

The Autistic People *of* Color Fund



The Dirty Truth about “Clean Eating”

ABLEISM & RACISM ARE INEXTRICABLY CONNECTED

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About the Community Priorities Brief Series

In our 2022 Community Priorities Policies Report, our survey respondents chose education, employment, food justice, housing, and health as their top policy priorities. In this series of briefs, the Fund will identify current shortcomings and suggest solutions to ensure that autistic people of color can thrive as fully integrated members of the community.

Introduction

You've likely come across the term *clean eating*, and you may have even tried a clean-eating diet. Those who practice clean eating abstain from alcohol, dairy, gluten, processed foods, or refined sugars and opt for lean protein and natural, organic foods.¹ Although clean eating is beneficial for some people, it may lead to harmful, counterproductive attitudes and behavior toward food and diet, many of which intersect with systemic forms of discrimination like ableism and racism. In this brief, we'll discuss some of the unhealthy and inaccessible aspects of clean eating, as well as the roles that ableism and racism play in clean-eating diet culture.

Good Intentions Can Have Negative Health Consequences

Autistic people are disproportionately more likely to have food allergies and intolerances.² Clean eating can help us avoid foods that cause us illness or discomfort. Those of us who are lactose intolerant or have other gastrointestinal conditions (e.g. Crohn's disease or irritable bowel syndrome), for instance, have experienced improvements in our health and quality of life once we've restricted dairy. It is still

¹ Joanna Fantozzi, "Clean Eating May Sound like a Smart Way to Diet, but It Could Actually Be Harmful," Business Insider (Business Insider, July 25, 2017), <https://www.businessinsider.com/why-clean-eating-could-be-harmful-to-health-2017-7>.

² Guifeng Xu et al., Association of Food Allergy and Other Allergic Conditions With Autism Spectrum Disorder in Children, 1 JAMA Network Open e180279 (2018).

important, however, to ensure that replacement foods contain adequate nutrients. Since dairy milk provides a good source of calcium, those who shift away from dairy milk should research milk alternatives or foods (e.g., kale, sardines, or spinach) that also contain good sources of calcium to avoid developing osteoporosis.³ The same applies to other foods—if people decide to replace a food in their diet, they should make sure they are getting the right nutrients.

Clean Eating: Is It a Gateway to Eating Disorders?

Although clean eating isn't problematic in itself and shouldn't be seen as an automatic gateway to disordered eating, it would be a disservice to ignore the real link that exists between eating clean and eating disorders, especially orthorexia. Orthorexia combines fatphobia—the fear of fatness—with an obsession with healthy foods.⁴ While the Diagnostic and Statistical Manual of Mental Disorders does not formally recognize orthorexia, the term—which was first coined in 1997—is becoming increasingly accepted.⁵ Unfortunately, the lack of formal diagnostic criteria makes it difficult to estimate the number of people living with orthorexia and to ascertain whether it is a stand-alone eating disorder or a subset of another disorder (e.g., obsessive-compulsive disorder). The National Eating Disorders Association has compiled a list of proposed symptoms and warning signs to help determine whether someone has orthorexia, including:

- compulsively checking ingredient lists or nutritional labels;
- increasingly becoming concerned about ingredients' healthiness;

³ “National Osteoporosis Foundation Survey Reveals Moms Are Restricting Their Dairy Intake and Fewer Moms Are Encouraging Milk for Their Children than Before,” Bone Health & Osteoporosis Foundation, August 4, 2017, <https://www.bonehealthandosteoporosis.org/news/national-osteoporosis-foundation-survey-reveals-moms-are-restricting-their-dairy-intake-and-fewer-moms-are-encouraging-milk-for-their-children-than-before/>.

⁴ Joanna Fantozzi, “Clean Eating May Sound like a Smart Way to Diet, but It Could Actually Be Harmful,” Business Insider (Business Insider, July 25, 2017), <https://www.businessinsider.com/why-clean-eating-could-be-harmful-to-health-2017-7>.

⁵ Amy A. Ross Arguedas, “Can naughty be healthy?”: Healthism and its discontents in news coverage of orthorexia nervosa, 246 *Social Science & Medicine* 112784 (2020).

- increasingly cutting out food groups and narrowing down the foods one eats (e.g., eliminating all animal products, all carbohydrates, all dairy products, etc.);
- spending hours per day considering what foods might be served at upcoming functions;
- exhibiting high distress levels when foods that are perceived as healthy or safe are not available;
- and obsessively following food and healthy lifestyle blogs or social media pages

There are currently no clinical treatments specifically made available for this disorder, but eating disorder experts typically treat orthorexia as a type of anorexia or obsessive-compulsive disorder. Psychotherapy is often used to help patients increase their food varieties, reduce anxiety over certain foods, and assist in weight restoration as required.⁶

One of the most alarming findings, from a study published within the National Library of Medicine, is that nearly half of registered dietitians within the United States are themselves at risk for orthorexia. One has to wonder how all these dietitians, who have potentially internalized problematic mindsets regarding clean eating, are able to adequately support their patients who are struggling with similar issues. Unfortunately, in such scenarios, patients might end up having their harmful, fatphobic, and fitness-obsessed views justified by their dietitians, and the patients will continue to hate their own bodies and resume unhealthy eating habits in the name of clean eating rather than learn to develop affirming views about their bodies (in all their stages and glory).⁷

Lack of Racial Diversity and Cultural Awareness among Registered Dietitians

Even if dietitians are not at risk of exhibiting orthorexia, the vast majority of registered dietitians within the U.S. are white. Dietitians of color and researchers, both in the

⁶ “Orthorexia,” National Eating Disorders Association, December 13, 2019, <https://www.nationaleatingdisorders.org/learn/by-eating-disorder/other/orthorexia>.

⁷ Kaylee Tremelling et al., “Orthorexia Nervosa and Eating Disorder Symptoms in Registered Dietitian Nutritionists in the United States,” *Journal of the Academy of Nutrition and Dietetics* 117, no. 10 (2017): pp. 1612-1617, <https://doi.org/10.1016/j.jand.2017.05.001>.

United States and elsewhere, have noticed that many of these dietitians appear not to understand nonwhite dietary cultures and lifestyles, which inhibits their ability to offer culturally sensitive and competent support services to clients of color.⁸ Nearly 80 percent (77.8 percent) of registered dietitians and registered dietitian nutritionists are white.⁹ This disparity is likely due to gatekeeping requirements that too often disqualify applicants of color, whether unintentionally or not.

To become a registered dietitian, practitioners must earn a degree from an accredited program, complete an internship (paid or unpaid) or supervised learning program, and pass a registration examination that costs \$200.¹⁰ It is unclear how many paid versus unpaid internships are available for registered dietitians, but unpaid internships create a financial barrier, restricting people whose incomes make it impossible to afford to offer free labor.¹¹ Unpaid internships also open the door for exploitation beyond free labor. Women are more inclined to accept unpaid internships, but since interns are not classified as employees in most states, the interns do not receive basic protections against workplace discrimination or harassment. Furthermore, unpaid internships are less likely to lead to lucrative full-time employment, thereby exacerbating the gender

⁸ Anjane Kohli, *Cultural Diets and the need for diversity in dietetics*, British Dietetic Association, <https://www.bda.uk.com/resource/cultural-diets-and-the-need-for-diversity-in-dietetics.html> (last visited Jan 8, 2023).

⁹ “ACADEMY/COMMISSION ON DIETETIC REGISTRATION DEMOGRAPHICS,” Commission on Dietetic Registration, accessed February 9, 2022, <https://www.cdrnet.org/academy-commission-on-dietetic-registration-demographics>.

¹⁰ Priya Krishna, “Is American Dietetics a White-Bread World? These Dietitians Think So,” *New York Times*, December 7, 2020, <https://www.nytimes.com/2020/12/07/dining/dietitian-diversity.html>.

¹¹ Carlos Mark Vera, “Unpaid Internships Often Exclude Young People of Color. It’s Time to End Them,” USA Today (Gannett Satellite Information Network, November 16, 2020), <https://www.usatoday.com/story/opinion/2020/11/16/why-unpaid-internships-hurt-young-people-color-column/6276781002/>.

pay gap among workers given that women are more likely to take on unpaid internships in the first place.¹²

Although peer programs exist to help connect interns of color to lucrative internships, the viability of such programs on a larger scale remains unknown.¹³ Even if these internships are viable, though, they are not a guaranteed solution to eradicating racial bias and racism from the industry. Dr. Evelyn Crayton, the Academy of Nutrition and Dietetics' first Black president, noted that many of the people charged with matching students to internships are also white and might be more likely to select applicants who resemble them.¹⁴ A number of Black dietitians have come forward with their experiences of microaggressions from white colleagues. Dr. Crayton recalled being referred to as an “angry Black woman” behind her back simply for raising issues about the lack of diversity with the academy. When Dr. Crayton nominated Black dietitians for leadership roles, they were often rejected. Other marginalized people also report microaggressions from dietitians within the profession. Kai Iguchi, a dietitian in Oconomowoc, Wisconsin, noted their discomfort coming out as nonbinary to graduate school peers since so many within the programs were “cisgender, thin, white and female.”¹⁵

Even when some white dietitians have tried embracing diversity for their clients, dietitians of color have often felt misunderstood by their peers. Ryan Bad Heart Ball, a

¹² Pavithra Mohan, “How Unpaid Internships Hurt All Workers and Worsen Income Inequality,” *Fast Company*, August 21, 2019, <https://www.fastcompany.com/90388911/how-the-unpaid-intern-economy-feeds-income-inequality>

¹³ Kate Gardner Burt et al., “Strategies and Recommendations to Increase Diversity in Dietetics,” *Journal of the Academy of Nutrition and Dietetics* 119, no. 5 (2019): pp. 733-738, <https://doi.org/10.1016/j.jand.2018.04.008>.

¹⁴ Priya Krishna, “Is American Dietetics a White-Bread World? These Dietitians Think So,” *New York Times*, December 7, 2020, <https://www.nytimes.com/2020/12/07/dining/dietitian-diversity.html>.

¹⁵ Kate Gardner Burt et al., “Strategies and Recommendations to Increase Diversity in Dietetics,” *Journal of the Academy of Nutrition and Dietetics* 119, no. 5 (2019): pp. 733-738, <https://doi.org/10.1016/j.jand.2018.04.008>

Native American dietitian working with the Oglala Sioux Tribe in Pine Ridge, South Dakota, stated that “many of his peers praise the nutritional value of traditional Indigenous ingredients like salmon and bison,” while lacking the cultural and historical context regarding federal government legislation that makes it harder for Native Americans to obtain such traditional foods on their land. This lack of understanding is partly rooted in institutional failure. Black dietitian Jessica Wilson recalled her experiences at the University of California’s dietetics program: she was the only Black student, and her program devoted only a single day to ethnic nutrition—and this day was spent explaining why ethnic diets were bad (e.g., Mexican food being generalized as greasy, Indian food being generalized as heavy, etc).¹⁶ Luckily, some dietitians, including ones who grew up with diverse palates, are incorporating foods their clients of color were raised with and prefer. Unfortunately, other dietitians don’t learn about ethnic nutrition in their program or spend only a limited time on the topic. Sherene Chou, a Los Angeles-based dietitian, organized a letter that was signed on behalf of 70,000 practitioners and students, admonishing the Academy of Nutrition and Dietetics for its systemic racism—including rebuffing non-Western foods and implying such foods are unhealthy—and outlining steps to effectuate antiracism practices within the field (e.g., antiracist trainings and support services for people of color). Dietitians also expressed concern over the industry focusing on limiting food intake (at the risk of promoting thinness and gender normativity), rather than heeding individual client needs and eating habits.¹⁷

¹⁶ Priya Krishna, “Is American Dietetics a White-Bread World? These Dietitians Think So,” *New York Times*, December 7, 2020, <https://www.nytimes.com/2020/12/07/dining/dietitian-diversity.html>.

¹⁷ Priya Krishna, “Is American Dietetics a White-Bread World? These Dietitians Think So,” *New York Times*, December 7, 2020, <https://www.nytimes.com/2020/12/07/dining/dietitian-diversity.html>.

The Federal Government Could Switch Its Approach

The U.S. Department of Agriculture (USDA) is also accused of embracing a western-centered diet for those seeking clean-eating recipes on its database, MyPlate.¹⁸ As of this publication, MyPlate offers 116 healthy recipes labeled as “American,” but only eight “Asian” recipes, ten “Middle Eastern” recipes, and zero sub-Saharan African dishes.¹⁹ And while the website does offer 95 Latin American or Hispanic dishes, many of the recipes are still Western-centric like the “skinny pizza” within that category.²⁰ For a country that was built on both forced migration and voluntary immigration and is therefore filled with various cultures, the USDA should use its platform to elevate the nutritiously multicultural recipes from the many groups of people that make up the United States.

How Ableism Intersects with Clean Eating (and Misogyny and Sizeism)

Some of the terminology used within clean-eating culture is ableist. Clean eating culture has shifted away from directly promoting thin bodies as the ideal toward encouraging fit bodies. Fitness, which “describes the body’s ability to function efficiently and effectively in work and leisure activities,” and is often linked to clean eating as well as exercise, which “is antithetical to [fatness] and disability” because one’s size and abledness are shown as evidence of one’s fitness.²¹

¹⁸ Priya Krishna, “Is American Dietetics a White-Bread World? These Dietitians Think So,” *New York Times*, December 7, 2020, <https://www.nytimes.com/2020/12/07/dining/dietitian-diversity.html>.

¹⁹ “Recipes,” MyPlate (USDA), accessed February 11, 2022, <https://www.myplate.gov/myplate-kitchen/recipes>.

²⁰ Priya Krishna, “Is American Dietetics a White-Bread World? These Dietitians Think So,” *New York Times*, December 7, 2020, <https://www.nytimes.com/2020/12/07/dining/dietitian-diversity.html>.

²¹ Kaley M Roosen and Jennifer S Mills, “What Persons with Physical Disabilities Can Teach Us about Ob*sity,” *Health Psychology Open* 3, no. 1 (January 2016): p. 205510291663436, <https://doi.org/10.1177/2055102916634362>.

Despite experiencing higher rates of bodily dissatisfaction and mental distress, including anxiety and depression, along with experiencing elevated risks for eating disorders, physically disabled women in particular tend to be erased from the literature. Women with physical disabilities are also more likely to weigh more than women without disabilities. In their research, Kaley M. Roosen and Jennifer S. Mills linked ableism and sizeism—society’s preference for thinner bodies—and noted how both can lead to internalized shame over one’s body. Given that physically disabled women do not meet society’s ableist and sizeist beauty and health expectations, more research and attention should be focused on how clean-eating culture and practices affect their lives, including efforts to lose weight that may be fueled by attempts to achieve societal acceptance, as Roosen and Mills have found in their initial study.²² As ableism continues to drive clean-eating culture and our greater society, it overlaps with the oppressive systems that harm disabled and fat people. For example, this list of prejudices that fat people encounter is strikingly similar to those that disabled people face in medicine, relationships, education, employment, and other daily interactions:

- ***Dating and Relationships:*** Fat people are routinely viewed as unattractive
- ***Education:*** Fat students at all grade levels tend to be bullied and are either viewed negatively or, worse, treated worse by their instructors
- ***Employment:*** Fat employees are viewed as disagreeable, less conscientious, lazy, or sloppy, and are typically paid less and promoted less often than their thinner counterparts for the same jobs
- ***Fashion:*** Clothes aren’t often tailored to fit fat people’s bodies
- ***Medicine:*** Fat people are often viewed by medical professionals (including dietitians) as being lazy, weak-willed, or lacking care for their personal health.

²² Kaley M Roosen and Jennifer S Mills, “What Persons with Physical Disabilities Can Teach Us about Ob*sity,” *Health Psychology Open* 3, no. 1 (January 2016): p. 205510291663436, <https://doi.org/10.1177/2055102916634362>.

This leads to misdiagnosis and fat people receiving other mistreatment (or no treatment at all)²³

Size discrimination isn't the only kind of inequity associated with clean eating. Dietitians, food writers, and other promoters of clean eating may not be aware that autistic people may have sensory aversions to certain foods, including those often thought of as "clean."²⁴ For example, many find the textures, tastes, and smells of certain foods, such as eggs, raw vegetables, and sinewy meat, aversive.²⁵ According to JungJa Park Cardoso's dissertation, "Negotiating and Navigating Invisible Food Deserts: An Exploratory Study on Foodways of Adults on the Autism Spectrum," these food aversions can affect autistic people's ability to plan, cook, and serve nutritious meals that meet their sensory, cultural, and dietary needs, creating a kind of "food desert."²⁶ For autistic people with food aversions, food deserts aren't just areas without supermarkets; they're areas where food may be plentiful, but the stores and restaurants in which it is sold and served are inaccessible. Dietitians working with autistic people should understand these access needs and help create meal plans that meet their nutritional needs—and avoid setting off aversions in the process. Dietitians who don't understand autistic people's eating habits might make suggestions that autistic people find inaccessible or outright offensive.

²³ Akbar, Ginneh L. and Panichelli, Meg, *Fatness, Intersectionality, and Environmental Justice: Working Towards Health and Sustainability*, (Sustainability Research & Practice Seminar Presentations, West Chester University of Pennsylvania, Oct. 30, 2019), https://digitalcommons.wcupa.edu/cgi/viewcontent.cgi?article=1009&context=srca_sp.

²⁴ JungJa Park Cardoso, "Negotiating and Navigating Invisible Food Deserts: An Exploratory Study on Foodways of Adults on the Autism Spectrum," CUNY Academic Works (dissertation, 2016), https://academicworks.cuny.edu/cgi/viewcontent.cgi?article=2631&context=gc_etds

²⁵ JungJa Park Cardoso, "Negotiating and Navigating Invisible Food Deserts: An Exploratory Study on Foodways of Adults on the Autism Spectrum," CUNY Academic Works (dissertation, 2016), https://academicworks.cuny.edu/cgi/viewcontent.cgi?article=2631&context=gc_etds

²⁶ JungJa Park Cardoso, "Negotiating and Navigating Invisible Food Deserts: An Exploratory Study on Foodways of Adults on the Autism Spectrum," CUNY Academic Works (dissertation, 2016), https://academicworks.cuny.edu/cgi/viewcontent.cgi?article=2631&context=gc_etds

Our Recommendations

- **Expand access to food-assistance programs**, including the Supplemental Nutrition Assistance Program (SNAP, formerly known as Food Stamps) and Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)
- **Encourage the U.S. Department of Agriculture to promote culturally diverse recipes** on MyPlate
- **Increase the minimum wage** so that people can afford healthy meals for themselves and their families
- **Promote and expand Farm-to-School programs** so that schools are not burdened by supply chain issues and students have greater access to nutritious, locally sourced food
- **Introduce sensory-friendly hours** at supermarkets and convenience stores
- **Include content about race, disability, and size discrimination** in dietetics curricula
- **Conduct further research on autistic people, nutrition, and sensory needs**

While we do not have all the tools for shifting clean-eating culture—and our society—toward being more body-positive, accessible, and fat-accepting, this piece is intended to raise awareness of the many ways in which ableism, sexism, and racism creep into our daily lives, including our diets and how we view clean eating. After all, we all need to eat.

As you consider your own diet, please recognize that not everyone—including dietary experts—understands how race, disability, and gender influence our diet and understanding of our bodies. Take that into account as you seek out professionals or guides to help you in your diet and eating habits.



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