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“I rarely ate meat; I mainly ate vegetables [in my country of origin]. My diet has worsened since I arrived in New York. I cannot eat chipiles, frailes, cacayas because I cannot find them.”

-NÁHUA MOTHER

“My diet has worsened because there are many processed foods here, and I can no longer eat quelites or chilacayotes because I can rarely find them here [New York City].”

-MIXTECO MOTHER

“Here, food contains chemicals, unlike in our home country where food was organic. Here, everything is purchased and has to be kept in a freezer, unlike in our country where we would eat the harvest.”

-MAM MOTHER

“Policies and practices based on a history of racism and discrimination (often referred to as structural racism) have created neighborhoods with high rates of poverty and limited access to resources that promote health.”

**-OXIRIS BARBOT, MD
HEALTH COMMISSIONER**

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About the cover photo: Irwin Sanchez, renowned Náhua chef, demonstrating the day's recipe.

RECOMMENDATIONS

Keeping healthy culinary traditions can be challenging for immigrants who live thousands of miles from their homelands, with limited access to traditional foods. This can be even harder for Indigenous people, who now find themselves living in large urban centers where fast food thrives. The Health Department recommends and will carry out culturally sensitive nutrition initiatives that address the environmental and social conditions that restrict healthy choices.

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†2012-2016 American community survey 5-year estimates. United States Census Bureau.
https://factfinder.census.gov/bkmk/table/1.0/en/ACS/16_5YR/S1901/0100000US. Accessed April 8, 2019.

‡The definition of American Indian or Alaskan Native used in the 2010 Census is "a person having origins in any of the original peoples of North and South America (including Central America), and who maintain tribal affiliation or community attachment."

Promoting the Health of Indigenous People Living in New York City Through Culture, Food and Language



BACKGROUND

NYC is now home to the largest population of Indigenous peoples living in an urban center in the United States. Despite their deep roots and widely celebrated civilizations, such as the Aztec, Maya and Inca, Indigenous people from Latin America often face discrimination and major challenges to their well-being. These challenges, including poverty and illness, stem from historical oppression and disenfranchisement, and continue to threaten the cultural practices, languages, and knowledge systems of Indigenous communities.

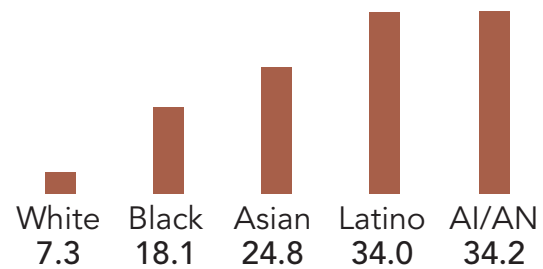
Recognizing the need for community-based approaches, the NYC Health Department supported the Xilonen^b Project, a seven-week series of activities related to Indigenous cultures. These activities focused on food, language and community, in partnership with the Endangered Language Alliance and the Little Sisters of the Assumption Family Health Service.

^aIn this brochure, we use the term Indigenous people of the Americas to be synonymous with the terms American Indian or Alaska Native, because the Census classifies Indigenous people under these terms. Data specifically for Indigenous people does not currently exist. Preferably, Indigenous people should be referred to by their tribal name or nation's name.

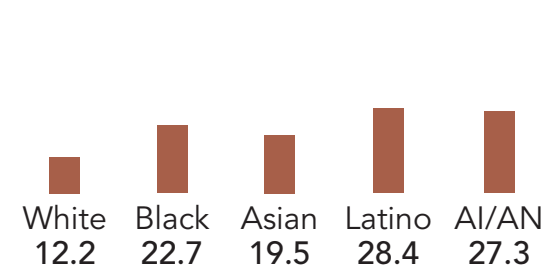
^bAbout the project name: Xilonen was proposed because of Xilonen, the Náhua goddess of corn and the personification of tender corn, baby corn and an abundant harvest.

Selected Social Indicators of American Indians (AI) and Alaska Natives[†] (AN) in New York City ^{†(source information on back panel)}

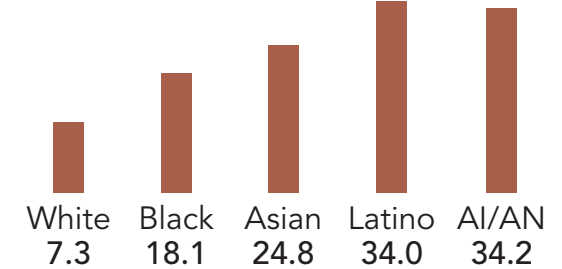
Percentage of People Age 25 or Older Without a High School Diploma or GED, by Race or Ethnicity, 2012-2016



Percentage of People With Income Below the Federal Poverty Level, by Race or Ethnicity, 2012-2016



Percentage of People With No Health Insurance, by Race or Ethnicity, 2012-2016



OVERVIEW

Living in high-poverty neighborhoods limits healthy options and makes it difficult to access quality health care and resources that promote health. Xilonen responded to the social and cultural priorities of the Náhua, Mixteco and Mam Indigenous communities from present-day Mexico and Guatemala. Xilonen provided a supportive space for Indigenous people to connect with each other, use their native language and prepare weekly meals with ingredients from their homelands.



ACTIVITIES

- Conducted seven one-hour discussions about health and wellness (with topics including the challenges of keeping a healthy diet, changes in diet after emigration, discrimination, raising children, preserving one's Indigenous language, access to health care and the use of non-Western medicine)
- Reviewed the weekly recipe's nutritional content, origins of ingredients and preparation instructions
- Presented to parents and children about food in Mam, Mixteco and Náhua



ONGOING ACTIVITIES AND FUTURE PLANS

- Continue to lead programs and policies that increase access to and consumption of healthy whole foods and beverages, while decreasing availability and consumption of unhealthy, highly processed foods and beverages.
- Partner with grassroots and community-based organizations to research and create programs that respond to the social and cultural priorities of Indigenous communities.

Languages:

*Mam

**Mixtec

***Náhua