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Racism and food insecurity: misfortunes of a *Quilombola* community in the Brazilian Legal Amazon

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Abstract This study examined food insecurity in the Quilombola community of Imbiral Cabeça-Branca, in Maranhão, Brazil, during the COVID-19 pandemic. A cross-sectional study was conducted in the last quarter of 2021 with 25 household heads from the community. Most participants were women (52.0%) with low schooling and were unemployed (68.0%), and 76.0% received a Federal Emergency Aid. The mean household density was four people, and houses were predominantly made of rammed earth, lacking basic sanitation. The consumed water came from artesian wells, and most houses had electricity. Food insecurity was identified in all households, with 12.0% classified as mild, 24.0% as moderate, and 64.0% as severe. The severe form was more common in households headed by single men (75%), older adults, less-educated individuals (78.7%), and the unemployed (64.7%). Food insecurity in the Quilombola community and other similar communities in the country results from substandard living conditions, unemployment, food deprivation, and lack of land titling. These factors also contribute to the perpetuation of institutional and environmental racism faced by these communities.

Key words Health of the Black Population, Quilombola Communities, Food Insecurity, COVID-19 THEMATIC ARTICLE

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Introduction

Quilombola communities are characterized as groups of descendants of enslaved Africans who fled or rebelled against slavery in Brazil and who continue to struggle to improve their living conditions and preserve their customs, beliefs, and traditions. Marked by historical discrimination and exclusion, they face a very different socio-economic reality from most of the Brazilian population and only began to gain prominence in 1988, when the new Constitution included in Article 68 of the Transitional Constitutional Provisions Act (ADCT) of the Federal Constitution the right to land ownership for the Remaining Quilombo Communities (CRQs)1.

According to the 2022 Census, the Quilombola population totals 1.32 million people, or 0.65% of the country's total population2, with more than 3,600 officially recognized CRQs in Brazil3. Bahia is the leading state with 29.90% (397,059 individuals) of the Quilombola population, followed by Maranhão with 20.26% (269,074 individuals). The two states account for half (50.16%) of the country's Quilombola population².

At the same time, data from the latest Household Budget Survey (POF) reveal that the Black population had a much higher prevalence of Food Insecurity (FI) than the white population⁴. The relationship between ethnicity/skin color and FI is complex and interconnected with other determining factors, including poverty, unemployment, and the lack of public policies that guarantee access to health and food security⁵.

Cherol et al.6 highlighted a prevalence of 86.1% of FI among Quilombola, and the North and Northeast regions showed the highest proportions (67.1% and 48.3%, respectively), reinforcing the inequalities experienced by these groups resulting from persistent racism in the country.

In March 2020, the world suddenly experienced the COVID-19 pandemic, which has brought social changes in people's daily lives, and political and economic impacts that have affected all societal layers, highlighting the situations of neglected groups such as Quilombola communities^{7,8}.

The pandemic has impacted Quilombola communities, aggravating the lack of essential health and sanitation, unemployment, FI, and deteriorating poverty and hunger levels8. Another issue is that Quilombola communities, especially those not granted land titles, live under constant threat of losing or being removed from

their territories by prominent entrepreneurs, farmers, and land grabbers9.

With limited economic resources, Quilombola households also experience food monotony and need more nutrients10. Indicators of multiple vulnerabilities related to access, consumption and biological use of food, social and economic conditions, and nutritional status have been used to characterize situations of violations of the right to adequate food¹¹.

Vulnerable population groups, such as Quilombola, are more prone to FI due to insufficient income, unemployment, and underemployment, housing deficiencies, lack of access to education, poor health conditions, social marginalization, illiteracy, and institutional and environmental racism, which were aggravated by the COVID-19 pandemic^{12,13}.

Nevertheless, studies on the nutritional status of specific populations, such as Quilombola, especially during the pandemic, are still scarce. Data from the II VIGISAN, conducted by the PENSSAN Network¹³, reveal ethnic-racial inequalities, with higher FI in households headed by Black or brown people (18.1%) compared to households headed by whites (10.6%).

This set of perspectives, especially concerning FI among Quilombola in the Maranhão lowlands, are the driving factors behind this study that aimed to analyze the food insecurity situation of households in the Imbiral Cabeça-Branca Quilombola community in Pedro do Rosário, Maranhão, during the COVID-19 pandemic period.

Methods

Study design, characterization, and population

This cross-sectional analytical study was conducted in Imbiral Cabeça-Branca, a self-declared Quilombola rural population center located on the west bank of the Turiaçu River, in the rural area of Pedro do Rosário, Maranhão, Brazil. The municipality is one of the 181 municipalities in Maranhão that make up the Brazilian Legal Amazon, with an estimated population of 25,560 people and a Municipal Human Development Index of 0.15614.

Imbiral Cabeça-Branca currently has 73 self-declared Quilombola spread over 25 households. For this study, which involved purposive sampling, we interviewed all the heads of self-declared *Quilombola* households of legal age (both genders) who lived in the community and voluntarily agreed to participate in the research. The inclusion criteria required them to be members of households registered in the *Quilombola* community and not to have any cognitive impairments (necessary for answering the questionnaires) that would hinder data collection.

Methodological, health-related, and ethical procedures for data collection

In the first stage, in December 2020, the community leaders and their families were contacted to obtain formal consent for the study. Issues relevant to the research, such as the objectives, applicability, doubts, and needs, were clarified to the group. The health-related measures to protect against the new coronavirus were respected, such as distancing 1.5 m between people, wearing face masks, and using alcohol gel for regular hand hygiene.

Data were collected from October to December 2021, when most adults and older adults had already received at least two doses of the COVID-19 vaccine. Each household head signed the Informed Consent Form (ICF) before answering the questionnaires. The study was approved by the Research Ethics Committee of the University Hospital of the Federal University of Maranhão under Resolution No. 466/2012 of the National Health Council.

Data collection and processing

We adopted a questionnaire based on the National Health Survey (PNS)¹⁵ to obtain socioeconomic and sociodemographic indicators information. The 14-question Brazilian Food Insecurity Scale (EBIA)¹⁶ was used to diagnose the population's food security situation.

The statistical analysis used Student's t-test for the socioeconomic variable "age group". Fisher's exact test was employed to compare the frequencies between the groups and the FI levels, whose variables were dichotomized. Mild and moderate FI were grouped to isolate the outcome variable, severe FI.

The data were entered in Microsoft Office Excel* spreadsheets and analyzed in STATA 16*, with a 5% significance level.

Results and discussion

The results of this study will be presented starting with the socioeconomic and demographic characterization of the 25 households evaluated, followed by a description of the outcome variable, severe FI, based on the perception of the household head interviewed.

Socioeconomic and demographic characterization of household heads and households in the *Quilombola* community of Imbiral Cabeça-Branca, Pedro do Rosário, Maranhão

The absolute frequency for the "household head gender" variable showed negligible differences between men and women (48% and 52%, respectively). The age range of the household heads was 18 to 88, with only two households having elderly heads. Regarding racial self-declaration, most self-declared Black, while two household heads self-declared Indigenous. Moreover, most had companions. These and other socioeconomic and demographic data on the households are described in Table 1.

Similar findings were found in a study of heads of *Quilombola* households in Sergipe, in which the distribution of heads by gender was 53.4% females and 46.6% males¹⁷. Also, other studies on *Quilombola* households in Maranhão found a proportion of 57.47% females and 42.53% males, 51.5% females and 48.5% males, respectively, showing a common regional reality^{18,19}.

The predominance of women as household heads in *Quilombola* communities is complex and influenced by social, economic, and historical factors, including gender inequalities and structural racism. Black women face barriers, increasing their responsibility for making a living. Active participation in the economy, male migration for employment, the effects of racism and imprisonment, and family fragmentation of slavery affect *Quilombola* family dynamics. These factors interact, highlighting the need to understand unique experiences. Female predominance does not indicate male absence but shapes family dynamics through contextual and historical influences²⁰.

Imbiral Cabeça-Branca has a *Quilombola* school established and maintained by the Community Residents' Association. It has reduced the number of illiterate children and young people to almost zero. However, this study found that more

Table 1. Socioeconomic, demographic, service access, and housing conditions indicators for household heads and households in the Imbiral Cabeça-Branca Quilombola community. Pedro do Rosário, Maranhão, 2022.

12 48
13 52
23 92
2 8
23 92
2 8
16 64
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17 68
8 32
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s/household
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Source: Authors.

than half of the household heads in Imbiral had not completed their primary education. Furthermore, due to the lack of schools offering secondary education in the community and neighboring settlements, young people in the territory cannot continue their studies beyond elementary school.

Low schooling is a long-standing problem in Quilombola communities. Surveys such as the Quilombola Nutrition Call²¹, which worked with 3,000 Quilombola households, and the Survey to Assess the Food and Nutrition Security Situation in Quilombola Communities with the Right to Land²², conducted in Quilombola communities in the five Brazilian regions, already showed low schooling among the household heads, 47% and 85.7%, respectively.

The family head's education level directly affects the household's economic and social status. Parents with low schooling levels may face more significant challenges supporting their children's formal education, early childhood care, assistance, and adequate nutrition23. However, transmitting knowledge through tradition, orality, a practice passed down between generations in Quilombola communities also plays a significant role in survival. We should underscore that this form of education does not guarantee access to the university, but can contribute to developing cognitive and emotional skills fundamental for success in life, regardless of the schooling level²⁴.

Moreover, the social inequality driven by the neoliberal model mainly harms the more impoverished and the traditional communities. Besides facing the difficulties of surviving with dignity, these communities bear the marks of a past of social exclusion and structural racism. Since 2020, these communities have fought against the oppressive economic system and also faced the invisible threat of COVID-1925.

It is evident that the economic crisis had severely affected the Brazilian economy even before the pandemic. In 2019, the unemployment rate reached an alarming 12.2%, leaving one in four workers unemployed. Since 2017, public health expenditures have been drastically reduced due to Constitutional Amendment N° 95 (EC-95), which froze public spending for 20 years. Furthermore, a significant growth of 9.5% in public debt was observed in 2019, corresponding to 56% of GDP²⁶.

Another point is that, lacking a national policy to guide actions during the health crisis, state and municipal authorities took charge and implemented public health measures to contain the transmission of the virus, including the closure of non-essential services and interventions that ranged from social distancing to more severe measures, such as lockdowns. These actions impacted several societal sectors differently, most severely affecting the most vulnerable groups, such as Indigenous people and Quilombola^{27,28}.

Most adults and household heads are fishermen and farmers in Imbiral. They could not work during the pandemic, as agricultural activities were also paralyzed. As in other communities across the country, Imbiral farmers faced a dilemma: go farming and risk getting infected with the virus, or stay at home and be unable to support their families.

Small households with up to four residents per household and minors predominate in Imbiral. A household with fewer people is easier to maintain and sustain since the *Quilombola* socioeconomic reality is not conducive to high household density. It is no coincidence that studies claim that households with a high number of residents are more likely to suffer from FI than others^{19,22}.

The predominant housing material in the community is rammed earth. Basic sanitation is lacking; water for various uses comes from natural/artesian wells. Most households still burn their garbage. On the other hand, the community benefits from electricity, possibly due to the efforts of the "Light for All" Program established in 2003 and from community internet provided by the *Boa Esperança Quilombola* School Unit in the community.

As for basic sanitation, Imbiral Cabeça-Branca reflects a problem highlighted by scholars in Quilombola communities: the lack of or precarious assistance of this public health service. Data from the Quilombola Nutritional Call indicated that only 30% of households had running water, and 3.2% accessed a sewage system²¹. This result aligns with the study by Silva et al.19, which revealed the lack of sewage disposal in 88.7% of the Quilombola households assessed in Maranhão, and with the work by Melo and Silva²⁹, which identified substandard access to health services and a lack of environmental sanitation in Ouilombola communities in Pará. We should underscore that Pedro do Rosário, Imbiral Cabeça-Branca community, has only 4.1% adequate sanitation throughout its territory¹⁴.

A study of 57 municipalities in Bahia by Pereira *et al.*³⁰ reported that those with the highest water supply and sewage system coverage had the most favorable conditions for food security.

Unsatisfactory or insufficient water and sewage systems can compromise individuals' use of food and nutrients through microbiological and physical contamination. They can also make individuals and populations more vulnerable to infectious and parasitic pathologies that affect general health and nutritional status³¹.

Thus, the interconnection between the denial of the right to food and the denial of other rights, such as access to drinking water, adequate housing, education, and health, highlights the complex challenges in *Quilombola* communities. The simultaneous absence of these rights suggests a context of vulnerability and marginalization faced by *Quilombola* households. These depri-

vations are not independent but intertwined, forming a cycle of challenges that hinder the full realization of a dignified and healthy life.

Food and nutrition insecurity in the Imbiral Cabeça-Branca *Quilombola* community

Analysis of the data from the household heads revealed that no household in the Imbiral Cabeça-Branca *Quilombola* community was in a situation of Food Security during the study period. As indicated by the results obtained by applying the EBIA, the proportions of FI among the families are described in Table 2.

When analyzed by gender, severe FI was higher in male-headed households, especially among single men, mainly due to the lack of employment and income, which deteriorated during the pandemic due to the social distancing measures implemented to combat the spread of the COVID-19 virus. Severe FI levels were also significant in households where the heads were older adults with low schooling levels and were unemployed, reiterating the challenging situation of social vulnerability in the community (Table 3).

These results corroborate those of the II VI-GISAN, which analyzed the food security situation and FI levels in Brazilian states, showing that severe FI affects 2.1 million people in Maranhão, corresponding to 29.9% of its population¹³.

According to the 2011 *Quilombola* Census⁶, 86.1% of the 8,743 households investigated reported FI, 55.9% had moderate/severe FI, and most were headed by men aged ≥51 years. Another important point from the Census conducted over a decade ago is that when the household head was single/divorced, moderate/severe FI was 1.5 times more likely than those headed by a couple (married or in common law marriage). Unfortunately, the situation of Maranhão's *Quilombola* population has remained just as precarious over the years.

Unemployment is widespread in *Quilombola* communities and is substandard when employment is available, characterized by low pay, seasonality, daily wages, and poor working conditions. Many of these communities are located where employment is scarce due to low economic development or increasing agricultural activity mechanization³².

Unemployment and the lack of local work alternatives lead to a restricted household income, directly affecting access to food quantitatively (insufficient amount per energy intake needs) and qualitatively (food nutritional aspects)³³.

Data from the National Continuing Household Sample Survey (PNAD Continua) for the

Table 2. Prevalence of food security and insecurity among Imbiral Cabeça-Branca Quilombola community household heads. Pedro do Rosário, Maranhão, 2022.

Food security levels	n	%
Food security	0	0
Mild Food Insecurity	3	12.0
Moderate Food Insecurity	6	24.0
Severe Food Insecurity	16	64.0

Source: Authors.

Table 3. Prevalence of Food Insecurity by socioeconomic and demographic data in the Imbiral Cabeça-Branca Quilombola community. Pedro do Rosário, Maranhão, 2022.

	Mild/		
Variables	Moderate	Severe FI	p
	FI	1/0/	value
	n/(%)	n/(%)	
Age group			
18-59 years	9 (39.13%)	14 (60.87%)	0.87
60+ years	0 (0%)	2 (100%)	
Gender			
Male	3 (25%)	9 (75%)	0.24
Female	6 (46.15%)	7 (53.85)	
Ethnicity			
Black	8 (34.78%)	15 (65.22%)	0.45
Non-Black	1 (50%)	1 (50%)	
Marital status			
With companion	7 (43.75%)	9 (56.25%)	0.26
Without	2 (22.22%)	7 (77.78%)	
companion			
Schooling			
Less than 8	3 (21.43%)	11 (78.57%)	0.09
years of study			
More than 8	6 (54.55%)	5 (45.45%)	
years of study			
Unemployed			
Yes	6 (35.29%)	11 (64.71%)	0.62
No	3 (37.50%)	5 (62.50%)	
Received			
Emergency Aid			
Yes	8 (42.11%)	11 (57.89%)	0.26
No	1 (16.67%)	5 (83.33%)	
Source: Authors		. ,	

Source: Authors

second quarter of 2021 indicated that the unemployment rate in Brazil was 14.1%, totaling 14,444,000 unemployed people. It was most prevalent in the 25-39 age group (33.9%). In the Northeast, the unemployment rate reached 18.2%, exceeding the national average and the other Brazilian regions³⁴.

Another crucial point is that the increase in food prices in the staple food basket, unemployment, and declining household income caused by COVID-19 have directly affected consumers' purchasing patterns. The pandemic has increased demand for basic foodstuffs and the dollar, affecting the exchange rate, making raw materials more expensive, and imposing constraints on imports and exports, resulting in more expensive products for the end consumers³⁵.

In Imbiral Cabeça-Branca, the household heads mentioned that most of their income came from the Federal Emergency Aid. However, the families still felt hungry in their homes, as the amount they received was insufficient to guarantee the food they needed. They also reported delays in payment and difficulties accessing the banking system due to limited internet connection or lack of devices to register. Moreover, they had a challenging journey to get to the nearest bank branch or lottery office, facing long queues and crowds, a reality shared by several other *Quilombola* communities in the country³⁶.

Another aspect that expanded the impact of the pandemic on *Quilombola* communities is the various hindrances to accessing fundamental public policies such as health, education, and those aimed at regularizing their territories, have long been in place in the communities. The significant level of vulnerability in *Quilombos* and other Black groups is aggravated in severe crises, such as COVID-19³⁶.

In this pandemic, *Quilombola* communities, such as Imbiral Cabeça-Branca, have experienced tensions and threats of removing a part of the community as a result of the attempted expansion of agribusiness. They constantly witness fires, chainsaws, tractors, and machinery on the outskirts of their lands, devastating and threatening the survival of the families and the region's biodiversity.

According to community members' accounts, the land they once planted no longer bears fruit and has been impoverished due to devastation. The people of Imbiral Cabeça-Branca have already made countless complaints and demonstrations to the state government, but they have not received any favorable return.

These results clearly show how institutional racism and environmental racism profoundly affect the lives of Brazilian *Quilombola*, especially during the COVID-19 pandemic. These discrimination forms are intrinsically related and contribute to the vulnerability and inequality these communities endure, directly affecting food security.

Institutional racism manifests through policies, practices, and structures that perpetuate the exclusion and marginalization of *Quilombola* communities. These discriminatory practices hinder access to essential services such as health, education, sanitation, and adequate infrastructure, evidencing a collective failure to provide people with appropriate and professional service because of their skin color, culture, or ethnic origin³⁷, which has resulted in insufficient access to information, testing, treatment, and vaccination against COVID-19 in the community during the pandemic.

On the other hand, environmental racism refers to the degradation and appropriation of *Quilombola* territories, often related to the exploitation of natural resources, agribusiness, and extractive industries. These environmentally damaging activities adversely affect the availability of food resources, such as drinking water, safe food, and healthy environments³⁸. During the pandemic, many *Quilombola* communities face barriers to accessing financial and food resources due to disrupted supply chains and restrictions imposed by social distancing measures, increasing the perception of hunger³⁹.

The relationship between these two types of racism and the *Quilombola* food insecurity is clear. Institutional and environmental racism limit access to resources and opportunities, affecting the ability of *Quilombola* communities to produce food on their territories, and obtain adequate and nutritious food through external systems – this lack of access to sufficient and healthy food results in high food insecurity rates in *Quilombola* communities⁴⁰.

Furthermore, the data analysis revealed that most interview respondents were women with low schooling levels and unemployed, showing gender inequality and limited access to educational and economic opportunities for *Quilombola* women. This disparity reflects a form of racism that perpetuates marginalization and a lack of equal opportunities for this population.

It is crucial to consider intersectionality when analyzing racism in *Quilombola* communities since many *Quilombola* also face other forms of oppression, such as machismo, gender discrimination, and poverty. Intersectionality recognizes the interconnection between different forms of oppression and how they intertwine in people's experience²⁰.

The experience of racism and discrimination, a frequent and expected component of socioenvironmental conflicts in *Quilombola* communities, severely affects the health of the residents. The loss of traditional space leads to violations of the right to maintain *Quilombola* culture, FI, prohibition of free movement in the territory, and lack of access to public policies on education, health, basic sanitation, and transportation⁴¹.

This study did not identify a statistically significant association between the socioeconomic and demographic characteristics of the household heads and FI in *Quilombola* households, probably due to the small number of respondents and their homogeneity. However, all household heads in the community were included in the study, which was the first on this topic in Imbiral Cabeça-Branca, and the first to analyze food insecurity in *Quilombola* communities in Maranhão during the COVID-19 pandemic.

By presenting objective information on the living situation and food insecurity of this Maranhão *Quilombola* community, this study highlights the need to implement public policies, such as the National Policy for the Comprehensive Health of the Black Population, for *Quilombola* communities in the Maranhão Amazon. In parallel, it creates space for dialogue with local governments to implement policies and actions to improve the living conditions of these and other similar communities that have historically been denied their rights in Maranhão and Brazil.

Conclusion

The situation in Imbiral Cabeça-Branca is troubling, with a predominance of low income and schooling levels. Residents face health, education, and income shortages, living in substandard conditions and FI, reflecting the reality of many quilombos in the country. This situation results from historical factors, current social and economic inequalities, and the bureaucracy for recognition as a *Quilombola* community due to structural racism in Brazil.

The FI evidence reinforces the State's neglect of rural Black communities, with a lack of access to health policies, food, education, work, and income. The *Quilombola* reality persists and was

exacerbated during the COVID-19 pandemic, according to alerts from previous surveys about the living conditions and FI faced by the communities.

Although the inferential analyses were not statistically significant, potentially due to the small population size, the data powerfully demonstrate the substandard social and health

situation in Imbiral. We should understand the specificities of Quilombola populations to expand the coverage of public health and food and nutrition security policies locally, ensuring fundamental rights, reducing FI, improving living conditions, and reducing health inequalities in the Brazilian Black population.

Collaborations

JHR Câmara worked on the theme's design, methods, data collection, data analysis, and final draft. IVD Varga worked on supervising data collection, data analysis, and drafting review. MTBA Frota worked on methodological conception, data analysis, and drafting review. HP Silva worked on data analysis and drafting review.

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