Food, Farming and Health in Ugandan Secondary Cities

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Akademisk avhandling

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Abstract

This research contributes to countering a large city research bias by focusing on the food, farming and health experiences of two secondary cities of Uganda: Mbale and Mbarara. It is not an apocalyptic story. Like anywhere in the world, for some residents things were going well; for others, less well. My research explores the varied geometries of advantage and disadvantage in diets, food security, and livelihood circumstances to shed light on why things were more secure for some than for others. I used multiple methods including a household survey, focus groups with local healthcare professionals, and in-depth interviews with varied city residents. A geographic perspective explored intersections of food, farming and health with aspects of identity (such as gender, class, tribe), and with place (the city itself, but also with rural areas, or other urban areas).

The starting point was the theorised food system, nutritional and epidemiologic transitions predicted to occur with urban development, often called nutrition transition theory. My research suggests caution with dominant models of how urban life shifts food and farming systems towards a food system and diet pattern focused around large retailer supermarkets, processed foods, fast foods, more meat, less agriculture, less movement. Nutrition transition theory postulates these changes causing a shift in epidemiology from infectious to non-infectious diseases in urban areas. Instead of the suggestion from nutrition transition theory, my work presents evidence of non-communicable disease (obesity, diabetes, hypertension) experience in Mbale and Mbarara’s residents, but without evidence of advanced change in food and farming systems. Findings revealed relatively low dietary diversities and common food insecurity. Diets remained predominantly traditional, as did the main food sources (traditional markets and neighbourhood shops), across diverse residents. The more food secure had regular salaried employment and strong relational links with rural farms and family, supporting work on multi-spatial livelihoods. This contrasts with earlier ideas of who farms the African city, or retains farming livelihoods. Most vulnerable to food insecurity and low diet diversity were those who were most dependent on purchasing all their food. In conclusion, this research suggests that food system, nutritional and epidemiologic transitions in Mbale and Mbarara may be less linked than previously thought, or linked in more complex ways. Other drivers of epidemiologic change are likely. Findings highlight the importance of local data and specific city investigations.

Keywords
Uganda, Africa, urban, nutrition transition, agriculture, health, food systems, dietary diversity, food insecurity, non-communicable disease, double burden malnutrition, secondary cities, feminist geography, intersectionality, mixed methods