‘The whiteness of the Mediterranean Diet’ Overlooks Existing BIPOC Solutions

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Abstract

In an age of increased cultural awareness, Dr. Kate Garner Burt’s timely article about ‘The whiteness of the Mediterranean Diet’ builds a strong case for diversifying nutrition research. However, to truly improve cultural humility in the nutrition field and beget anti-racist dietary research, future explorations must move beyond mischaracterizations of existing dietary resources and give voice to other cultural models of healthy eating. This opinion piece will dig deeper into the assumptions presented by Dr. Burt and the existing Black, Indigenous, People of Color (BIPOC) solutions that have been overlooked.

We read with great interest the thoughtful article by Kate Gardner Burt about the whiteness of the Mediterranean diet (Burt, 2021). The author highlights a key inequity of nutrition research and communication -- that the history of nutrition research has been Eurocentric, biased, and whitewashed, and that other cultural diets have not received a proportionate amount of research dollars or acclaim.

Dr. Burt builds a solid case that “in order to better serve and include Black, Indigenous, and People of Color, dietary recommendations need to become as diverse as the US population” (Burt, 2021, p. 41). While there are decades of epidemiological and clinical research supporting the health benefits of a Mediterranean diet (likely due to the Euro-centric biases addressed throughout Dr. Burt’s article), it would be a mistake to interpret these findings as evidence that the Mediterranean Diet alone is the singular healthy eating pattern to prevent disease, or that one cultural diet is healthier than another.

If the author’s goal is to “to incorporate positive aspects of non-white cultures’ diets into dietary recommendations,” (Burt, 2021, p. 49) then it is unclear why the author chose to highlight Oldways’ Mediterranean Diet Pyramid, and yet obscure Oldways’ role in creating the Asian Heritage Diet Pyramid (1995), the Latin American Heritage Diet Pyramid (1996), and the African Heritage Diet Pyramid

(2011) (Oldways’ Timeline, n.d.). By overlooking the BIPOC-centered resources and solutions that already exist, the author fails to “explore differences in dietary habits equitably” (Burt, 2021, p. 48).

While the author raises important points about representation in nutrition research, there are a few mischaracterizations that need to be addressed. The author misrepresents Oldways’ Mediterranean Diet Pyramid by reducing it to a base of cereals alone, and suggests that beans and pulses are not recognized as daily Mediterranean diet staples due to their association with the Middle East and North Africa. However, looking at Oldways’ Mediterranean Diet Pyramid (Figure 1: Oldways’ Mediterranean Diet Pyramid), one can see that the base of the Pyramid is a depiction of lifestyle characteristics, followed by a base food layer filled with a combination of plant-based foods including fruits, vegetables, nuts, seeds, herbs, grains, pulses, and olive oil.

Numerous historical, anthropological, and epidemiological sources confirm that grain foods such as bulgur, couscous, barley rusks, breads, and pastas have a rich history throughout the Mediterranean (Martínez-González, 2017). However, the author does not provide evidence to support her claim that cassava/yuca (a tuber crop domesticated in Mesoamerica and Brazil,

Figure 1: Oldways' Mediterranean Diet Pyramid

more frequently utilized in African and Latin American cuisines (Brown, 2013)) and teff (a grain crop with a rich significance in Ethiopian cuisine (Board on Science and Technology for International Development, 1996)) are significant to the Mediterranean region. Further, because the Mediterranean Diet Pyramid is comprised of images of indigenous foods (rather than nutrients), it is not clear how the author came to the conclusion that the Mediterranean diet is based on nutritionism. Additionally, the author does not adequately acknowledge that not all people who claim a history to the Mediterranean diet benefit from white privilege given the diversity of the cultures surrounding the Mediterranean Sea. Rebuttals to the authors' interpretations of Ancel Keys' research and the Seven Countries Study are reported in-depth elsewhere (Pett, 2017). As nutrition research is not static, much has been learned since Keys' research and the Seven Countries Study.

Dr. Burt is spot on in her assessment that "the process by which the US creates the Dietary Guidelines for Americans (DGA) is, and has always been, political and obfuscated" (Burt, 2021, pp. 45-46). However, her suggestion that the US DGA communicate "a singular healthy eating pattern to prevent disease" (Burt, 2021, p. 46) is not an accurate representation of the DGA. Since at least 2010, the DGA have promoted a variety of healthy eating patterns (U.S. Department of Agriculture and U.S. Department of Health and Human Services, 2010). More recently, the 2020-2025 Dietary Guidelines for Americans explicitly focus on cultural diets, stating

that "customizing the Dietary Guidelines framework to reflect specific cultures and traditions is an important strategy to help communities across the country eat and enjoy a healthy dietary pattern," and that "relying on the expertise of professionals in nutrition and in specific cultural foodways can help people prepare foods healthfully while retaining heritage" (U.S. Department of Agriculture and U.S. Department of Health and Human Services, 2020, p. 27). While there is clearly much more work to be done on this front, denying any progress at all is counterproductive.

Dr. Burt's provocative and timely article is well poised to spark a shift in the academic community. However, to truly improve cultural humility in the nutrition field and beget anti-racist dietary research, future explorations must move beyond mischaracterizations of existing dietary resources and give voice to other cultural models of healthy eating.

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