



Abstract for: Reorganizing the neo-liberal food system: Evolution, Rebellion or Revolution?

Neoliberalism, foodscapes and child health

Neoliberalism has dovetailed changes in the food system within which obesity is historically situated. Against this backdrop, this paper explores the local food economy through the everyday lived experiences of working class parents of children with obesity, and experiences of local policymakers and implementers involved with enacting food-related obesity policy. The issue is what role can the grassroots have in policy processes that enable changes to foodscapes to promote health in disadvantaged communities.

It draws on the findings of PhD research, a qualitative policy analysis, that explored disconnects between the state and parents of children with obesity, including the relevance of class. The local state was used as the interface between parents as policy recipients, and the other policy actors. Critical theory including Marxism provided the theoretical framework.

Class tensions emerged through differences between foodscapes in affluent and disadvantaged areas, and within processes of gentrification. Foodscapes dominated by fast food outlets and alcohol promotions, performed a symbolic violence that served to keep working class fixed in place - in social gradient in child obesity. Food shops in affluent areas were described as '*not life threatening*' compared to deprived areas in which foods of poor nutritional quality were '*dumped...because they think the people who live there don't matter*'. Parents talked of the debilitating effects on the sense of wellbeing as well as health. Gentrification was changing the food economy including class based exclusion.

Responsibilised parents took '*ultimate responsibility*' for their childrens' food and health and criticised government that allows food companies to produce unhealthy foods. The local state, government, and food industry were believed to have shared interests: '*all about money*'. Fast food outlets had been allowed to saturate poor communities. Policymakers, while sympathetic with parents, described their lack of power in the planning processes. At the same time, cuts were made to services that parents identified as supportive.

Hegemonic processes in restructuring of the local state include privatisation of the food and obesity sectors of public health. Social enterprises and multinational companies provide public health nutrition, and participatory budgeting is used in the making of cuts.

There is a collective sense of community responsibility for child food and health. Despite intensification of work, mothers volunteer for example, in teaching children to cook. Parents angry and cynical about policy that prioritises profit above child health, believe they should be involved in informing food policy. Parents solutions include the removal of most fast food outlets, being replaced by culturally diverse healthy food outlets, mixed foodscape of local grocers, supermarkets and affordable healthy foods straight from the farm.

Parents advocated, grassroots, community level organisation as well as a top down approach to policy-making. However, a policymaker described democracy deficit, with lack of mechanism for lay expert involvement. Policy implementers described tools of governmentality as methods of parent involvement.

Class is relevant to food policy. It is argued that class needs to be brought back into policy discourse. Working class interests should link grassroots with the labour movement around a collective ethic of care that unifies and drives political change.