

BETWEEN THE NUTRITIONAL AND THE POSSIBLE: DISCOURSES, RECIPES AND MEDICALIZATION IN ARGENTINIANS SOUP KITCHENS

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Abstract

During the 20th century, food was a central axis of the medicalization processes that spread to various areas of social life, formalizing the knowledge related to it from the consolidation of nutrition as a field of scientific knowledge. This implied that the actions linked to eating ceased to be connected to norms, guidelines, and values shared in the community and focused on a process of individualization of the choices and possible actions. In this way, eating is constituted as a problem under the responsibility of individuals, reduced to their wills and biographies, and organized differentially between ages, social classes, and genders. In the context of investigating community kitchens in the Buenos Aires province, using a qualitative approach and documentary technique, we analyzed the nutritional discourse and the concepts related to biomedical knowledge that appear in the recommendation manuals and recipes directed at dining halls and snack kitchens in Argentina. This not only accounts for the technical language but also for the dissemination of technical knowledge and the

trajectory that this process presents, establishing itself as new moral guidelines for action that are often restricted due to the lack of access to the necessary food to carry them out.

Keywords: communication policies, dietary guidelines, eating habits, food consumption, popular sectors, qualitative research.

1. Introduction

During the twentieth century, food was a central axis for the medicalization processes that extended to various areas of social life, formalizing the knowledge related to it from the consolidation of nutrition as a field of scientific knowledge. This meant that actions related to eating were increasingly focused on a process of individualization of choices and possible actions based on a bio-medical discourse that justified choices and practices. Thus, eating is constituted as a problem that remains under the responsibility of individuals, reduced to their particular wills and biographies and organized differentially between ages, social classes and genders.

In the context of research on community canteens and meal centers of the General Pueyrredón district and La Matanza district, province of Buenos Aires during the period 2020-2022, we observed that the nutritional discourse and concepts related to bio-medical knowledge appear in the accounts of those who are in charge of these spaces. By knowing the strategies of food choice that are carried out in the canteens,¹ it is possible to realize not only the awareness of this knowledge but also the constant attempt to put them into practice, imposing themselves as new moral guidelines of action that are limited by the lack of access to food and to resources necessary to carry them out.

In Argentina, food assistance has been the object of multiple state interventions focused mainly on maternity, childhood and schooling (Eguía & Ortale, 2004). Given the increase in the level of poverty that occurred after the last civil-military dictatorship, in 1984 the National Food Program² was implemented as the first food program focused on poor families and massive in its coverage (Britos *et al.*, 2003; Abeyá-Gilardon, 2016; Cervio, 2019). From this moment on, along with increases in inequality, various programs to address the food issue have been sustained uninterruptedly until present day (Gasparini *et al.*, 2019).

¹ In the following, we will refer to these eating spaces as 'canteens', without distinguishing whether they are meal centers, soup kitchens or other formats.

² The National Food Program (Programa de Alimentación Nacional, PAN), popularly known as the 'PAN box', delivered food boxes to families at nutritional risk. This was the first government program strictly related to food. (TN: PAN also means BREAD in Spanish)

As a result of the sustained economic and food access crisis, towards the end of the 1980s, the first soup kitchens³ were organized among neighbors and neighborhood leaders as a social response to food needs and the economic crisis. In this way, neighbors organized as a community responded to the pressing need for food in their neighborhoods. These soup kitchens, after the beginning of the 1990s, were established as the first community kitchens (Golbert, 1993; Neufeld & Cravino, 2007) and multiplied as a modality of assistance at the same time that poverty and hunger were multiplying as the main problem (Clemente, 2010).

Then, in 2001, a political-economic crisis materialized, characterized by rising prices, unemployment and falling incomes, which led to a drop in the possibilities to access food (Svampa, 2005). As a direct consequence, there were major transformations in food practices, in which the middle and upper sectors maintained their food pattern, diversifying consumption in line with the growth of commercial supply, while the less favored sectors lost variety in their consumption baskets (Aguirre, 2005). This period was a turning point in Argentine history; the economic-political crisis that ushered in the new century reconfigured not only the social structure of the country but also the organization of canteens as spaces that contain the basic and daily needs of the most impoverished sectors of society.

1.1. Medicalization

The medicalization of food is a process that began in the eighteenth century, which "has meant the replacement of a large part of the symbolic, economic or hedonistic motives on which food choices were articulated by others of a medical nature" (Gracia-Arnaiz, 2005, p. 162). This refers to the mechanisms by which 'the medical' - its discourses, practices, and institutions - advances over different aspects of everyday life, defining and treating them as diseases and deploying a whole series of explanations and interventions for their prevention or treatment (Menéndez, 2009). As part of this historical process, the association between health and nutrition was strengthened. And, as a consequence, the notions around food became linked to the order of bio-medicine, so that the notion of healthy eating has become increasingly central in the representation throughout the period, to the detriment of food associated with pleasure and commensality (Andreatta, 2013).

³ Called "popular pots" or "common pots" (*ollas populares*) in Argentina.

It is necessary to emphasize that the addressee of the medicalized dietary recommendations acquires an individual and depersonalized character, since the subject is constructed as a consumer who seems to have no other objective and concern than to feed himself, take care and control his health and body. Thus, dietary recommendations are addressed to a generic reader (without much specification of gender or socioeconomic identity) constructed as a subject interested in carrying out a healthy diet, assuming him/her as a subject free of any conditioning and able to understand the information and act accordingly. By accentuating the issue of health as the sole motivation, the multiple conditionalities (economic, political, ethical and symbolic) that explain food choices are overshadowed (Demonte, 2018). This process deals with what Gracia-Arnaiz (2007) calls "dietary normalization", a dietary pattern based on the restriction or promotion of the consumption of certain foods and the prescription of a set of guidelines regarding how, when and with whom to do it, whose objectives are to achieve healthy nutrition free of health risk, which implies normalizing daily life, making the subject responsible for self-care, and becoming moral directives bent on instilling a healthy lifestyle (Gracia-Arnaiz, 2015). If this is not put into practice, the individual or the family is held responsible for food choices and practices (blaming them) and, above all, for their consequences, because the problem is understood from the individual's ability to choose and their responsibility in modifying their practices, omitting broader and structural living conditions (Menéndez, 2009).

Like any process, the medicalization of food underwent modifications in relation to new medical and nutritional knowledge, accompanied by advertising as a tool for dissemination and food services as a commodity (Díaz-Méndez & González-Álvarez, 2013; Boragnio, 2020). To respond to the norm and to the current medical-nutritional prescriptions we must "eat more of certain nutrients" and "more varied", "eat less" (especially of certain substances, such as fats and sugars), "moderate ourselves more" and "move" more (exercise). As we can see, the recommendations and advice are not only circumscribed to what foods we should eat and how our diet should be (varied, balanced, prudent, controlled) but to how we should live (Gracia-Arnaiz, 2015). The most frequently named words and, therefore, associated with nutritious foods are those that provide calcium, iron, and proteins, in addition to vitamins and minerals. Also, although in moderation, fats, differentiating healthy fats and oils (such as unsaturated and essential fats) from those that are not (trans and saturated fats). Thus, foods also begin to lose their place as dishes (Aguirre, 2004) and are presented as choices based on their individual characteristics and not on the dining practices that give them meaning in a kitchen. This tendency to exalt the biological functions of food (prophylactic

and therapeutic) has been to the detriment of psychological and social factors (Gracia-Arnaiz, 2007).

2. Method

This paper is part of a collective research that was developed from the project "Social policies and food practices, 2020-2022" (PRI-UBA Project). There, we focused on investigating the realities of canteens in the Province of Buenos Aires from the beginning of the COVID-19 pandemic in March 2020. For this purpose, we carried out a virtual ethnography⁴ on Facebook in the Partido de La Matanza, Conurbano Bonaerense and in the Partido General Pueyrredón, Province of Buenos Aires.

This paper emerges from the analysis of the virtual interviews conducted with those who ran canteens and meal centers located in the La Matanza and General Pueyrredón districts -we conducted 31 interviews in the first case and 26 in the second (Dettano & Boragnio, 2022). There we were able to observe that the women interviewed had a specific nutritional vocabulary when talking about the food they prepared, around the decision of which dishes to make and, mainly, about the food they wished to serve in their dining rooms. From these accounts we learned that several of the women interviewed had participated in virtual workshops during the pandemic and we began to search for information on the subject. In this journey we found little official information -mostly news that reported on the realization of these workshops- but we also came across a variety of groups that, from work in the territory, produced dissemination material where they informed about the need to disseminate information regarding health and food care in these spaces of eating. In order to organize the corpus of analysis, we decided to take as a general selection criterion two central issues: first, those manuals that were especially aimed at canteens and meal centers and, second, those that were produced during the period of Social, Preventive and Compulsory Isolation (ASPO for its initials in Spanish) due to the COVID-19 pandemic⁵.

⁴ Virtual ethnography is a research strategy that can be understood as "an ethnography structured around specific cases inside and outside the network, linked to each other through complex relationships mediated by technological artifacts, of which the Internet would only be one more of them" (Domínguez-Figaredo, 2007, p. 59).

⁵ The period of Preventive and Mandatory Social Isolation (ASPO) was decreed on March 20, 2020 introducing strong restrictions on mobility throughout the country. It was terminated on February 27, 2021 by Decree 125/2021.

Therefore, we have left out of this selection the manuals written after the decree that ended ASPO⁶ and those that presented food recommendations to the general population.

In this Internet search, we came across multiple discursive proposals and a few manuals that met the selected requirements. Therefore, the manuals selected for the analysis were: *"Recetario para comedores, ollas y merenderos"* (Recipe booklet for dining halls, soup kitchens and meal centers), produced by the Universidad de La Plata (UNLP), *"Guía de Recomendaciones para comedores comunitarios y merenderos"* (Recommendations guide for community dining halls and meal centers), prepared by the Asociación de Nutricionistas de Chubut (ANCH) and *"Recetario para comedores populares por una alimentación sana, segura y soberana"* (Recipe booklet for popular dining halls for healthy, safe and sovereign food), by the Unión de Trabajadores de la Tierra (UTT) (Union of Land Workers). For the purpose of the analysis, we will call these institutional manuals "Pandemic Manuals".

On the other hand, at the beginning of the research, it caught our attention that among the main results of different online search engines, the "Manual for Community Canteens" produced by the Presidency of the Nation in 2003 appeared as the only official document. The 2001 crisis being a milestone in the socio-political-economic history of Argentina and in the history of the dining halls (Ierullo, 2010; Santarsiero, 2013a; Faracce-Macia, 2023), we decided to include it in the analysis, at least, as the first official manual of the National State addressed to these eating spaces.

From a qualitative approach, and through a documentary technique (Valles, 1997; Solanilla, 2007), we processed the information collected in an analysis matrix. In this matrix, we identified thematic categories that emerged from the analysis of the documentary materials. These included: by whom they were prepared and for what purpose, to whom they were addressed, what type of information they provided on food handling, the organization of the canteens, nutrition, eating habits and the recipes they presented. The identification of these

⁶ Although the manual produced by the National University of La Plata (UNL) has a publication date of March 18, 2021, its introduction indicates that it was prepared based on the experience of working in canteens during the year 2020. At the same time, we understand that it was done before the end date of the ASPO, since we consider the time necessary for the compilation, writing and editing.

categories was possible from the first readings of the manuals in which textual passages of each of them were categorized. This was a discursive analysis (Cortés-Rodríguez & Camacho-Adarve, 2003) of the enunciative order, centered on the conditions in which the message was produced (by whom, for whom, when) and, at the same time, semiotic, since the analysis focused on the type of information transmitted (qualitative or quantitative; specialized or not, etc.). From there, it was possible to observe the use of bio-medical language on food in each of them.

By taking discourse as a unit of analysis, we understand that it refers to the use of language by individuals related to cultural, social and political formation determined by their interactions within society. Discourse analysis is a tool that allows us to explore and analyze how texts are significant facts in their processes and how they contribute to the constitution of social realities by making them meaningful (Íñiguez, 2003; Mills, 2007). This strategy allowed us to continue the indications we had gathered from asking questions to the information provided by the documents, thus enabling us to approach the interests, assumptions and purposes from which they were conceived (Taylor & Bogdan, 1987). The documents reviewed were four manuals aimed at canteens in Argentina, one of which was produced by the National State. This implied taking into account the disputes that develop around the power of the State, which can be observed through the documents produced by the State itself -among other productions such as laws, decrees, institutional discourses-. Therefore, it becomes central to achieve a reading that analyzes the documents from the context, so that it can assign value to their text and the meanings they express (Muzzopappa & Villalta, 2011).

3. Results

The following is a description of the manuals for community kitchens based on the proposed categories and the results of the analysis of the documents, differentiating between the "Manual for Community Canteens" produced by the National Government in 2002 and the "Pandemic Manuals" produced by different social organizations, professional associations, and universities in times of pandemic.

3.1. First manual for canteens: organization, recipes and food service

In December 2002, the National Council for the Coordination of Social Policies (CNCPS for its initials in Spanish), under the Office of the President of the Nation, published and disseminated the "Manual for Community Canteens" (CNCPS, 2002), where nutritional and

organizational recommendations were given to community canteens as essential spaces to "overcome the social and economic crisis suffered by all Argentines" (CNCPS, 2002, p. 4). It was addressed to "all those who work in community and school canteens. Also (...) to teachers, health workers, community promoters and families in general, to reinforce their knowledge on nutrition and healthy eating" (CNCPS, 2002, p. 5).

This manual provided advice and recommendations ranging from how to organize groceries, the correct ways to clean and store food, to recipes for filling meals, to recommendations for portion sizes. In the introduction to the manual, it states:

We have also prepared this manual to *help you improve the operation of your dining room, meal center or "copa de leche" (milk cup)*. Here you will find useful tips on how to prepare *cheaper and more nutritious menus*, how to preserve food better, how to avoid infections that can be transmitted with food or how to *organize your daily work*. (CNCPS, 2002, p. 4) (Emphasis added).

It was "prepared by nutrition specialists, [to] help you improve this noble task that you carry out, whose greatest strength is the love and commitment with which you carry it out" (CNCPS, 2002, p. 4). The experts provided specific knowledge about the recommendations that were useful for the population attending the community canteens, but in the form of "simple suggestions, within everyone's reach, as life itself should be" (CNCPS, 2002, p. 4). From these sentences in the introduction we can see that the women who ran the community kitchens were the ones who provided the commitment and action, while the nutritionists were the specialists, with scientific authority to give recommendations on what, how much and how to eat.

When analyzing the Manual for Community Canteens (2002) we can observe interesting issues about its presentation. In the first pages, the layout of the manual is presented in four different sections: the importance of food, healthy eating, organizing the dining room, and mealtime. In the first section, which explains "what is the purpose of eating and what happens to us when we eat badly" (CNCPS, 2002, p. 6), it is stated that food is one of "the fundamental rights of all people (...) [and] that it is not only important to eat, but to eat well, for which we have to take into account the different stages of the eating process" (CNCPS, 2002, p. 6). It also details, in a simple way, the main diseases that can arise from eating "inadequately or insufficiently" (CNCPS, 2002, p. 7).

Some appear quickly and cause vomiting and diarrhea. Others, on the other hand, take longer and can carry heart problems, high blood pressure, blood sugar, etc. In addition, if we eat poorly, we can have *nutritional problems*. Some are easy to recognize, because people are fat or skinny. Others, such as *anemia*, are not visible to the naked eye, that is why it is called "*hidden malnutrition*". (CNCPS, 2002, p. 7) (Emphasis added).

Then, in the following sections, emphasis is placed on 3 central moments of running a dining room: **(a)** the first moment is "food selection", there the focus is placed on "*what we buy* when we go to the fair or the market and *why*"; **(b)** the second moment is "food preparation", the central axis is located in "*what dishes* we prepare, *how* we cook them and how we preserve them" and, finally, **(c)** the third moment - central action of the dining room - is "serving the meal", which is "the moment of *feeding and sharing*" (CNCPS, 2002, p. 6) (emphasis added).

The following pages of the manual continue with recommendations based on ten "useful tips" to take into account at each stage to achieve a "healthy diet" (CNCPS, 2002, pp. 8-9). The basis of these recommendations is on "how to achieve a balanced and healthy diet" (CNCPS, 2002, p. 8) (see Figure 1) emphasizing that "all foods are important, and that large amounts of each are not necessary to maintain good health" (CNCPS, 2002, p. 8).

Figure 1. Balanced and healthy diet chart.

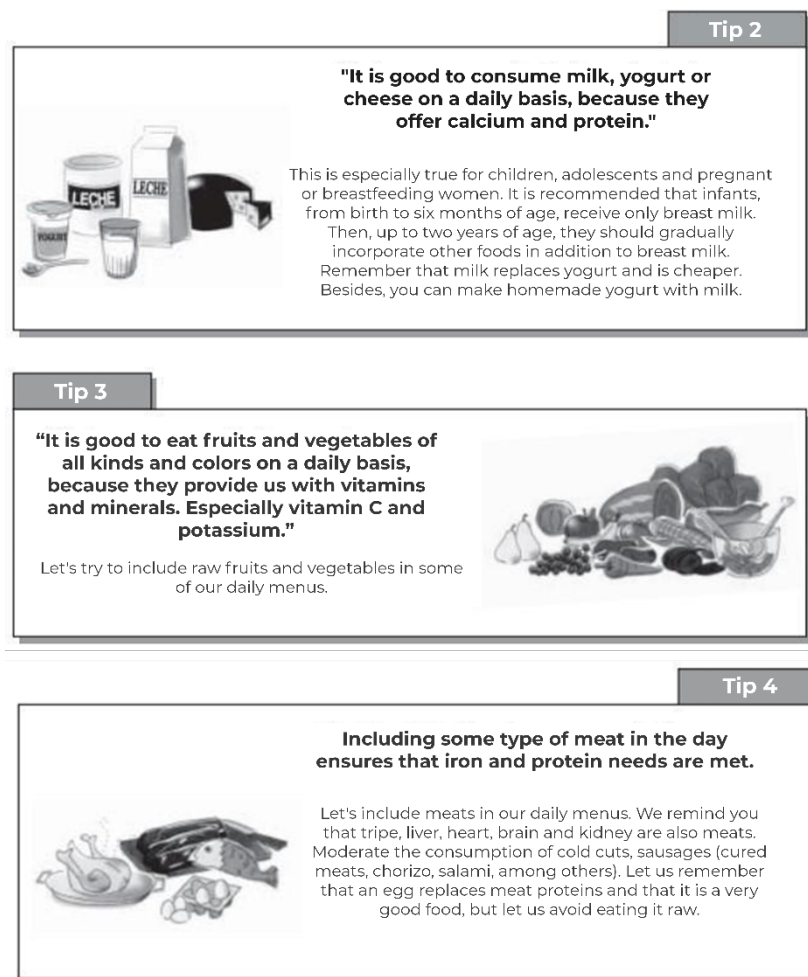


Source: *Manual for Community Canteens* (2002)

Among the tips we find clear and concrete precepts on how to build menus with varied foods at each meal (No. 1), avoid cooking with fats (No. 5), consume legumes and whole wheat

flours (No. 6), reduce the consumption of sugar and salt (No. 7), and drink drinking water (No. 8) (see Figure 2). We can also observe other tips that present more explanation, detailing specific nutritional information about food replacements, vitamins and minerals contained in fruits and vegetables, as well as the importance of protein in the daily diet.

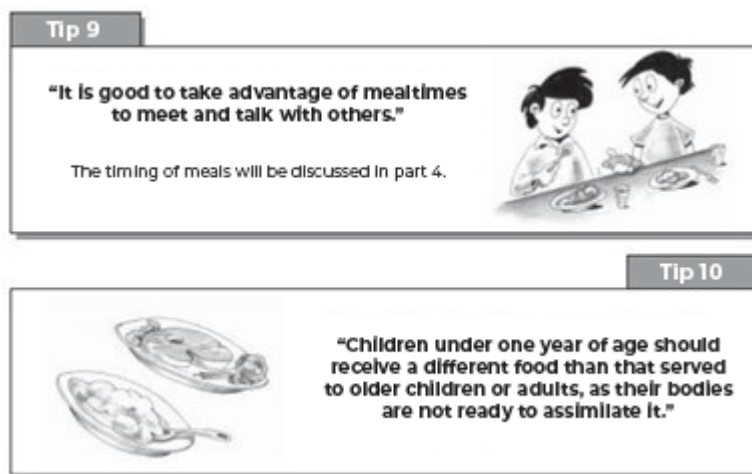
Figure 2. Tips for healthy eating.



Source: *Manual for Community Canteens (2002)*

It is especially noteworthy that the ten tips for healthy eating include recommendations for practices related to eating (see Figure 3). In this aspect, it is specified that eating is a moment of encounter, of sharing and important recommendations are provided in relation to babies, infants, adolescents and pregnant or breastfeeding women.

Figure 3. Tips for healthy eating.



Source: Manual for Community Canteens (2002)

The manual also presents recommendations on personal hygiene such as brushing hands before eating and teeth at the end of the meal (see Figure 4); and table behavior such as sitting at the table, conversing and transmitting knowledge (see Figures 5 and 6).

Figure 4. Recommendations on daily hygiene.



Source: Manual for Community Canteens (2002)

Figure 5. Recommendations on commensality.



Source: Manual for Community Canteens (2002)

Figure 6. Recommendations on food consumption.



Source: Manual for Community Canteens (2002)

In this line, the manual emphasizes the community task of the dining room, indicating not only the importance of eating with others, of sharing the space and the moment of eating, but also how adults should approach the relationship with the attendees in order to build a shared and communitarian mealtime, so that "...the children and adults who come to our dining room feel cared for in a warm and affectionate manner, transforming that moment into a learning experience and solidarity coexistence" (CNCPS, 2002, p. 25).

Throughout the manual, it is noticeable that the emphasis is placed on three keys: **a)** the feeding of the different stages of growth and the different nutritional components, as well as the amounts of food needed; **b)** how to carry out the dining room, detailing the tasks to be carried out and their requirements and, **c)** how to make the food yield and "make economy" (CNCPS, 2002, p. 14), since the beginning of the 21st century was a period marked by a deep economic-political-social crisis in Argentina that left a high level of poverty, unemployment

and hunger (Scribano, 2008; Tegucigalpa, 2008). 14), since the beginning of the 21st century was a period marked by a deep economic-political-social crisis in Argentina that left a high level of poverty, unemployment and hunger (Scribano, 2008; Teubal & Palmisano, 2013). In relation to this, the final section, entitled 'annex', presents eleven different lunch/dinner recipes, one for breakfast, one for a reinforced snack, a basic bread recipe and a suggested menu planning, "according to the customs of the Argentine population, taking into account the quality, availability and prices of food" (CNCPS, 2002, p. 29). Two striking issues appear here that deserve to be mentioned since they allow us to wonder about the number of people attending the dining rooms and the quality of the food offered. First, all the recipes are presented with quantities for 1, 50 and 100 people. And, secondly, that the proposed menu -of 5 days for 5 weeks- presents traditional recipes and recipes from the manual, making up, for 25 services, 17 dishes that have meat in their preparation.

As we can see, the Manual for Community Canteens presents and explains the act of eating from different stages that require, in their entirety, an exhaustive organization and control by those who run these spaces. But, at the same time, this knowledge of what to do is not enough, since the practices carried out by the cooks and organizers of the dining rooms need to be adapted to the health, nutrition and hygiene guidelines presented by specialists in the field.

3.2. Pandemic Manuals: the installed discourse

The research on manuals at present became a complex and fruitless search since it was not possible to find other documents formulated by official organizations. However, in the year 2020, with the ASPO established because of the pandemic, some interesting publications appeared in order to think about the continuity of nutritional suggestions and recommendations for the population that participates in canteens. Among them, mainly, we find recipe books made by different institutions such as universities (UNLP), nutritionist associations (ANCH) and collective organizations (UTT). These manuals, which we call "Pandemic Manuals", are aimed at those who run the canteens, who are presented as the main actors in sustaining the satisfaction of the food needs of the people in the poorest neighborhoods.

The COVID-19 pandemic made more visible the social and economic inequalities that society has long carried with it. The role of the soup kitchens and dining halls in the neighborhoods *are a clear example of these inequalities that transcend the food issue*. In times of emergency such as the one we are going

through these days, *it is the people who sustain these spaces who continue to face adversity not only providing a plate of food to those who cannot access it in any other way*, but also giving support and containment to children, adolescents, women and older adults, being this a clear demonstration of their community role (UNLP, 2021, p. 4) (emphasis added). (UNLP, 2021, p. 4) (emphasis added).

The problem of hunger is not new and *neither is the problem of organizing in the territories to respond to it*. And this is shown by a whole tradition of solidarity, participation and organization that, *in the midst of the economic crisis, aggravated by the effects of the pandemic, was activated to give a plate of food to those who need it most [...]* (UTT, 2020, pp. 5-6) (emphasis added).

As we can see, in all of the manuals, canteens are called upon as spaces for action both in the face of a political-economic crisis and a health crisis. At the same time, they make it clear that the problems that canteens have to face are similar: making healthy food, making food yield, facing the growing demand for food.

On the other hand, the 'Pandemic Manuals' recognize the canteens as an observable of the existing inequalities with a long history, which transcend the food issue, but recognize that this remains the central focus on which it is necessary to put the most effort. However, in the manual produced by ANCH, although its title indicates that it is aimed at canteens and meal centers, these are not taken up as actors in the development of the manual and are addressed to a generic population:

The following manual was prepared with the objective of providing the *population* with the necessary tools for handling, portioning and cooking food; it is also expected to be a source of permanent reference on the topics of *food hygiene management* (ANCH, 2020, p. 4) (emphasis added).

Focusing on the information shared by the 'Pandemic Handbooks', we notice that they are recommendations focused on how to achieve a healthy and efficient diet. At the same time, it is clearly identifiable how -unlike the 2002 Manual for Community Canteens- the information provided becomes more specific, using precise and specialized language. In this sense, the recommendations focus on how to ensure that the food offered has certain nutritional properties beneficial to health. To this end, recommendations are offered as well as recipes and tips on cooking and preparation of dishes.

3.2.1. Information from the manuals: recipes, tips and nutrients

In a first approach, we identified that the manuals are divided into different sections, the order and content of which will be directly related to the objective pursued. The UTT Manual

(2020) is made up of two sections: "recipes" and "protocol for canteens during COVID-19". The first presents preparations made by those who run the canteens and are part of the UTT network. This section occupies a large part of the manual, which is in congruence with the intended objective, which is "...to see the creative and transformative power, politicizing the everyday, seeking to build alternatives that allow us to claim real food, for everyone..." (UTT, 2020, p. 6). It shares two types of information: on the one hand, a descriptive and visual one where the ingredients and preparations are described accompanied by photographs of the dishes and the moment of cooking in the canteen, to which a brief commentary by the cook is added, with her name and the canteen where she participates. The final part of the recipe is written in precise, specialized and quantitative language: the number of servings the recipe yields and its nutritional composition expressed in percentages of carbohydrates, proteins and fats; finally, the nutritional value expressed in kilocalories (kcal) is indicated. Figure 7 shows an example of how this information appears after the text of each recipe.

Figure 7. Nutritional composition graph.



Source: *Recipe book for canteens, pots and meal centers (2020)*.

Meanwhile, the UNLP Manual (2021) also presents recipes, to which it adds recommendations, but divided into more numerous sections; among the first ones, the following stand out: "traditional reversions", "legumes", "nothing is lost everything is transformed", "condiments" and, finally, "recommendations for safe food handling". Once again, we observe that the information related to food and its preparation methods is more important than the handling of food, since its objective is focused on becoming:

a tool and guide for the collaborators of the different canteens when preparing meals for the community [...] Recipes are included that *promote the consumption of certain foods that are not very common in the Argentine population, which have many nutritional properties and health benefits*, such as vegetables, fruits and legumes. Ideas are also incorporated to *take advantage of the parts of the food that are usually discarded*, encouraging self-cultivation and self-sufficiency (UNLP, 2021, p. 5) (emphasis added).

The type of information shared in this manual is qualitative, focusing on recipes and cooking methods. Quantitative information also appears, but in relation to the number of servings that each preparation yields. In this case, the nutritional discourse takes center stage in the form of 'dialogue balloons', which express variants, combinations and accompaniments that seek to increase the nutritional benefits: "legumes can be added to the classic mashed potatoes, thus increasing their nutritional benefits" (UNLP, 2021, p. 9) or "we advise you to use dry split peas [...] they are cheaper and do not have the sodium of canned ones!" (UNLP, 2021, p. 14), among others.

In this manual, after providing suggestions for producing compost with "all those parts of vegetables that cannot be used in any preparation" (UNLP, 2021, p. 18), recipes are also suggested to incorporate those parts of vegetables and fruits that are usually wasted, but are edible, "to take advantage of those parts that we usually discard, but have many nutrients" (UNLP, 2021, p. 17). Among these we find: use of stalks, beet leaves, very ripe vegetables and fruits, and also the seeds and peel of the pumpkin, potato, banana, sweet potato and carrot to make "*chips*". Finally, in the "condiments" section, there are again nutritional dialogue globes that recommend cooking techniques and the use of various herbs and spices (see Figure 8).

Figure 8. Presentation of recommendations for the use of condiments.



Source: Recipe book for canteens, pots and meal centers (2021).

In the last section of the manual, we find the measures of care, safety and hygiene in different stages of food processing, accompanied by graphics as a demonstration.

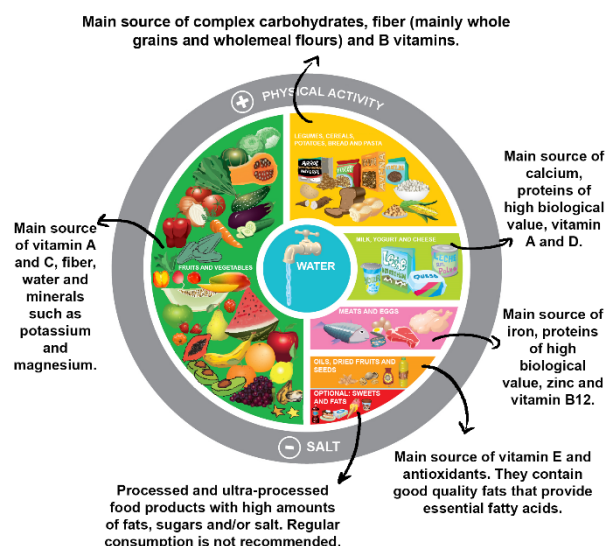
Finally, the ANCH Manual (2020) aims to "bring them closer to the *necessary care to be taken into account when handling food*; recipes to optimize the use of raw materials and offer a varied food menu without changing the inputs" (ANCH, 2020, p. 4) (emphasis added). This manual is divided into 3 sections: "food contamination", "good manufacturing practices" and "healthy eating", the first two being the most important. In the first two sections, very specific information is presented about foodborne diseases and direct and indirect contamination of food, while explaining what microbes are. This information is accompanied by simple, explanatory graphics. In addition, some "basic rules of personal hygiene and hygienic habits" (ANCH, 2020, p. 8) -such as washing hands before cooking and utensils before using them- are presented, differentiating between those that are good and desirable and those that are incorrect. Finally, suggestions for the organization of the workspace and the order of food when stored in the refrigerator or freezer are briefly presented.

Towards the end, the section entitled "healthy eating" is presented, where healthy eating is defined as:

That which provides the *essential nutrients and necessary energy* for each person to carry out daily activities and *stay healthy*. It must respect the tastes and habits, that is, the culture of each person and/or family. In addition, food is a privileged vehicle for socialization; it is the way to express our identity and sense of belonging (ANCH, 2020, p. 20) (emphasis added).

Then, the manual (ANCH, 2020) offers 10 recommendations where emphasis is placed on "incorporating food from all food groups daily and performing at least 30 minutes of physical activity", drinking water, "consuming 5 servings of fruits and vegetables daily in a variety of types and colors", "reducing the use of salt and consumption of foods with high sodium content" and "consumption of sugary drinks", consuming skimmed dairy products daily, "remove visible fat [from meats], increase fish consumption and include eggs", "consuming cereals, preferably whole grains", consume "dried fruits or seeds" and consume alcoholic beverages responsibly, although not children, adolescents and pregnant women (ANCH, 2020, p. 20). It also sets out "the daily food chart" (see Figure 9), which explains the food groups that should be distributed throughout the day, the nutrients provided by each of them and those that are not recommended to be consumed.

Figure 9. Graph of daily diet.



Source: *Guide to Recommendations. Community Canteens and Soup Kitchens (2020)*

This manual has a recipe booklet with quantitative information on the nutrition, related to the amount of portions that should be served to each age group. Although the quantity measured is presented graphically in the form of ladles, the use of scales is also recommended for its calculation. Finally, nutritional information and suggestions are presented in the form of text, explaining the benefits or reduced risk of certain diseases by incorporating some food groups, as well as options for replacing some foods and ways to make the food yield:

"Eating fruits and vegetables every day *lowers the risk of obesity, diabetes, cancer and cardiovascular disease*" (ANCH, 2020, p. 23) (emphasis added).

"The B complex vitamins are: B9 (Folic Acid), B1, B2, B3, B5, B6, B7 and B12. All are essential for growth and some for the *prevention of anemia, such as folic acid*" (ANCH, 2020, p. 24) (emphasis added).

Table 1 below shows a table that summarizes the information present in each of the manuals analyzed.

Table 1. Predominant type of information in analyzed documents.

Document	Community Canteens Manual (2002)	Guide of Recommendations for Soup Kitchens and Meal Centers (2020)	Recipe booklet for soup kitchens for healthy, safe and sovereign food (2020)	Recipe book for canteens, pots and meal centers (2021)
Producing Institution	Presidency of the Nation	Association of Nutritionists of Chubut	Union Trabajadores de la Tierra	National University of La Plata
Central axis	Organizing and managing the dining room	Foodborne diseases	Various recipes	Healthy eating
Nutritional	X	X	X	X
Manipulation	X	X		X
Organization	X	X		X
Recipes	X	X	X	X
Eating out	X			

Source: Own elaboration based on documentary analysis

4. Discussion and conclusions

The reading of the manuals presented must take into account the historical moments in which they were written. All of them have gone through different crises, and they all seek to be a tool for help, recommendations and information, but the differences among them are remarkable. The "Manual for Community Canteens" of 2002, was produced by the National State in the situation of inflection presented by the political-social-economic crisis of 2001, but the rest of the manuals were made by civil institutions in the year 2020-2021, a time of health crisis from COVID-19, which was conjugated with an economic crisis that Argentina was experiencing since 2018 (Ocampo, 2020). In this sense, the context of production-dissemination of these manuals presents clear divergences: while the 'Manual for

Community Canteens' emphasizes the process of operation of these spaces, the 'Pandemic Manuals' focus on providing recipes that help healthy eating and disseminating hygiene practices -both alimentary and in relation to COVID-19. However, in their contents we also find similarities that allow us to build a narrative thread around the existence and reproduction of canteens in the last thirty years of Argentine history. In the following, we will present this discussion based on three conceptual axes: the temporality of the canteens, the recipes and their ingredients, and the technical language of the recommendations.

4.1. Temporality of the canteens

The 'Manual de Comedores Comunitarios' (2002), being the first official manual aimed at canteens and meal centers, presents its recommendations focused on teaching how to run the canteen as a space for eating and social participation. In view of this, this manual provides clear and simple specifications in relation to practical knowledge about the operation and organization of canteens. These have been part of the daily life of working class neighborhoods since the beginning of the 1990s and have grown exponentially at the beginning of the new century. In view of this, the State, recognizing civil society organizations as relevant actors at the territorial level, incorporated canteens - as community and collective feeding strategies - as executors of territorialized assistance (Herzer *et al.*, 2005; Santarsiero, 2013a, 2013b). To this end, funding for these spaces was increased through different national, provincial and municipal plans (Ierullo, 2010), which required specific and targeted communication to those who did not have the previous experience or the necessary knowledge about their organization. Thus, by means of food transfers and information manuals, the State configured practices, discourses and daily realities, specifying and delimiting the central axes on which it was necessary to focus attention.

As we have shown, the dining room was presented as a space that unites the attendants and where children and adolescents find a community and an environment for the transmission of knowledge, wisdom and values. In this sense, we argue that the 'Manual de Comedores Comunitarios', disseminated after the 2001 crisis, shows the canteens as a place to help "overcome the social and economic crisis that all Argentines suffer" (CNCPS, 2002, p. 4), but conceived as a temporary or provisional strategy (De-Martino, 2004; Ierullo, 2010). On the other hand, the 'Pandemic Manuals' contain almost no information related to "teaching" how to run the dining room or how to transmit habits and knowledge related to the moment of eating or about food. These manuals take for granted not only the existence of canteens

but also their established place as a strategy for satisfying the need to eat of the impoverished and socio-segregated sectors.

4.2. Recipes and their ingredients

The recipes for different meals are a block of information that appears in all the manuals analyzed, being the central axis of the 'Pandemic Manuals'; but, in the comparison of the food presented in all the manuals, we find very clear differences. In the 'Manual de Comedores Comunitarios' (2002), we can see recipes for high-yield dishes, where the focus is on price and how to reduce costs. Mainly pot recipes are presented which, in most cases, use meat. On the other hand, the 'Pandemic Manuals' are managed in two extremes: they present almost no recipes with meat or the recipes have meat as one more ingredient, never the main one. In this line, they expose performance alternatives such as "combining meat with cooked lentils" in potato cake (UNLP, 2021, p. 8) or nutritional replacement such as "combining cereals such as rice, with legumes such as lentils, [given that] it is a good alternative to replace meats" (ANCH, 2020, p. 25). It is also emphasized that "it is advisable to prefer the consumption of chicken or fish meats" (ANCH, 2020, p. 26).

In relation to fruits and vegetables, the 2002 manual presents recipes focused on few fruits and vegetables, emphasizing that "the prices of fruits and vegetables change according to the time of the year since if we buy seasonal products we can '*make economy*'"⁷ (CNCPS, 2002, p. 14). On the other hand, the 'Pandemic Manuals' focus on increasing the consumption of legumes, fruits, vegetables and the need for variety. It is worth noting that the manual prepared by the UTT -which presents recipes proposed by cooks from canteens all over the country- shows a greater diversity of fruits and vegetables; and, according to the dishes, although they are mainly pot dishes, meat is an important ingredient. Out of 31 recipes in the UTT manual, 20 have some type of meat (minced beef, osso buco, canned beef, pork, chicken, chicken wings, bacon). But, at the same time, being a manual that arises from the reality of the current food pattern (Zapata *et al.*, 2016), they take into account that the meat to be consumed can be "whatever we find at the *best price*" (UTT, 2020, p. 69) and, as expected, presents its recipe "for *when there is no meat*"⁸ (UTT, 2020, p. 46).

⁷ Emphasis added.

⁸ Emphasis added.

Argentine, rioplatense cuisine, from its historical processes of conformation and immigration, configured specific habits that built a food pattern where the representations place vegetables not as a dish in itself, but always in the place of the garnish (Aguirre, 1997). At the same time, the decrease in the consumption of fruits and vegetables by society is a reality that has been verified since the end of the 1990s. These changes in consumption habits are strongly related to changes in the productive pattern of the land, with modifications in the macroeconomic structure that produced changes in the availability, prices and purchasing power of food, which produced as a direct consequence changes in the consumption baskets that configured the break of the food pattern that, until 1980, cut across the social structure (Aguirre, 1997; Blacha, 2019). These changes are clearly reflected in the different manuals, given that the 'Pandemic Manuals' - along with the considerations linked to the dissemination of a diet under medicalized norms - were adapted to the reality of the decrease in meat consumption at the national level and, specifically, in the most disadvantaged sectors; which is exposed in the need to make re-adaptations of the recipes that produce nutritional replacements as well as advice on purchasing strategies.

4.3. The technical language of the recommendations

The analysis of the manuals in chronological perspective allows us to observe the consolidation of a technical language when talking about eating. Although the 'Manual de Comedores Comunitarios' (2002) presents terminology on health, nutrition and specific information on food nutrients and their relationship with health, these are scarce and are focused on the main nutrients such as iron, vitamin C, calcium, potassium and proteins. In contrast, in the 'Pandemic Manuals', references to specific and specialized language are easily found and quantitatively expanded. These manuals not only present terms linked to safety and hygiene such as "handling", "microbes", "raw materials" but nutritional information linked to the bio-medical discourse of health is exposed in a way that crosses all texts. In its pages we can see information on the nutrients of the dishes, the nutritional composition based on macronutrients and the kcal they contain; going to the extreme of presenting the exact measurement of a portion based on the weight it should have.

At this point, emphasizing the addressee of these manuals with medicalized food recommendations allows us to observe that the subject to whom they are addressed is depersonalized, since it is constructed as a consumer who can choose from a variety of foods available. Thus, many of the recommendations are oriented without taking into account socioeconomic realities or the material conditions of access to food, cooking and eating. At

the same time, the symbolic and cultural motifs of food are blurred, putting in the first place a set of choice and cooking guidelines which, together with the promotion of certain foods, aim at a diet based on nutritional and health criteria.

On the other hand, by focusing on the issuer of these manuals we can observe that they become the patrimony of medicine and nutrition, legitimized by the State which participates in their dissemination and, in the case of the 'Manual de Comedores Comunitarios', in their elaboration. Thus, both the State and science increasingly tend to assert their competence and dominance over food choices and practices (Fischler, 2010). The food prescriptions of modern medicine have become of a preventive order and no longer only therapeutic; they are of collective and not only individual use; they are transmitted through the media and strongly through social networks and not only in private consultation; they reach through state policies of prevention and not only through the clinic (Demonte, 2018). Thus, medicalization is consolidated not only in the media and social discourse, but also in the state discourse from public policies that reproduce ideas by replacing the symbolic, cultural and/or hedonistic motives on which the motivations for eating are structured, articulating food choices by motives of the nutritional-bio-medical order. In this way, dietary norms are introduced into the spaces of daily life through recommendations, advices and tips, which are precepts of collective order but which leave the responsibility for their application to the individual.

In Argentina, at the beginning of 2000, due to the difficulties in access to food caused by the crisis and the increase in prices, the recommendations expressed adequate guidelines for a population in a situation of food emergency, where the quantity of food was more important than any other recommendation. In contrast, in recent years the recommendations are aimed at a generic population, which is assumed and expected to be able to think about the quality of their food and have access to a diet considered healthy, assuming a certain purchasing power of the subjects (Demonte, 2011). In this sense, the manuals, recipe books and recommendation guides that emerged in the period of the COVID-19 pandemic take for granted the existence of canteens as a space for eating for millions of people, but also the knowledge of their operation and the practices carried out there. These 'Pandemic Manuals' focus on healthy food, but appeal to actions that are not always related to the daily reality of these spaces, for example: going to the market every day, better buying and using fresh vegetables, when most of the menus are supported by the national and/or municipal government, by social organizations and by donations, being fresh food, dairy and vegetables

the most difficult to obtain (Angeli & Huergo, 2021; Molina *et al.*, 2022; Pastormerlo & Chahbenderian, 2022; Boragnio, 2023).

The various communications such as manuals, recommendation guides and workshops that have been offered since the beginning of the century focus on the need to follow a diet with the nutrients necessary for the body's organic development. But, for the most part, these are generic recommendations that do not take into account the various conditionalities to which these sectors are subject. Thus, *what* you can get to eat is going to delimit the preparations that it is possible to serve. Therefore, when we want to know the eating practices (Boragnio, 2022) of popular sectors, but mainly of sectors with assisted feeding, it becomes central to open the focus of observation in order to account for the different constraints and strategies that are played daily in the choice of food and the different ways of eating. Within these conditioning factors, not only economic ones are present -although they have a major preponderance- but also bio-medical discourses on nutrition, health and food and social representations in relation to food and the moment of eating. Therefore, in view of the consolidation of medicalization as a discourse that organizes current eating, it becomes urgent to ask ourselves about the possibilities and ways of applying these discourses in reality.

These pages are a first approach to the subject, from which we will continue working in the line of thinking and reflecting on the articulation of the discourses of medicalization, assisted feeding and the recommendations addressed to community kitchens. We know that we still have a way to go deeper into the subject, but we are sure that the advances presented in this text allow us to glimpse the need to continue in this research path that has great importance in shaping the eating practices of millions of people throughout the country.

Statement of authorship

Aldana Boragnio: Research, methodology, conceptualization, formal analysis, writing.

Emilia Pastormerlo: Research, methodology, conceptualization, formal analysis, writing.

Conflict of interest

The authors declare that there is no conflict of interest.

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