa in 2016 were caused by non-communicable diseases. South African economy has gradually been shifting towards a more industrialised culture of development and has, as result, brought about a dramatic change in lifestyle in many black households. Given the political history South Africa has been emancipated from, changes in lifestyle were inevitable. It is relevant to then look at the historical political context of South Africa to see how much has changed and how the black south African would be effected by these changes.

Discriminatory laws of migration and urbanisation controls by the Apartheid government allowed for the black South Africans to inhabit poor rural areas, which after Apartheid has placed them in a disadvantaged position (Statistics South Africa, 2006, p.1-2). Many years post-apartheid, black people were allowed to more freedom to migrate into urban areas, mostly for job opportunities and seeking a better quality of life, which they did. STATSSA (2016) reported that only 56.26% of South Africans were urbanised in 2001, however 16 years later in 2017 the stats moved up to 65.85%, according to Statista (2019). Getting into contact with a more industrialised culture than that experienced in the rural areas is sure to have an effect on the lifestyles of the people who choose to migrate. One of the observed changes in the lifestyles of the migrants a change in food culture; generally moving towards a more industrialised food culture. A fast industrialising economy also opened up possibilities for globalisation, allowing for the integration of many cultures, and food popularly being one of those.

My interests are, therefore, centred around how factors of urbanisation and globalisation affect people's lifestyle and food consumption choices and also how this may then explain the prevalence of non-communicable diseases in this population. I had focused my research interests on a township called Paballelo, situated in the small town of Upington in the Northern Cape.

My main objective for this research is really to try and understand how health decisions are made around food? What is it that really influences people's decisions when it comes to the food that they choose to consume? Does health knowledge influence health decisions? I also am really interested in knowing how factors of urbanisation and globalisation implicitly or explicitly play a role in food consumption choices.

Chapter Outline

Chapter 2 is my methodology section in which I will start off by introducing Paballelo, a small township located in Upington as my field site. I will also introduce the reader to my participants which will subsequently lead to how I had met all of them as well as the ethnographic methods I had used while researching them. I made use of participant observation and qualitative interviews as my ethnographic methods, which I will also discuss in-depth in this section. Accompanied is the ethics that I have also encountered in the field while conducting my research.

What does existing literature say about my topic of interest? Who has written about it, what have they written about it and where does my research posit itself within this pool of knowledge? Chapter 3 is where I will discuss all the literature that I have reviewed on my topic of interest, and I will discuss two themes that I have picked up from reviewing all this literature around my topic, the effects of urbanisation on food consumption and the effects of globalisation on food consumption, as well as the theoretical underpinnings of Bourdieu as a stepping stone towards understanding my own research.

The first theme I identified in the literature is that of urbanisation and the effects it has on the food consumption patterns of the South African people. First and foremost I will provide the reader with a definition of what urbanisation refers to and how I am referring to it in my context. The concept that stuck out in this theme was nutrition transition, a concept popularly used in anthropological work on food and urbanisation. I consulted the work of Popkin (1999) and Kearney (2010) to help me define this concept, as well as how it relates to urbanisation. I will go on to discuss this theme in depth, in relation to the literature, as well as how this has then led to the nutrition transition.

The second theme which I will discuss is that of globalisation and its relation to food consumption. First and foremost, I will define globalisation as a concept and also how this

concept is very important in not only influencing, but unconsciously coercing our food consumption habits.

Bourdieu's (1984) theory of habitus is the theory that I have decided to draw on as a theoretical underpinning for my research. I will go on to discuss this theory of Bourdieu in great detail and then also why and how this theory has become important for the project that I am undertaking.

The fourth chapter in my project is my research findings. In this chapter I will analyse the interviews that I have conducted with my participants. My research findings will introduce the reader to three themes which my time in the field has brought forth, the first is the gradual nutrition transition that has happened as a result of urbanisation and globalisation. The way that these women eat now versus how they used to eat growing up in a less industrialised world has changed; I attempt to track these changes and also explain how globalisation and urbanisation were implicit in this transition. The second theme discusses the issue of affordability versus accessibility; another reason that has allowed for the change in people's diets and has affected people's food consumption decisions. The third theme speaks on health knowledge and health attitudes. I will try to explain the mindset and attitudes of these women towards food and how this may or may not affect the way that these women decide to consume their food. The question I attempt to answer here is whether or not exposure to health knowledge influence these women's food consumption choices?

In my fifth and final chapter I will conclude my research project by linking my findings to my objectives. I will explain what I have found on food consumption and health and how this may then possibly provide an explanation for the prevalence of NCDs in the demographic in black south African women.

Chapter 2: Methodology

I spent approximately one month in different locations within Upington, Paballelo itself and during the process I was introduced to about five ladies who I managed to approach and interview for my research. For ethical reasons, I will refer to them as: Sis A, Sis B, Sis C, Sis D and Sis E; all women identified as middle-class females, working professionals and speaking isiXhosa as their home language. I will be introducing the reader to Upington, Paballelo as a field site, to the beautiful women I had the pleasure of working with, the methodological approaches employed in my research as well as the ethical issues I had encountered in the field.

Upington, Paballelo

Upington is a small town in the ZF Mgcawu district in the Northern Cape with a population counted as approximately 100 282 in 2016/17 (IDP, 2017/2018). Although small, Upington is identified as one of the main growth centres, in terms of economic development, next to Kimberly, in the Northern Cape. Paballelo, a small township in the heart of Upington was my chosen field site for the ethnographic study I intended to carry out. I had grown up in this place most of my life as well, so I am doing what Van Dongen and Fainzang (1998) define as ‘anthropology at home’ - home denoting either a shared culture or a shared experience. There has not been much discourse on Upington in existing literature- it had been an under studied area but it was my familiarity with the place I had grown up in all of my life that resulted in me choosing it as my chosen field site. This is a place that is often written about in passing, the only direct literature I have found on Paballelo itself is the historical account of the Upington 26 murder trial that has taken place many years ago in 1989, other than that, it is mere mentions of the town which the Orange river flows through. A town where some of the best wines are produced at the Orange River Wine Cellars- the second largest wine-making cooperative in the world, according to the region’s IDP (2017/2018).

Paballelo itself is a very close-knit community as almost everyone knows each other at least by face- it is thus very easy to spot someone who does not belong. It is a multicultural, multilingual township as everyone speaks Afrikaans to each other even though majority of the people living in Paballelo’s first language is not Afrikaans. The population is split into majority Xhosa-speaking people with origins from the Eastern Cape and Tswana-speaking

people originally from other parts of the Northern Cape. Interested in why this demographic looks like this I had spoken to one of the elderly women who have lived in Upington most of her life, her name is Margeret*. She had been a long serving member of Upington, Paballelo as Margeret had migrated here as a little girl from the Eastern Cape with her family, but has since settled, started her own family and has about three generations of children after her. According to her, people moved from the Eastern cape to Upington specifically because they heard that there was a lot of money to be made in Upington. In her own words:

Die mense het meeste Upington toe gekom. Soos ek gehoor het my ourse se, hulle het Upington toe gekom om hulle gehoor het die geld is baie in Upington; hy's verskriklik klomp... ja toe kom hulle Upington toe want "Hey ininzi imali eUpington ikhiwa ngezitya"

[As I had heard from my parents, many people came to Upington because they had heard that there was a lot of money in Upington.]

From what I could gather, Xhosa-speaking people migrating to Upington was merely for job opportunities, but soon built a community of their own, now known as Paballelo. Many generations were then born here and settled here. Because the IDP (2017/2018) identifies Upington as one of the major growth centres in the Northern Cape, it is said to attract a lot of migrant labourers. Many migrant labourers now live within the Upington area because of the large economic activities happening within and around the town. The town brags a large agricultural economy due to the many grape farms that are situated on the outskirts of the town. According to the IDP (2017/2018), approximately 350 people have been employed by the SAD Vine Fruit Pty (Ltd); a dried fruit company located in the Upington area as well. The agriculture industry attracts a lot of these migrant workers, but so do the Solar plants that have recently been boosting the economic activity around the Upington area, creating jobs for many people. The unemployment rate, as recorded in 2015, for this district is considerably low at 24.9%.

The Afrikaans language dominating Upington, according to Jane many black people were forced to learn Afrikaans as a way to communicate with their white and coloured counterparts that dominated the Upington area. Demographics as recent as 2015 show that whites and coloureds still make up 70.8% of the population in Upington. Even the schools were first language Afrikaans. One of my participants, Sis E, elaborates her experience by saying;

I studied my lower primary here in Upington and then, because those years there was no, like, high schools for blacks we have to go to Eastern cape, Queenstown. King William's town to continue with our... with my higher education.

Even today, the schools in Upington are all first language Afrikaans, except for the primary and high schools found in Paballelo itself. This is why we now see Upington being this multicultural, multilingual space today.

Introduction to my participants

Really nervous, no idea where to start or how to start, I embarked on this journey of initiating an ethnographic study- much comfort was found in the familiarity of the site; it did numb my anxiety just a little bit. I had no idea as to who I will be approaching and how, but I knew what I wanted. I had used a purposive sampling method as the women I had looked for initially were not necessarily going to be chosen at random but had to meet a specific set of criteria (Morse, 2011). My desired sample for this research had to be middle-aged, middle-class, black women who lived in the Paballelo area at that present moment. Initially, middle-class had been very difficult to define in this context as there were many factors that could contribute to someone identifying as middle-class. I, however, soon discovered that middle-class wasn't an issue of income, but one of lifestyle in Paballelo. What you had and what you could afford ultimately distinguishes the different statuses of women; it was the lifestyle of the person that could determine their socio-economic status as middle-class women. It didn't take long for me to approach my first participant, and soon after I was to meet the rest of the ladies. I had also relied on the snowball sampling method in getting my participants, meaning most were met through referrals from another (Atkinson and Flint, 2011). These women had all been familiar with each other in one way or another, and in the end, I was able to secure five women to wilfully make a part of my ethnographic study- Sis A, Sis B, Sis C, Sis D and Sis E.

Two pairs of trousers and a skirt I had recently bought from Mr Price had been in the plastic bag I carried as I made my way to town this Saturday morning. I had been in Upington about a week now and this was my first time stepping into town. The taxi made its final stop at the taxi rank, in the city centre, and I made my way to the taxi plaza; the all too familiar noisy and busy atmosphere of the taxi rank had not changed- it still made me very anxious. The taxi plaza was a building resembling a shopping centre located right at the taxi rank, shops in the plaza ranged from food to electronics to clothing and also housed *Sis D's Creations**, a dress-

making shop owned by Sis D. The dress- making relationship we had spanned many years as she has always been the go-to person for all my dresses ever made- from matric dresses to wedding dresses. The clothes I had brought along had also been for her to alter.

Sis D (50) was a single mother of three daughters and one son- her two eldest had moved out, middle-child was a student at the University of Johannesburg and the youngest was still in the tenth grade of Upington High School. She had started her business as a seamstress in her twenties, working from her house, but due to popular demand her business grew and needed to expand, thus the shop she now rents at the Taxi Plaza.

Walking into the shop I was greeted with excitement and welcomed with a big hug, questions on how school was and what I was busy with this year followed. With equal excitement I explained what my project was about and it was within that moment I realised “*maar Ousie kan mos ook n part van my research wees*” [but she can also be a part of my research]. She laughed and responded:

“I’m black, we don’t have relationships with food. The only relationship we have with food is that we eat what we can afford.”

That’s exactly what I needed, I needed someone with an opinion and she was perfect. After much persuasion, she had agreed to sit down for an interview with me, I could come back at anytime as she would be in her shop everyday till six noon.

Excited at the possibility of a new participant in my research, I make my way back to Paballelo in a taxi again. My mother had mentioned earlier that Mbali* (an elder cousin of mine) was going to have a traditional thanksgiving ceremony at my late great-grandmother’s house and I made my way to there from town, it was just after 2 o’ clock. I had been introduced to Sis E at this ceremony.

I grew up in Upington Paballelo, which is like a... it’s a township with a mixed ethnicity. Different languages in Paballelo... and I studied my lower primary here in Upington and then, because those years there was no, like, high schools for blacks we have to go to Eastern Cape, Queenstown. King William’s town to continue with our, with my higher education. So, I completed grade... standard, was it those years standard... standard 10. I completed standard 10 and then I fall pregnant with my elder son. I was like 17/18 years old and I had to drop out and assist my parents in raising the child. And went to university in 1990 to study social work. So, I’m working

as a social worker now. I've got 23 years' experience I'm working as a social worker. I'm married, uhm. I'm staying in Upington still and I've got 3 boys... and 5 grandchildren [laughs] that is me ja

That was Sis E (54), also a familiar face, very eager to participate in my research as well. I had initially mentioned my research to her at the ceremony, and she had shown much interest, however due to the nature and environment of a typical traditional ceremony, not much could be discussed in that moment. I was hopeful to have identified another potential participant, it, however, would take about two weeks to set up an interview date with her, which eventually was worth it. Sis E is to refer my next two participants to me; Sis C and Sis B.

Sis C (48), younger sister to Sis E, had also been a resident of Upington for many years. Unlike Sis E and Sis C, she had lived in Upington all her life. She had been married before, however now living as a single mother to her two children, one in high school and the other still in primary school. Sis C works a government job at the Department of safety and Liason and has created a very comfortable life for her and her children. What initially drew me to approach her was remembering my previous encounters with her and how she had always been passionate about food. She never shied away from taking over the pot at a gathering or a ceremony and she had always been very notorious amongst her family and friends for her 'potjie' - "*niemand maak n potjie soos Sis C nie*" [No one makes a potjie like Sis C] they would say on several occasions. She was definitely someone I saw as worth talking to.

Naturally being a participant and an observer in my own household, I knew that making my mother, Sis A being a part of my research was an inevitability. To my surprise, she had been reluctant to participate in my research initially, referring me to other people instead, but I knew I wanted her. Conversations around food flowed naturally with her and so did me participating in the everyday making of food and occasional grocery shopping trips. These were activities I do every day anyway, only now I get to participate from a researcher's perspective, and I think that's what made her anxious. It took some convincing and coercion, to some extent, but she did end up consenting to be a part of the interview.

Sis A (50) is also married, living with her husband and youngest of her three children as my sister and I were away at University most of the year. Living in Upington for many years, she however, had grown up in the Eastern Cape, a rural area called eRhqwantsana in Beaufort West. Sis A holds a comfortable job as an assistant manager at the Cooperative Governance,

Human Settlements and Traditional Affairs (COGHSTA), while her husband works as a deputy principle at Paballelo High School, the local public school.

As per recommendation from Sis E I had approached my next participant. The last of the women I had the pleasure of working with was Sis B(33), who also had lived in Uppington her whole life. Currently working as a teacher at a creche, her husband also holds a government job at the Department of Social Development. Together they have three children, the eldest doing Grade 9 and the youngest still in diapers.

Methodological approaches

Saturday, 22 June 2019; On a sunny morning In Paballelo, I make my way to Brown street, a walking distance from where I was living. I had arrived there just after 2 o'clock- the ritual had just finished, and the food and beer were about to be served to the people. The household I was visiting had belonged to my great grandmother before her unfortunate passing in 2015- it had since become a family home, vacant to anyone who may be in need of accommodation temporarily. Today, Tat'omncinci (as the family calls him) has taken his place as the resident of the house. Tat'omncinci is a Xhosa term referring to the younger brother of one's father- that being my grandmother's father. Everyone in the family has since adopted the term and it has since replaced his real name.

Back to the house. The family home takes precedence in the Xhosa tradition and becomes the meeting point for all family functions and rituals- which was why the family was gathered here today. Mbali*, a young lady who was the granddaughter to Tat'omncinci had invited everyone to a thanksgiving ritual she had arranged- this ritual was to thank the ancestors as she had just received a promotion at work. These types of rituals have specific dietary instructions and I thought it interesting to observe people's relationship with food in this cultural space. My ethnographic study took off that day as I was starting my first step towards participant-observation- a method that allows one to enter the field with no hypothesis, but rather an open mind to see what life is like (Platt, 2011). I had not yet known who I will be observing or what I will be observing, but I knew this space could give me some needed insight into the food consumption relationships within this space. Did personal preferences and diets intervene in the preparation and consumption of this food? Did the women's food consumption differ from that of the men in this space? Also, what were the people's conversations around food? Those were my primary concerns in my field site that day- with no one specific in mind yet, I graciously observed and conversed while having my plate of

umngqusho and retlo- I would be participating and observing at 3 more similar weekend events in the duration of my research.

It had taken me a week after approaching Sis D, for me to initiate an interview with her. It was the 26th of June, at around 12 o' clock in the afternoon, when I made my way back to Sis D's* Creations to sit down with Sis D and discuss what food meant to her. She had been particularly busy that day; it was close to matric ball season and the orders had been overflowing- I did mention earlier that she was very popular dressmaker in Upington. She clears up her worktable and signals for me to sit down across from her as though I was here for a consultation. She sits silently reading the information sheet and consent form I had just handed her- detailing exactly what the objective of this qualitative study is and how it was going to be carried out. Sis D signs the consent form and sits ready, eagerly waiting for me to ask my first question. A semi-structured interview, with an initial stab at a life history interview, was the qualitative approach I had decided on. It was important for me to know about the life history of my participants before attempting to understand their current diets- historical health behaviours and diets may offer explanations for current health behaviour and diets. My interview with Sis D had lasted about 15 minutes. I had also visited Sis E at her workplace for our initial interview- It was the 4th of June 10 o' clock in the morning when I had just arrived at the former Gordonia Hospital- Now occupied by the Northern Cape Department of Health offices, to conduct my interview with Sis E. It was the most convenient time and space for her as she had been busy with her own Psychology honours thesis, we sat and spoke for just over about 50 minutes. The rest of the ladies were very comfortable inviting me to their homes to conduct the interviews at various times during the course of my fieldwork. Later on during the day of the 4th of June I had waited for Sis A to return from work and it was around 4 o' clock late when I had sat down with her and conducted the interview which lasted around 25 minutes. I was lucky to catch Sis C arriving from work at 5 o' clock that same day, it had been a busy day for me. Everything is a walking distance away in Upington and it had taken me about 20 minutes to walk from Sis A to Sis C's house that day. When we sat down to talk, it took quite a while to get to the interview, but when we did, we spoke for 35 minutes and it happened to be a very informative visit. It took a few weeks later for me to get Sis B as a participant, it was on the 28 of July when I interviewed her at around 2 o' clock in the afternoon for about ... minutes.

Many afternoons I would find myself walking to the houses of the ladies, just in time to catch them coming from work. Paballelo was great in that everything and everyone is literally just a walk away from where you are. In time to join supper preparations or just conversations around food, the women soon became naturally comfortable with my presence in their homes. I had noticed how the ladies were more comfortable with my presence when I spoke to them in Afrikaans instead of English; they would become less formal and almost forget that you are in their homes on a researcher's capacity. Sis A and Sis C had been kind enough to invite me on their grocery trips as well at different times during the research period, proving very insightful as well.

In total, I had interacted with approximately 15 people, was able to conduct five interviews and spend time observing with only 3 of the 5 ladies in the course of my fieldwork. The transcribing process took about a full day each for each of the interviews. I had decided to transcribe my interviews after I had completed my research, which I had later learned was not a very wise decision. I had, unfortunately, lost one of the interviews from my records, and although I have notes from that interview, I could not exactly have a transcription to use during my writing up process. The many hours spent transcribing re-introduced me to my data and I was able to identify a few common themes, I could see where the data agreed and disagreed.

The one theme that has definitely made its way into all of the interviews is what Popkin (1999) identifies as nutrition transition, referring to this shift from rural to urban diets. "The concept of the nutrition transition focuses on large shifts in the structure of diet" (Popkins, 1999, p.1902). With the modernisation and urbanisation of their lives, every one of these participants have mentioned their diets changing. It is not only the way in which they eat, but their attitudes towards food that has changed. It is in the types of food that they eat, and the rituals around food. I found that about all of these women complained about the demand a 7-hour workday puts on their energy levels and how this does influence their food consumption habits. Many don't have the time to cook balanced meals as much as they used to anymore, therefore succumbing to quick fix meals which are usually unhealthy. They also mentioned how they do not get in the recommended 3 meals a day, however only eating when they either have the time or when they feel hungry. This change in lifestyle and food consumption choices has everything to do with the effects of urbanisation, because they have mentioned that even in cases where they did not have much money growing up, they still had their

regular meals and somewhat healthy meals every day. Many have mentioned that even the traditional Sunday meal has fallen from their diet, mainly because weekends are seen as days to rest, therefore weekends usually mean fast foods.

Fast foods make up a majority of what I identified as 'weekend-diets' and 'pay-day diets, a subtheme under nutrition transition. What this basically refers to is how all of my participants have a tendency to see weekends and pay days as fast food allowance days. These fast foods range from braaiplates, burgers, pizzas, KFC, 'Melksalon' (it's a popular fishery in town), or even just bread and this definitely affects the overall diet of these women.

Affordability vs accessibility is also a theme that made itself into my research findings. Although now there has been more availability of food choices, there has also been issues around accessibility due to affordability. Sis D and Sis B mentioned how healthier food is considered more expensive than unhealthier choices of food, therefore hindering the accessibility. Affordability is also mostly determined on the diet of the rest of the family, because if you are the only one eating healthy in your household then it does become expensive to maintain two diets in one household. This was not the case for all of my participants, however, as Sis E, Sis C and Sis A are able to navigate around eating healthy on a budget, when they feel like it.

On the theme of health knowledge and behaviour around food consumption, I realised that these women are often times well educated on the health implications of eating a certain way and maintaining a certain diet even though they do not readily follow them. They are well aware of non-communicable diseases related to food, but it does not always affect the way that they eat. All of them, mention an attempt towards eating healthy at some point, however, do not always follow it. It took Sis C getting sick for her to eat healthy, and Sis D basically laughed and said that she would only consider eating healthy if a doctor prescribed it due to health issues. So, their health attitudes largely play a part in their food consumption choices.

Ethical implications

Doing research at home opens up for many ethical issues around objectivity. This required for me to become reflexive at many a times during my research. Distinguishing between being in the field and not being in the field proved quite a challenge to both me and my participants as lines are easily blurred. I had to negotiate my position as a researcher at many times to make sure objectivity is maintained. Knowing that participant-observation requires

one to develop close relationships with one's participants, there are also ethical issues that can result from the level of closeness. Matabeni (2008) mentions how the main concern of many anthropologists is the distance between fieldworker/researcher and informant- when is too close and when is not close enough? Take Sis A, for example; treating her as yet another participant and not my mother was very difficult to maintain as preparing of food and grocery shopping in her home was almost second nature to me. The closeness to this participant could possibly hinder the validity of the data as it could be informed by my own biases as well; reason why I had to step back and reconsider my position at times.

There was a lot of ethics around consent as well as I had to keep reminding my participants of ongoing consent during our casual conversations that did not include part of my time 'in the field'. As much as reminding them of consent is the ethical thing to do, it does however, make people more aware of their actions and as a result they stop acting as naturally as they did when they had forgotten for a moment that they are 'being watched'. The researcher-participant binary was often taken for granted as it was easy to get too comfortable and forget my position in their lives. I remember Sis D barely skimming through the consent form and signing immediately without actually reading what it says. I asked "*So Ousie lees skaars wat sign ousie nie?*" [So you won't even read what you are signing for?] and she replied "*Nee, is dit dan rerig nodig?*" [No, is it really necessary?]. What would consent then really mean in this instance when the participant does not even know what they are consenting to? I had to ask her to read and just make sure she understands what she was reading. Sis A also reluctantly asked me if it is really necessary and I had to explain that she needs to know exactly what her rights and responsibilities are before she continues with the giving of her information to anyone.

Chapter 3: Literature Review

I will explore the literature written the themes of urbanisation in South Africa, the effects that urbanisation has had on food consumption patterns of the South African people; globalisation and its effects on food production and consumption. I will also go on to explore the theories of Bourdieu (1989) and Farquhar's (2002) concerning food consumption and food choices. The main goal is to show that food choices are not reducible to cultural tastes but rather influenced by bigger global structural factors.

Urbanisation on food consumption: nutrition transition

Urbanisation, as defined by A Dictionary of World History (2000) is the process by which the population of an urban area increases and also the process of a rural area losing its rural character and way of life. The process of urbanisation and increase of an urban population usually is as a result of rural populations' internal migration- these migration patterns as a result of many push factors from the rural to the urban areas. According to Statista (2019) the urbanisation rate, referring to the increase in urban population, in South Africa peaked at a high 65.85% in 2017.

Push factors of urbanisation are both economical and non-economical (Statistics South Africa, 2006, p.10). When considering economic push factors, the main factor for urbanisation is perceived to be employment (Tsholekile, 2007; Viljoen, Botha and Boonzaaier, 2005; Puoane et al, 2006)- Statistics South Africa (2006) defines employment-based migration as labour migration; usually characterised as a form of temporary migration. The reason labour migration is classified as temporary migration is because many people leaving the rural areas in search of migrant work in the cities often leave either families or homes behind that they return to as their permanent place of residence. Rural South Africans generally assume that employment prospects are better in urban areas, as a result many of them flock there, hoping for employment. As I have mentioned earlier, around 65.85% of South African people were reported to have been urban in 2017, and this figure is on the constant rise. In an attempt to narrow my research in to my chosen field-site, I had noted that the urbanisation levels for the Northern Cape had been recorded at 80% in 2001 (Statistics South Africa, 2006), keeping in mind that urbanisation referred to here is the growth of the urban population of an area. Upington, specifically, as an urban area has served as an attraction to many rural people as employment prospects were infamously assumed to be

high. Reiterating what Margeret*, previously, gave as an explanation for urbanisation of many of the rural people to Upington, specifically, during her time growing up.

Non-economic push factors that Puoane et al (2006) notes as driving factors towards urbanisation is the easier access to education and health resources available in these bigger towns and cities; facilities that rural areas have a lack of. Both these factors are what push people out of the rural and into the urban areas. These factors would often lead to what can be classified as permanent migration (Statistics South Africa, 2006).

As mentioned in the definition of urbanisation given by A Dictionary of World History (2000), migration is not the only form of urbanisation, but also an area moving towards a more industrialised style of development. Urbanisation in the economy of a place would refer to an economic shift that gradually takes place, this would mean towards a more industrialised economy; “the service sector grows rapidly, industrial production is dominated by capital intensive processes, and time-allocation patterns change dramatically” (Popkin, 1999, p.1910-1911). A change in the structure of the economy ultimately results in a change of the lives of the people living within that economic region. As referred to by Popkin (1999), a capitalist system would require a much more labour-intensive and time-consuming approach, thus definitely affecting the lives of the people, especially if coming from a preindustrial economy.

Urbanisation produces changes in lifestyle as a result of being exposed to the westernised lifestyles exemplified by the urban areas: “Moreover, economic growth alters the structure of the labour force in urban areas characterised by increased female participation with important consequences for the family diet” (Pingali and Khwaja, 2004, p. 3). This also highlights the gender roles attributed to the process of food preparation and production. In agreement that urbanisation has resulted in a change of diets and cultures of food consumption amongst many black people, Tsholekile cites Popkins (1999) and Vorster et al (2000) when saying that due to urbanization diets are accelerated (people are indulging in more fast foods and ready-made foods), physical inactivity as well as access to tobacco products and high fat foods increases and these are all risk factors of NCDs. There is a distinct difference between the diets of the rural and the urban populations; Popkin (1999) and Kearney (2010) use the term “nutrition transition” to refer to this shift from rural to urban diets: “The concept of the nutrition transition focuses on large shifts in the structure of diet” (Popkins, 1999, p.1902). Pingali and Khwaja (2004) identify a two-phase theory of diet transition in which the first

stage is what they call “income-induced diet diversification”, in which “consumers move away from inferior goods to superior foods and substitute some traditional staples, especially rice”.

In their article, Viljoen, Botha and Boonzaaier (2005) touch on consumption patterns in developing countries and mention that it “shows a tendency towards an increased consumption of saturated fat, sugar and refined foods – with a resultant lower fibre intake”. Tsholekile (2007), in agreement, observed or identified similar consumption patterns. By providing the diets of rural South African people in contrast to the urban South African people; Tsholekile, referencing Steyn et al (2001), concluded that studies have shown that rural dwellers diets are low in fat and sugar but high in carbohydrates and fibre. This clear contrast is able to inform the assumption that not only are diets subject to change as a result of urbanisation, but attitudes towards food changes as well.

When speaking on changing attitudes towards food, I am talking about the social and cultural values attached to certain food systems and how they may then influence the way that people eat. The transition towards a more capitalist and industrial economy allowed for the wider availability of different types of food and the lower costs of these foods, as a result of people are spoiled for choice (Kearney, 2010, p.2794); also, with the availability of choice coupled with higher incomes, people have developed new habits and tastes around food (Seto and Ramankutty, 2016, p.943). Puoane et al’s (2006) study spoke on how people who have previously been deprived of a variety of foods tend to overindulge and enjoy in it as much as possible when given the opportunity as way of showing their improved economic standing. Here, the consumption of meat on a daily is associated with a high economic status as well (Puoane et al.; 2006). This shows how food has been turned into a social commodity and is no longer just consumed as a form of nutrition; people are able to distinguish between foods they associate with poverty and food they associate with affluence (Weissner, 1996, p.6).

The example given from the study of Puoane et al (2006) is not necessarily a universal representation of the relationship between food and status, but rather just a brief illustration of how the relationship can be manifested. The moral of the story is that the attitudes people hold towards certain types of food largely influences the way in which they choose to consume it. Such choices can sometimes impact negatively on their health.

Non-communicable diseases present themselves as one of the leading health problems to come out of industrialised countries due to the increasing demographic transition and lifestyle

modifications (Nissenen, Berrios & Puska, 2001, p.963). The modifications in the lifestyles and structure of the diets of South African people, resulted in the increase of nutrition-related diseases. Mayosi et al (2009) identify the concentration of these non-communicable diseases amongst lower-income urban populations, however not limited to them, as they have also identified an increase in the prevalence of hypertension and obesity with an increase in wealth. Non-communicable diseases are defined as diseases that cannot be passed on to others (Tsholekile, 2007, p.iii); these include, but are not limited to, hypertension, diabetes, obesity, respiratory diseases, gout, etc. According to the World Health Organisation (2016) stats, about 44% of deaths in South Africa in 2016 were caused by non-communicable diseases. The high prevalence of NCD's in industrialised countries can be attributed to the nutrition transition. Considering the fact that people's health behaviour is affected by their attitudes towards food and that these socially and culturally informed attitudes towards are not always health conscious attitudes.

Globalisation on food consumption

Pingali and Khwaja (2004) identify the second stage in the transition of diets being the globalisation of food systems. Kearney (2010) mentioned how, because of urbanisation, there With unhealthy food outlets available in abundance as well as unhealthier food being made available cheaper than the healthy, although not directly, these big corporations are implicit in influencing people's food related health behaviour. is a wider variety of a food choice available; however, factors of globalisation largely contributed to these different tastes and habits that are acquired. Traill's (1997) definition of globalisation is as follows "It implies a degree of purposive functional integration among geographically dispersed activities". In other words, globalisation is the process of integrating different cultures' activities in different parts of the world, with no limit as to how and when these cultures get integrated. Globalisation exists in food spaces as well; our direct or indirect contact with other culture's food systems may influence our own food structure. The nutrition transition discussed by Popkin (1999), Kearney (2010), Tsholekile (2007), Popkins (1999), Vorster et al (2000) and Viljoen, Botha and Boonzaaier (2005) talks about the shift from a rural to an urban diet, but an urban/western diet is not just comprised of one culture; it has many integrated culture's foods.

With this being said, it seems very fitting to note that Oosterveer, (2006) defines food consumption in a globalised context as a collection of contextual and evolving social

practices where food no longer merely serves as sustenance but also a way to relate to other people in social, cultural and political terms. Take the mere pizza for example; a household name in many parts of the world which has become the staple food for many events and is easily purchased anywhere. Originally this dish is of Italian origin. The integration of foreign cultures with our own is often an unconscious project; we adopt different cultures with such ease. “Global food provision signifies the presence of more and more different food items on supermarket shelves, each with their own product and production characteristics and produced in the most exotic locations, forcing consumers to permanently make choices (Warde, 1997; Ooosterveer, 2006, p.465).

The way we are influenced and coerced into buying and consuming these products of globalisation is also an important factor in consideration of attitudes around food. “The main issue in the globalisation debate from the consumer market perspective is the extent to which consumer demands and preferences are converging internationally” (Traill, 1997, p.391). Pingali and Khwaja (2004) mention that younger generations are very influenced by new foods that have been introduced to them by advertising campaigns, especially if directed towards their specific market. The way food is often advertised to us plays a huge role in how we perceive these foods and how we then choose to consume them- thus affecting consumer demand and preferences. Multinational corporations have played a huge role in selling the ease and convenience of fast foods, thus heavily affecting the diet of the urban people. Capitalising on the fact that food consumption is status-driven as well as the fact that many people simply do not possess the time to prepare meals, an alternative is marketed to the consumer. Pingali and Khwaja (2004) identify that because of a high economic female participation rate, families move towards the tendency of the frequent consumption of ready-made meals or food that cut the preparation time of traditional dishes. Traill (1997) mentions how advertising of certain foods require the cross-sectional study of people’s food related lifestyles, the attitudes that they hold towards food and this ultimately determines whether food is priced and advertised as luxury or as a basic need.

On further discussion about multinational corporations’ implicitness in the nutrition transition that South Africa has been experiencing, Igumbor et al (2012) look at how they have contributed to changing markets through controlling the availability, affordability and acceptability of food. Food has generally been made available by increasing the presence of big supermarkets which generally gives the consumer an endless amount of choices and

agency, from price to quality. Because of the wider availability of food, the prices of food subsequently became lower as well, however healthier food typically cost 10% to 60% more than the unhealthy food (Igumbor et al, 2012, p.4). With unhealthy food outlets available in abundance as well as unhealthier food being made available cheaper than the healthy food, although not directly, these big corporations are implicit in influencing people's food related health behaviour.

Igumbor et al (2012) mention how there were about 161 McDonalds fast food outlets in South Africa in 2012, about 95% of spazas in South Africa sell Coca-Cola products and that KFC is found in almost every neighbourhood. These are only a few of the widely available, and popular, fast foods around South Africa, controlled by these big corporations. These fast foods have replaced staple foods in many South African Households. Street food, also widely available makes up to 40% of the diet of urban South Africans (Steyn and Labadarios, 2011, p.462). Street food literally refers to the foods sold at informal trading zones on the street. Very accessible, however energy-dense, high sugar, high fat, very unhealthy food is often sold by these street food vendors (Hill et al, 2016, p.25).

Theoretical explorations

Bourdieu's (1984) book titled "Distinction: A social Critique of the Judgement of Taste" was my entry point into this topic of food and choice. Bourdieu attempts to explain social class within a capitalist system and how this may then influence how we experience 'taste'.

Bourdieu identifies three contributing factors to making social class: economic capital, social capital and cultural capital. Trying to explain these concepts in my own words; economic capital refers to the amount of economic power an individual or a group has within society; social capital refers to the relationships one might have that gives one an advantage in life, for example if your parents are both working in the entertainment industry, you already have an advantage above anyone else to get into the very same industry as well. Cultural capital refers to our aesthetic tastes that we are taught by the cultures around us which posit us into a certain social class in life. My initial interest in Bourdieu was focused on cultural capital in relation to food, and how social class is then reproduced through food production and consumption.

Bourdieu (1984) theorises that the aesthetic tastes and preferences that we have come to enjoy are subconsciously acquired through our upbringing and through education; we are predisposed to a certain aesthetic taste because of our social origins and exposure. Because of

this, Bourdieu states that cultural capital then provides us with class distinctions; different social classes will then experience and enjoy different aesthetic tastes. We may not always be aware of the fact that we are making class-marking decisions, as these decisions and judgements we make have become a part of our identity. Bourdieu defines this as ‘habitus’ - the habits that we pick up from either our environments or habits that we are taught. The habits that we have internalised unconsciously are what will distinguish your social standing from the next person.

If we were to consider food consumption along the lines of Bourdieu’s theory of cultural capital, it is fair to mention that there is a distinct class difference recognised between someone who enjoys and appreciates sushi for lunch and someone who goes to the local fishery for a fish parcel. These two people may not even be aware that they are making class-marking decisions; they are just enjoying a meal. “A work of art has meaning and interest only for someone who possesses the cultural competence, that is the code, into which it is encoded” (Bourdieu, 1984). What this refers to is that we will only enjoy something if we have been culturally predisposed to the specific taste.

This is one of the most popular ways of looking at food consumption in anthropology, but what I am trying to emphasize here in my research is that I am not arguing that food taste is determined only by cultural upbringing, but that there is more that shapes people’s consumption decisions. A lot of our consumption decisions have to do with the industrial world we live in which forces you to eat a certain way, thus destabilising this idea of our habitus being formed through our class predispositions only.

If one would consider food consumption in South African urban populations from Bourdieu’s theory of taste, one would assume people from wealthier backgrounds would have finer and healthier taste in food compared to the lower income households. Cultural capital then becomes a very useful tool within the capitalist system as this could possibly lead to economic capital. If we consider the fact that food has become a status symbol in many South African’s homes, it is important to then note that many people use food as a way to prove cultural capital. Puoane et al’s (2006) spoke about how, because of previous deprivation to certain types of foods, financially I assume, people tend to overindulge and enjoy in it as much as possible when given the opportunity as way of showing their improved economic standing and these multinational corporations capitalise on this. We can see how these huge supermarket chains advertise the best specials on groceries and items of luxury during the

festive season because they know that many South African households tend to engage in conspicuous expenditure all in an attempt to prove good economic standing in society. What this shows is that a different or better aesthetic taste can be acquired later in life as well, through education or acculturation. What we need to understand is that the habitus itself is not permanent, is not static. There are so many factors, in the industrialised world, that could influence the habitus of an individual when it comes to food. Commercialisation of food, marketisation of food and how these things entice people to eat more, but also to eat certain types of food, but then there are also the busy lives of the industrialised women who are forced to adjust a new way of eating to accommodate their busy lives. What I am trying to argue is that Bourdieu, initially, was my entry point to this topic, and although I am finding Bourdieu to be quite helpful in many ways it became very clear as I was engaging with my research that cultural capital was a limiting and incomplete way of theorising the diets of the women I had researched. This also does not mean that I am completely disregarding cultural taste as having an effect on the way people eat, because as much as factors of globalisation and industrialisation destabilises our habitus, it does not completely erase it. I am rather looking at how people then navigate between cultural taste and the global trends in their food choices.

Chapter 4: Findings

Urbanisation and globalisation on Food Consumption

One of the main themes picked up during my time in the field is the effects that urbanisation has had on the lives and lifestyles of the people involved in my research. When I'm speaking urbanisation I am referring to both factors of urbanisation that A Dictionary of World History (2000) mentions in its definition; that urbanisation is the process by which the population of an urban area increases and also the process of a rural area losing its rural character and way of life. Urbanisation has affected both the people who have migrated from rural areas as well as those who happened to live in a generally growing and industrialising economy of South Africa. Diets have formed a part of the lifestyle changes that have taken place as a result of this urbanisation.

It was the on the 4th June, as I make my way to Sis C's house this specific evening, it took me 15 minutes to reach the Upington 26 area where her house took stand... 5 rooms- although very small was the place Sis C has made into a home with her two children and one dog. White leather couches and accents of pink greet you as you walk into the house, the white however has since turned a little dull due to years of wearing I assumed. "*gooi gou vir Khanyi goed koeldrank daar*" [pour some cooldrink for Khanyi] she requested her eldest, as she signalled I sit down on the bigger one of the couches that rested at the doorway right as you walk in. she belted a heavy sigh as she placed her handbag down on the floor next to the single white couch she sat down on. Slouching for a minute then sitting right up to look at me with rings around her eyes, I could tell she had been tired. The early mornings, late nights and employment woes were showing on her face. She smiled and asked me what I felt like drinking as her eldest had just called from the kitchen that there was no more cooldrink left. With a little hesitation I answered "*enige iets wat Mancie wil drink*" [anything you want to drink] and she replied "*whooo, ons is mos hoeka nie koeldrank mense nie. Vat gou die geld en dan gaan koop jy n brutal fruit Court daar en dan koop jy n castle lite vir ons twee, is mos reg ne?*" [whooo, we aren't cooldrink people anyway. Take this money and go and buy a brutal fruit court and a castle lite for the two of us, is that right?] she was talking to a cousin of mine who had accompanied me to my fieldsite for the day, he took the money and went as requested. About 30 minutes later he came back and Sis C was ready to start the interview, each with a drink in their hand. "*Gaan koop gou brood, ek sal, al isit daai lewer maak laat*

julle kan eet” [go and buy bread quickly, I’ll probably make that liver so that you can eat], she instructed her children. “*ekti nog lus om te kook vandag nie*” [I am not in the mood to cook today].

What I had observed with Sis C, was not an isolated event, but rather a re-occurring theme during the course of my research. Fatigue and lack of energy was very common in the lives of these working women. Their lives centre around working 8 hour-long days to provide for their families, very different to what they had experienced growing up- indicative of the changes in the economic climate over the years. All of these women, except for Sis D who owned her own business, were working government jobs. This employment structure presents a great shift from the lives that these women had grown up experiencing, as their households usually had one employed relative, which was the man in the house; even then, the work opportunities for many black people was migrant-, unskilled labour. A lack of education greatly disadvantaged the black person in terms of employment. Sis E mentioned that their Grandfather was the only one in the household in charge of the finances and the buying of groceries; this was the reality in the households of Sis B and Sis D as well. With men being the ones at the forefront of the finances and provision of food, women were given domesticated roles; that is looking after the children and preparing of food in the households.

Like Pingali and Khwaja (2004) have mentioned, there has been an increased female participation in the economy, however, urbanisation and the vast opportunities of employment for the female not only influenced the family structure, but also the lifestyles of the household. Although working 8-hour long days is not exceptional, it is however the added responsibilities that women have inherited by virtue of being a woman that influenced the way in which they responded to the world. As I have mentioned before, the duties around food preparation and production in the household often reproduces patriarchal gender roles, as it is often the women in the household who is responsible for the family’s food consumption on a day-to-day basis. The responsibilities of the women seemed to increase with urbanisation. Despite the fact that these women have to now actively participate in the economy on a daily basis, they still have to fulfil their domestic roles every day. All of these women that I have interviewed describe the preparation of the daily meals as primarily being their responsibility, despite the fact that Sis B, Sis E and Sis A are married and all 5 of these women have children old enough to assist them. With the time-consuming and labour-intensive jobs each of these ladies worked, they knew that when they get back from work

they still had the duty of making sure their families are fed thus affecting the way in which these women have chosen to reconstruct their diets in a way that will accommodate their busy lives- thus resulting in a gradual nutrition transition which then affects the whole family.

Kan ek maar se vandag, die lewe is vining. Sien jy? Ons is besig. [Can I say, Today's life is fast, you see? We are busy.] We don't have time for cooking food the whole day and doing all those things. If you get the chance you cook one day... one day you cook- Sis D

Sitting in Sis D's shop one afternoon, I listen carefully to how the women had decided to carry on a conversation I had started around food and urbanisation. A young lady, probably in her early 30s, who had just walked into the shop with her elderly mother overheard the conversation and eagerly added to the conversation by saying that she doesn't have time to cook either, she also stays alone anyway, so she does not have the pressure to cook every day; a consensus was reached and more talk around "we are too busy to cook" continued... This led me to my next line of interest, how the family structure then influences the way in which people decide to eat.

I grew up in like a extended family whereby there's a grandma, grandfather... grandmother and my mother- there was no... my biological father was not like part of the family I grew up with my maternal family... So, we were like 9 children of my mother staying in the same house with the maternal family. -Susan

Ekt in n familie geraak waar ons 13 in die huis was... 13 in een huis in. is mos nou die kinders en die sisters se kinderse en almal het mos nou in die huis gebly destyds. -Albertina

We grow up as a big family... uhm, in a one single room, raised up with a single mother. We were about 10. -Eunice

From what I could gather from these women describing their families to me, on different occasions, it was evident that urbanisation has caused a drastic change to the structure of the basic family unit of the black family. There was a gradual shift from families occupying as little as a one roomed house with extended family members and children (as demonstrated in the transcripts above), to better and bigger homesteads and a significant reduction in the number of children reproduced. Because of the high cost of living that urbanisation brought

along with it, families have gotten smaller. People are no longer having as many children as they could back in the day, thus keeping the nuclear family unit very small as compared to a pre-industrial era. Because families were so big and households were filled, the pressure to prepare meals to feed everyone was higher, thus the ritualised eating that was then formed in response. The smaller the household seemed to get the less of a traditional consumption pattern it seemed to follow- the sentiments for smaller households differ now. Sis D, in response to this said;

Ons is nie meer klomp in n huis nie. Like in the olden days. So, you can even like op n sondag decide nee man elke mens moet net... jy eet somer nou eiers en brood. It's not an issue want daar's nie klomp mense nie. Now in the olden days there was uncles and aunts en wie goed in die huis so daar moet gekook word. Now these days everybody's got his own house, you see so we don't eat like that anymore.

[we are no longer a lot of people in the house like in the olden days. So, you can even have everyone eating bread and eggs n a Sunday. Its not an issue, because there aren't a lot of people. Now in the olden days there was uncles and aunts and everyone in the house, so one has to cook. Now these days everybody's got his own house, you see so we don't eat like that anymore.]

Traditional diets

What was a traditional consumption pattern then? What did traditional diets look like? What was the attitudes held around food consumption around this specific diet? There is so much talk in the literature of nutrition transition and the shift from a rural to an urban diet, but I needed to theorise a traditional diet from the perspectives of my participants. I had initiated conversations around the types of food and the food consumption patterns they had experienced growing up and with a nostalgic excitement these women took pleasure in telling me about the types of food they had mostly long forgotten about. The ladies all seemed to have a similar background in the types of food they had grown up with; *umnqusho*, *umphokoqo*, *amageu*, soft porridge, home-baked bread, *nconco*, etc., all food that is considered a part of the traditional Xhosa diet. Not to forget the different types of meat- it was evident that meat was considered a luxury item to have, but that's a conversation to be had later on in my writing. The staple foods described here is the food that is considered suitable for consumption during the week. Upon analysing the weekly diets of the women, it is fair to say that these diets were starch-heavy diets. Vegetables were barely consumed

during the week; it was considered a Sunday luxury as well. There was a clear distinction in the attitudes held between the food consumed during the week and food consumed on weekends, on Sunday in particular, introducing a form of ritualised eating in many households.

As I have mentioned before, the ritualised eating had a lot to do with the way in which the families were structured back when these ladies had grown up. The types of food that was mentioned in their traditional weekly diets was mainly starch heavy food, and upon further inquiry about that I realised that making sure a family of 10 is full everyday was more important than making sure they are healthy. I had remembered how in my own memory of growing up with my grandmother, she would make *amageu* in a big bucket every week because she knew that all her grandkids would be staying over. We had enjoyed filling our big enamel cups with sweet *mageu* and bread on the side, filling you up all day until supper time.

The Sunday plate was very important in many black South African households, it was the most anticipated meal of the week. The Sunday meal was the closest to what resembles a 'healthy' or 'balanced' diet (this is healthy according to the biomedical definition of healthy). "7 colours" is what a Sunday meal is referred to locally, not only referring to the literal colours that were on the plate, but really a metaphor for the different salads, vegetables and meat that made up a Sunday plate. Traditionally, this is how 'status eating' has made its way into food consumption of many black people. The most important part of a Sunday meal was the meat that was to be served; it is important to consider that the type of meat that was served was a marker of class. "*Jhu! Hulle eet pap en derms en gwarras op n sondag*" [*they're eating tripe on a Sunday*] Sis A comically re-enacted a common reaction in her community at the time; *derms en gwarras* were something to laugh about, it was something to be ashamed of because there was a certain type of status attached to eating this type of meat on a Sunday. Whereas there was no real class distinction in food eaten during the week, it is on Sunday, especially, when a distinction is made between status food and poverty food. There was a certain type of status to be upheld through the food that one eats on a Sunday, only the best food was reserved for Sunday dinners and these include the best type of meat and all your salads that you can possibly fit on to one plate. *The meat, the rice, the cabbage, the potatoes, the pumpkin and the beetroot*, Sis C nostalgically bragged. *Jelly en pudding was baie belangrik gewees daai jare op n sondag... daai was elke sondag. Jelly en pudding. You*

can't make a mistake. [Jelly and pudding were very important those years on a Sunday... that was every Sunday. You can't make a mistake]. Sis D and her colleague remember their pudding with the different coloured cakes that their mothers used to bake religiously every Sunday. It was a feast, akin to Christmas time in a black household where the same sentiment around elaborate meals are prepared as a way of status sharing in your community. My mother, Sis A could never stop talking about how Mam' Ndlovu*, who lived next to the church, would send her child to fetch their Sunday plate from home and eat in the church if the service took a minute too long. Mam' Ndlovu and her family were considerably well off, because as she could remember they always had the best salads and meat in their Sunday plate. There was no logical reason for her to actually get her child to bring her Sunday plate to church other than to brag about their food. My mother laughed hysterically as she explained the weight a Sunday plate carried when it came to status.

Modern diets

A lot has changed since the urbanisation and industrialisation of the South African people; staple foods have changed; status foods have changed and attitudes and traditions around food has definitely changed. Food consumption patterns differed severely on the weekend to the diet during the week. Weekdays, these women still felt the obligation to cook, at most, for their families- although sometimes fast, easy meals were on the menu, whereas weekends was a time to rest from the busy week, and cooking was not on the menu. My time in Paballelo has definitely introduced me to the consumption lifestyles of the women, as well as the different consumption traditions they have formed within their individual households as well as within the community.

I got reminded of the Saturday braais in King Street that happen religiously, making a part of the consumption rituals of many households. King street, the main street in Paballelo, was particularly busy this Saturday morning. Loud singing could be heard from the community hall (right across from where we had placed our stand) which had been occupied by the Anglican church for their annual church conference. The many cars passing on this main road added to the noise as well. From a distance one could hear the sound of house music blasting from the shisanyama down the road. As I have mentioned, King street was particularly busy which is why it made the perfect location for the women from St. Paul's Methodist church to set up their braai stand.

Braaiing on a Saturday morning in King street has long since become an easy way of earning money for a lot of women in Paballelo- it, however, also made itself into the consumption traditions of many families. Women would be standing in rows in king street offering their braai meals, with no disappointments as people usually flock in numbers to buy these meals. The women from the St. Paul's Methodist church thought this a good opportunity to raise funds for their respective organisation.

Sis A had been a part of this women's organisation a couple of years now and this activity was no stranger to her. She, and some women from church had prepared their salads the night before and brought them in two big Tupperware bowls ready to serve- green bean salad in a purple Tupperware bowl with a butter-bean salad made in a navy-blue bucket, slightly bigger. Pap was prepared in the morning by one of the women and was still hot in the big silver pot when they arrived with it. The dough for the 'roosterbrood' was also kneaded the night before. The meat had been marinated as well and was ready to hit the fire. Men from the church had volunteered to help the women out with braaiing the meat and the 'roosterbrood'.

As expected, people start flocking to the stand with many of the people having pre-ordered their food and just came for collection. It was month-end weekend, meaning a lot of people had been paid that weekend and were willing to buy. I helped out in the dishing up of food as people were buying for a while. With a choice in butter bean and green bean salad or a chakalaka salad and pap or roosterbrood with their beef chops, it was interesting to see people's choices. Many of the customers were women and their orders included two to six braai plates to feed their whole families, I gathered. "*die kinders moet ook eet, vir vanand sommer ook*" [the children also have to eat, for tonight as well] one of the women explained. Sis A, herself took 4 plates, for her as well as her 3 kids at home. I had listened in on many of the conversations these women were having while purchasing their braai plates and many of these women explained that they do not cook on Saturdays and that these braais come in handy.



I had spent about a month or more in my field site and this observation was just a snip-it of what I identified as a 'pay-day diet' or a 'weekend-diet', which I have identified as being a part of the new consumption traditions that have women have adapted with increasing urbanisation. that all of my participants seemed to not only understand but put in practice. What I had observed was really the effects of urbanisation on the lifestyle and food consumption choices of these women- Sis A was, but one of them. The cultures around food consumption that these women have internalised really came as a result of adapting to their faster and busier lifestyles. The braais were only a part of the Pay-day and weekend diets of these women. A whole lot of fast foods made their way on to the list

KFC en dan koop ons hierso by Melksalon, koop on sook kos... en daarso by Chicken City nou en dan... en die pizzas. Is die kinders nie hoe nie, dan wil hulle by Steers ook vir hulle burgers gaan koop. Nou is al daai goed wat ek weet ek moet hulle nie eeti maar is nou so.

[KFC and then we buy food from Melksalon as well... and there from Chicken City every now and then... and the pizzas. The children would want to buy burgers from Steers too when they feel like it. Now, it's all those things that I know I should not eat, but it is the way it is.]

What Sis B had said correctly depicts the attitudes held around fast foods; many know that they are not healthy or ideal, but the tradition of not cooking on a weekend or pay day runs deep. If not these fast foods, then bread-based meals become the staple for weekends. This shows a great shift from the infamous Sunday plate that used to make up traditional diets, and how fast foods have replaced the Sunday plate as a status food. Sis A and Sis C were the only

two who claimed to still uphold the Sunday meal tradition, despite the rest of their diets changing.

We cannot ignore how globalisation has perpetuated this idea of the fast food becoming a part of the staples of the family consumption. We also cannot ignore the fact that majority of the fast foods available are not for the healthy-seeking. The KFCs and the McDonalds and Steers, etc. are advertised to the people as a form of luxury, but also a necessity and the consumption of these foods.

Although the diets of these people have been changed over the years, one thing that has remained consistent is their high regard for meat. The type of meat that you ate and the way in which you consumed had a status attached to it. Someone made a joke once saying the smell of KFC when you open it in taxi is that of wealth, and as much as it was funny, there was some truth attached to it. Meat, that was previously a Sunday or pay-day luxury in their homes growing up, now became a staple food for everyday consumption. Being able to afford to eat meat everyday shows an improved economic standing. Whether it was elaborate meals or quick fix meals every day. The unfortunate part of having meat as a staple food, is that it is often linked to unhealthy preparation styles. With the modernisation of meals, however, even the preparation of meat over the years had changed. Sis E mentioned how meat back in the day was enjoyed with salt and white pepper and potatoes, but now there's a whole lot of spices and sauces involved in the preparation process meaning the nutritional properties of meat has changed as well over the years.



The importance of meat is not only shown in everyday consumptions, but also shown in the elaborate consumption rituals such as Christmas time in the black household and in traditional ceremonies. Puoane et al's (2006) study spoke on how people who have previously been deprived of a variety of foods tend to overindulge and enjoy in it as much as possible when given the opportunity as way of showing their improved economic standing and also how the consumption of meat on a daily is associated with a high economic status as well. Families would spend so much money on buying only the best food and inviting people over to come and enjoy the meals along with them. Although these gatherings are social, they are also a way of status-building, because if your traditional ceremony has the best meat and in abundance, you will be the talk of the town for a long time after that.

The point of all of this is to show the nutrition transition from when these ladies were growing up to how they eat now. There has been a considerable shift from a diet that was starch heavy to a fatter and protein heavy diet. We can see how people have moved from having bread and pap as staples to meat and fast foods making the staple diets- giving birth to a whole other possibility of non-communicable diseases.

Health knowledge and attitudes

In my analysis of my conversations with these women it was evident that all of them are very informed about their health, about what healthy food is and also non-communicable diseases related to food consumption. It is however, also evident that knowledge does not equate to health attitudes, because many still indulge in unhealthy consumption practices even with all the knowledge they hold. They are well aware of non-communicable diseases related to food, but it does not always affect the way that they eat. These women were quick to point out what they thought to be healthy meals and all of them have attempted or still do attempt at a healthy meal every now and then when they do get a chance to make them, however unhealthy habits still jump out often. Because quick fix meals have become a major part of these women's diets, a healthy lifestyle becomes an ideal rather than a reality in their lives.

Generational choices are a problem. A lot of people are bad in their health because you were taught to eat bad and you have to redo your taste-buds, and it's not a generational curse, but a generational choice. Traditional habits and attitudes formed around certain foods also influence the way that these women choose their food now. Being exposed to a certain type of food growing up could influence how you choose to consume it now, and your attitudes around that food. This is where one could clearly contrast between the cultural taste Bourdieu (1984) speaks of and tastes influenced by the industrial world we live in.

I will have big dishes of that umngqusho and this and this, but smallanyana dishes of the modernised food. I'm still the traditional girl.

That was Sis E telling me about how she still very much prefers her traditional diet over her modern dishes and would have *umnqusho* or *umphokoqo* in bigger quantities any day over any modern food. Sis E does work with dieticians and is well aware of healthier alternatives to what she is used to, but her individual preference takes precedence.

ekt al by baie planne in gegaan- is n uitdaging vir ... my want elke keer as ek kom kry, ek lus nou alweer daai ou goete [laugh] verstaan jy? Die goete wat ek mee groot geraak het, party keer is dit so ongesond, dan's dit ook maar nie goed vir jou gesondheid nie, sien jy? So is vir my, is n groot uitdaging gewees maar ons kan mos nou niks aan die verlede maar nou doen nie.

[I have attempted many plans- it is a challenge for me, because every time I would crave those things [laugh] you understand? Those things that I grew up with,

sometimes it is so unhealthy and then it is not good for your health, you see? So, for me, it was a big challenge, but we can't do anything about the past now.]

Sis B also mentions how she has tried numerous diets on numerous occasions, but she just cannot stop eating the unhealthy food that she grew up on. She has been preconditioned into a certain type of consumption lifestyle and now she keeps making these dietary decisions out of habit, despite the fact that she knows better. These unhealthy habits follow them into their adult lives. It took Sis C getting diagnosed with cholesterol and high blood pressure for her to attempt at a healthier lifestyle, and Sis D basically laughed and said that she would only consider eating healthy if a doctor prescribed it due to health issues, same with Sis E. *You'll see people doing it, I want to do it, but it's still not me;* she says.

What these women speak about above perfectly shows how habitus, as defined by Bourdieu (1984) has an influence on the way that people eat. There is a certain appreciation these women have for the food they grew up with, an appreciation that someone who grew up in different social class would not appreciate the same way. This also shows that as much as factors of globalisation and industrialisation destabilises our habitus, it does not completely erase it. These women, as I have discussed previously, navigate between their embodied cultural tastes as well as their industrialised and globalised tastes. Although we would like to pin down the decisions people make on their health as being attached to a certain class Bourdieu's theory basically claims that the higher you go on the social hierarchy and the more educated you are, the better your taste gets, however, when you consider the relationships between health, food and class encountered in my research, you will see that this is not always the case. What I am trying to say is that when it comes to food choices, there is more that shapes people's decisions than just concerns about health. Health decisions are shaped by issues that are bigger than the cultural tastes

I Had initially assumed that women are all generally aware of their body image and that this would influence the way that they eat, but I was wrong. The literature speaks a lot about the bigger body ideal of the black women and how the more westernised women has a much smaller body Ideal, and that these may affect the way in which people choose to consume their food. Not one of these women were actually concerned about the way that their bodies looked, and none of them actually had an ideal far from what they already looked like. To them, as long as you look presentable in any size

Affordability vs accessibility

Although, in a more industrialised and urbanised South Africa, there has been more availability of food choices, there has also been issues around accessibility due to affordability. This was not the case for all of my participants, however about half of them mentioned affordability as a factor influencing their food consumption choices. Healthier food is considered more expensive than healthier choices of food, therefore hindering the accessibility.

I had once joined Sis A and Sis C, on different occasions, on a shopping trip to Pick n Pay, and I remember distinctly how both of these ladies aimed at grabbing the items that are on sale first- and Pick n Pay always seemed to have a sale of vegetables. Sis C preferred going after work, because she was aware of the fact that Pick n Pay has a trolley after 4 o' clock everyday in which they sell a mix of vegetables for R7 as a daily clearance sale. This was these ladies' way of affording the healthy lifestyle that they want to live. Because all of these women are in good economic standing, because they are all middle-class women with a steady income every month you would think that affordability id not an issue when it came to buying the healthy stuff, but Sis E explained it so nicely when she said;

I think we also realised the money, because those years the money didn't have value for us. If you've got money you just buy food, just buy clothes, we didn't care about saving and this and this and this, because we were following what is the tradition of the community. But now as we grow, we are educated..., so we [inaudible] ukuthi I have to do my own things in my house now. I have to save... That food now we calculate that this is for the whole week. Now we are modernised, we want to save. We must save money. We're more concentrated now on houses. You see? You must have a nice house, furniture, a car- so we save for those things, education. So, food is important but we [inaudible] on the nutritious food, and how to eat and when to eat what and what.

The financial responsibilities of the family has grown with an increased financial status, and in this modernised world, saving up for your children's education, your house and car, etc. is just as important as the food that you have to buy, so not much money can be spent on food alone when there are other responsibilities too.

The family diet can be viewed as the window to the individual diet of the woman, as the one usually influences the other. Since the woman usually decides what is eaten in the household, the preferences and tastes of the family also determine what food the woman will prepare.

When asked about their individual diets, all of these women would refer to their family diets instead; what the family likes, what the family prefers to eat, what the family. Affordability, in this case would then be dependent on the diet of the rest of the family, because if you are the only one eating healthy in your household then it does become expensive to maintain two diets in one household.

Ek kan nie op n streng dieet plan gaan en se nou “tools down” ek koop die en die en die nie, want ek is die enigste een in die huis wat wil gesond eet. So dit afekteer my klaar want ek moet in elk gevaal nou klomp ongesonde goed gaan kook want dit is goedkoper as gesonde goed. Sien? Dit is ver goedkoper as gesonde goed, so nou moet ek nou geld afknyp van my familie, my gesin se geld af as ek nou wil gesond lewe want nog n ekstra uitgawe is- Sis B

[I can't go on a strict diet plan and say “tools down” I'm buying this and this and this, because I am the only one in the household who wants to eat healthy. So, it affects me already because I have to go and cook all this unhealthy food anyway because it is cheaper than the healthy food, you see? It is much cheaper than the healthier stuff, so now I must pinch from the family's finances if I want a healthy lifestyle which will be another extra expense.]

Healthier alternatives are considered more expensive than the unhealthier alternatives, hindering the accessibility of healthy food to many unfortunates. Sis D mentions that she indulges in street food a lot, because not only is it accessible because of where her workplace is located, but it is also cheaper to buy. And when we look at the fast food shops that are available and affordable, we can see that the Melksalons and the Weekend braais in King Street and Chicken City's and KFCs, etc. all offer quick filling meals at really affordable prices, whereas you will probably have to go to Woolworths or Fruit and Veg City to buy healthier food that will be a little more pricier to buy. With unhealthy food outlets available in abundance as well as unhealthier food being made available cheaper than the healthy, although not directly, these big corporations are implicit in influencing people's food related health behaviour, thus showing the effects of globalisation on influencing food consumption.

that's the thing. That's the thing. Jyt nie altyd geld om dit wat jy graag wil he te kan koop nie. Greonte is nie altyd meer so goedkoop nie, kos is nie meer so goedkoop soos dit altyd gewees het nie, destyds nie. Kos is nie meer so goedkoop nie so jy moet jou rand bietjie baie moor gebruik- dis nou maar swak- Sis B

[that's the thing. You don't always have the money to buy that which you really want to buy. Vegetables are no longer as cheap as they used to be, food id no longer as cheap as it used to be. Food is not as cheap so you have to use your Rands a lot more- which is weak in any way.]

Chapter 5: Conclusion

Nutrition transition is an important concept used to think about the effects that industrialisation has had on the diets of the South African people. It was not only the structure of the diets that changed, but also the cultures and traditions around diets in my research, it was evident that the diets the women I researched had grown up on was very different to the diet that they have now come to know as adults living in an urbanised township in the Northern Cape. What Viljoen, Botha and Boonzaaier (2005) identified as an increased consumption of saturated fat, sugar and refined foods in urban areas, in contrast to Tsholekile (2007) observing the rural dwellers diets as being low in fat and sugar but high in carbohydrates and fibre is not far from what I had observed in my own research. The food that these women had grown up on were really starch heavy meals- meals that's primary function was to feed and fill the large families that these women grew up in. Fast forward now in their own families, slightly smaller units, the consumption patterns have generally changed towards an accelerated, high in fat and low in starch diets. Although a more industrialised lifestyle has resulted in a nutrition transition, I have also shown how some of these women still prefer to have the food that they have initially grown up with. These women are able to navigate between their cultural tastes (Bourdieu, 1984) and the tastes that they have acquired as an adaption to the industrialised lifestyle every day. This shows the complexities of food and lifestyle choices in the lives of these women. There is no one factor that influences the lifestyle choices that these women make, rather a variety of factors. This then brings me to explore the question of health knowledge as a factor and whether these influences health decisions related to food consumption.

When I refer to health knowledge, I refer to one being aware of one's current health conditions as well as being aware of the health implications of eating a certain way. My conversations with these women show that each one of them are very much knowledgeable when it comes to their health, it however does not always affect their lifestyle or the way that they eat. It is clear that there is no direct correlation between health knowledge and health behaviour. As I have mentioned, these women often navigate in between different diets and different tastes and although a healthy diet may be one, they navigate through at times, there is no real commitment shown towards it.

There has been an increased prevalence of Non-communicable diseases with an increase in urbanisation. I would like to attribute this to the changing lifestyles of the urban people. By

analysing the lifestyles of my participants as well as their attitudes towards health I could see how the prevalence of non-communicable diseases may be explained. As I have mentioned, there are many factors that influence the way in which people choose to consume their food, and health is usually not a priority when making these choices. In my research findings these women mentioned that they made food choices based on affordability, based on habitus, based on convenience, etc. and health was a factor, but not a big one. The lifestyles these women live are not always very health conscious and with health being put as an after-thought, this could really increase the chances of them getting non-communicable diseases. This behaviour shows risk factors for non-communicable diseases and also may actually offer an explanation for the high prevalence of non-communicable diseases amongst this demographic.

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