(Mal)Nutrition and the ‘Informal Economy’
Bootstrap: The Politics of Poverty, Food Relief, and Self-Help

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DURING THE GREAT DEPRESSION, Newfoundland was a veritable laboratory for the study of nutritional deficiency diseases such as beriberi. Over a half century later, the cod moratorium encouraged academics to study the nutritional implications of economic disaster. These parallel waves of unease over diet led to the creation of several bodies of research and forced the state to address the threats posed by widespread poverty. Much of the concern during these two periods — as expressed in academic, state, and popular discourses — focused on the effect of unemployment and poverty on nutrition. Rather than providing adequate support to the poor, however, both periods of economic turmoil were ones in which the government of the day emphasized a series of self-help solutions in which the impoverished were expected to take responsibility for their own nutrition. This essay examines the ways in which both the self-help movement of the Depression era and the promotion of the “informal economy” in the 1990s were advanced as solutions to malnutrition.

INTRODUCTION

The economic depressions of the 1930s and the early 1990s are two of many periods in Newfoundland’s history in which food security emerged as a major cause for concern. Although both crises prompted academic study, a variety of economic and policy analyses, and the creation of mechanisms to address the two crises, few authors have related the two. Furthermore, the self-help movement of the Great Depression era provided a historical basis and a precedent for a limited state
response to the later crisis. The first section of this essay offers a history of beriberi and discourses surrounding self-help during the early 1930s. The second examines institutional literature related to the dole and its status as a mechanism for both moral and fiscal regulation. The third section concerns the connection between nutritional deficiencies and the self-help movement.

I examine the use of the concept of the “informal economy” in media, state, and academic discourses, and argue that the term was employed as a means of responding to malnutrition within the context of the economic crisis. During the cod crisis, the ethic of self-help discourses of the 1930s was resurrected, allowing the government to promote the “informal economy” as a new and radical response to the effects of unemployment on nutrition and diet. Despite the passage of half a century, there are striking similarities between self-help ideology and “informal economy” discourses in Newfoundland, not the least of which is that they emerge, as Gerry has argued, during slumps in “national and international economies alike.”2 The mobilization of the notion of an outport “informal economy” is a political tool rooted in the self-help movement of pre-Confederation Newfoundland.

**BERIBERI**

Hunger is difficult to measure. Beriberi, a thiamine deficiency, is generally associated with one’s inability to acquire an adequate and varied diet. Such a biomedical conceptualization facilitates quantitative investigation of disease, but also depersonalizes and depoliticizes hunger. Beriberi and poverty in Newfoundland were intricately connected, and it bears asking how the state responded to these problems. By considering beriberi and its associations with poverty we can repersonalize hunger. Examining the government response to beriberi can also contribute to an understanding of how a state policy, driven by self-help ideology and an inadequate public relief system, prolonged beriberi among the most vulnerable sections of the population.

Nutritional deficiencies occur in individuals whose intake of nutrients consistently fall below a minimum standard. Our current knowledge of vitamins and their dietary function allows us to deduce that beriberi occurs because the staple foods of its sufferers contain too little thiamine, and that supplementary foods were insufficient to correct the deficiency.7 We are not able, however, to share the benefit of that knowledge with the individuals who stepped into what Appleton described as a dietary “twilight zone” to study the disease.8 Moving beyond its etiological, biochemical and biomedical significations, it is important that we consider beriberi within the context of the social and material conditions that made it prevalent in a given population, and examine the state responses to the shortage of food.

Beriberi is not universally a disease of poverty or isolation. As Carpenter notes, studies of the disease in 19th century Japan found that the poorest fed were most frequently exempt while the “strong, well-nourished people were most at
risk.” Thiamine is found in the outer husk of wheat and rice, so those who could afford refined staples were at a greater risk of developing the deficiency. Consider, for example, Duane Simmons’ analysis as a physician working in Japan during an epidemic of beriberi in the late 19th century:

I must admit, however, that rice of the better quality is badly borne by those suffering from this disease, while at the same time it is the chief food of those most liable to it. A change, too, from this to a coarser food, such as barley and beans, is a measure of great importance in the treatment of the disease. In what the difference consists, unless the latter articles are more laxative than rice, or contain more potash (rice being poor in this respect), I am unable to state.5

Nor is beriberi strictly a disease of hunger; one can have his or her caloric needs met and undergo what might be called ‘starvation on a full stomach.’ In a sense, beriberi starves its victim whether or not they have food. Nevertheless, in Newfoundland during the 1930s, beriberi was a disease of poverty, hunger, and isolation. Consider Helen Mitchell’s nutritional survey at Battle Creek, Labrador, which refers to the caloric status of the local diet:

A study of the nutritive balance of the year’s food supply showed few families with a shortage of total calories. The protein, fat and carbohydrate were in reasonable proportion, starches predominating over sugars due to the extensive use of bread. The nutritive shortages were chiefly evident among the minerals and vitamins.6

Beriberi was certainly a disease of poverty in Newfoundland; it was a disease of those who had a diet of tea, white bread, and molasses for much of each year. Indeed, in 1912, J.M. Little suggested that the cause of beriberi in Newfoundland was the common reduction of dietary variety to bread, made of white flour, and tea, “at certain times of the year.” It is clear that the government of the day could not believe that beriberi resulted from some immutable geographic or climactic character of the island. Consider the following from W.R. Aykroyd, who studied the diet of both families who had and who had not contracted beriberi in Northern Newfoundland and Labrador. It led him to conclude that those with access to more varied foods were largely exempt from the disease:

To-day it is rigidly associated with poverty ... if a family can afford but a little greater variety of food than the minimum necessary to keep the body and soul together, they will escape beriberi.... The association between beriberi and poverty is so close that, in examining a suspected case of beriberi, a very useful short-circuiting question is to ask whether the patient was successful at the previous year’s fishing.7
Deficiency diseases, like infectious diseases, can saturate a given locus within a relatively short period of time, and geographical or physical isolation is a clinically convenient peculiarity. Not only does isolation allow for the conditions which bring about a vitamin deficiency, it also allows researchers to monitor epidemiological trends within a contained or relatively non-mobile population. Such conditions allow for nutritional research to take place in an area where the purchase and production of food can be measured with relative accuracy. In Newfoundland's coastal communities, both merchant records and first-hand accounts of stores acquired for the winter provided researchers with a basis for nutritional surveys. For example, Aykroyd — who provided one of the first detailed studies of what families afflicted with beriberi ate — posited that it was unlikely that subjects would forget something so important as the variety and amount of foods acquired for such a long period of time. In his survey of the diet of families in northern Newfoundland and Labrador, he put it thus:

Table I gives the actual amount of food per head bought or otherwise acquired for use in the winter and spring of 1928-9 by families in which one or more cases of beriberi developed during the spring of 1929. These stores were bought in November or December. The information was acquired by direct questioning. It was found that both husband and wife had usually a clear recollection of so important a matter as six months’ food supply.8

Although beriberi had, until the turn of the century, been often described as a “rice-eater’s disease,” connections between the disease and the consumption of other milled, refined, or thiamine deficient staple foods had been made centuries before. Although beriberi was first described in Newfoundland by J.M. Little in 1912, its first diagnosis is credited to Dr. Cluny McPherson, the doctor at the Mission Hospital for Deep Sea Fishermen in Labrador. According to Carpenter, McPherson “had four men brought to him from a fishing vessel, in various stages of paralysis of the legs, but with no fever. One seemed critically ill and died of heart failure a few days later.” McPherson considered their symptoms to be consistent with a diagnosis of beriberi but, probably due to its characterization as a tropical rice-eater’s disease, hesitated to make the diagnosis. Dr. Wilfred Grenfell is reported to have apologized, after having reviewed the cases, for initially greeting McPherson’s diagnosis with: “Where do you think you are, Mac, in Japan or Malaya? You should not let isolation distort your perspective.”9

The first formal study of beriberi in Newfoundland, carried out by Little in 1912, included the earliest discussion of the intersection between diet and the disease. His suggestion that beriberi occurred in patients who “came down to a diet of bread and tea” led to a change in the way the disease was treated on the island. As Overton suggests, the fact that a diet of wholemeal — or “brown” — bread was a cure for the disease, “was certainly known by government officials by 1916.”10
W.R. Aykroyd was perhaps the public figure to most adamantly note that the beriberi epidemic was closely associated with widespread poverty:

Its prevention is an economic rather than a medical problem.... It is possible that more headway would be made with beriberi in the tropics if administrators would come to regard it, not as a question of polished or unpolished rice, but simply as a problem of poverty.11

Not surprisingly, incidences of nutritional deficiency rose during the Great Depression. Outbreaks of the disease were reported, according to Overton, “from many districts, especially those where a large proportion of the population was on public relief.”12 The Depression was also a period during which nutritional deficiencies were increasingly recognized as such.

Scholars such as Overton (1998) and Knowling (1991) have surveyed the medical literature prompted by beriberi epidemics in Newfoundland during the first half of the 19th century. Overton argued that government offered a “least cost solution to what was a serious medical problem” by introducing brown flour into the dole ration. This “least cost solution” allowed the government to download responsibility for food security back onto the individual. The inadequacy of the relief ration — an estimated 50% of what was required to keep a person alive and healthy during the 1930s13 — assumed that individuals on public relief would use self-help measures to feed themselves. That was especially true in rural Newfoundland. There, the dole package was lower than it was in the city, since officials believed rural people were able to engage in production-for-use farming to feed themselves.

THE DOLE AS MECHANISM OF MORAL AND FISCAL REGULATION

In 1931, following the development of a systematic approach to relief provision,14 successful adult relief applicants were issued a standard ration consisting of 25lbs of flour, 1 qt of molasses, 3¾ lb of fat back pork, 2 lbs beans, 1lb split peas, 2lbs corn meal and ¾ lb cocoa.15 This was the maximum ration for an adult and many individuals, in particular children, received less.16 Prior to the Depression, the administration of relief had been unstable, with frequent overspending of the budget and drastic organizational shifts. The government intended the Magor ration (named for the administrator responsible for implementing it) to crack down on the escalating costs of public relief. At the same time, public violence and protests were an impetus for both the provision and the curtailment of relief. Officials became concerned by the protests, break-ins, and riots by the unemployed. According to Overton, “collective action by the unemployed attempted to wring concessions out of intransigent governments and on a number of occasions this led to violent confrontations with the state.”17 Violence and protest also served as a justification for
the state’s depiction of the unemployed as morally depraved, and formed the basis for the argument that their relief should be limited. The issues of collective action and violent protest were used by police and government officials, according to Overton, to “generate hostility to the unemployed.” The implementation of a system of controls featuring income and savings auditing, the requirement of statutory declarations, and a decentralized system of needs-assessment crackdown was also meant to stem the tide of dole recipients and to stop “abuse.” In the last of these, local commissioners acted as gatekeepers, determining who would receive relief. The new system was the focal point of protest and grassroots organizing among recipients, labour unions, and the unemployed. It might be said that relief policy at this time follows Handler’s (1972) model of “reformation by deterrence” almost to the letter:

The traditional method of limiting welfare costs is to exert strict control over entry and maintain careful scrutiny of those on welfare. At the same time, reformation objectives are also accomplished based on the same theory that justified the control of pauperism. People who are capable of taking care of themselves (and are thus ineligible for welfare) will be better off by not relying on welfare. In addition, public money is not available for people who “misbehave.” The way to correct behavior is to cut off aid and, if a suitable home cannot be maintained, then it should be broken up. Reformation by deterrence has retained its very simple philosophic position for 400 years.

The view that one quarter of the country’s population on the dole must certainly be a symptom of abuse of the system, rather than a sign of endemic destitution, was consistent with the implementation of the Magor ration. The ration had more to do, then, with making relief less appealing than with improving the prospect of employment. It was relief policy which preferred poverty over “pauperization,” and it was policy informed more by a desire to avoid widespread welfare dependency than starvation. That the former concern was the dominant one in shaping social policy was made clear by Commissioner Thomas Lodge:

The tragedy of Newfoundland is not that the scale of able-bodied relief is so low. It is that the scale differs so little from the standard of living enjoyed by the workers who manage to retain their complete independence and keep off the “dole.” To make relief more attractive, or less unattractive, in a community in which one quarter is already forced to apply for it, is to risk the complete collapse of the social structure.

An important dimension of the public relief system was the widely held belief that the distinction between the dole recipients and those who “managed to keep off the dole” was to be drawn along moral lines. Charles Burroughs made the difference perfectly clear: poverty was an “unavoidable evil, to which many are brought from necessity, and in the wise and gracious Providence of God.” Poverty was a result not of “our faults” but of “our misfortunes.” Further, the poor should “claim our tenderest commiseration, our most liberal relief.” Pauperism, on the other hand,
was the “consequence of wilful error, of shameful indolence, of vicious habits. It is a misery of human creation, the pernicious work of man, the lamentable consequence of bad principles and morals.” In this way, relief to the poor was charitable duty while relief to paupers was complicity in immorality and laziness. In the winter of 1934, the Commission of Government responded to outbreaks of beriberi by making wholemeal flour mandatory in all dole rations. Both dole recipients and merchants protested. The brown flour was more difficult to bake with and did not store as well as white. The Board of Trade, representing the interests of merchants, saw the direct purchase of flour for dole rations from England as a threat to their profit since they had white flour in stock. Most importantly, there was a significant stigma attached to the use of brown flour. Eating brown bread identified a person as a dole recipient. The stigma discouraged other poor families from using brown flour, and outport families who were better off than dole recipients might forgo using brown flour to avoid the negative association. Further, the stigma attached to brown flour endured even after people came off the dole so that they were unlikely to eat brown bread even though they might still be poor (and thus still at risk for developing beriberi). In essence, mandating brown flour in the dole ration was an insufficient, temporary, short-term solution to a complicated, expensive, and potentially long-term problem.

A discussion of the broader implications of the intertwined nature of hunger and disease within the clinical model of health is instructive. Hunger, poverty, and illness are so closely associated that they can seemingly all be treated within the confines of clinical medicine. Consequently, government response to food insecurity often follows a pattern whereby a solution to hunger and its concomitant symptoms begins and ends with the sick person. The more that nutritional health and access to food remain issues of class disparity, the more a medical conceptualization of hunger serves the interests of the elite. As Turshen suggests, “the clinical model does not encompass the social relations of the individuals it studies, even at its most progressive limits.” Because poverty and hunger were manifest as nutritional deficiency diseases in Newfoundland, a medical paradigm was used. The medicalization of health issues individualized what were widespread problems, and suggested intervention on a biological rather than on a social or economic level. In effect, policies which promoted self-help and land cultivation schemes emerged as a way for individuals to “treat” themselves by supplementing their diets with domestically produced livestock and subsistence plots.

The social and economic conditions which engendered starvation in Depression-era Newfoundland are concealed when nutritional deficiencies are conceptualized within a medical paradigm. Turshen suggests that by presenting disease as a product of the confluence between the individual and his or her environment (situated in the body of that individual), the clinical paradigm effaces the role played by class inequality in reproducing disease. Deficiency diseases naturally align with the environmental imperatives of medical ecology. If people are ill, its logic suggests, it is

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because they are not able to draw the required nutrients from the environment. This view of disease misses the latitude a given individual has in choosing foodstuffs. Aykroyd asserted that those who could afford a more varied diet usually provided themselves with one and in doing so were able to avoid diseases such as beriberi.24 Through a program of individuation, the clinical medicine paradigm depoliticizes disease and the responses to it. Within a framework linking the individual, the disease and the environment, the “solution” offered, in this case subsistence farming, can be promoted as the only natural course of action for members of the working class.

BOOTSTRAPPING: NUTRITION AND SELF-HELP IDEOLOGY

Helen S. Mitchell’s writings can assist in a discussion of the self-help measures (and later the promotion of the “informal economy”) during periods of nutritional crisis. Her work on nutritional problems in northern Newfoundland and Labrador highlights three aspects that are common to the self-help model: small scale agriculture or subsistence farming, moral and domestic education, and charity. Further, it is consistent with the language that has been used to frame the problem. Malnutrition is often presented as a problem for which a “solution” should be uncovered. Mitchell’s analysis opens with a quote from Wilfred Grenfell: “What is the solution, if any, to the food problems among the fisherfolk on the north coast of Newfoundland and Labrador?” Such a question is instructive because it is typical of language used to frame problems of hunger both in this context and within contemporary development literature.25 Whilst hunger is indeed a “problem,” the use of the problem/solution framework can, unwittingly, belie the complexity of the issue that it addresses. A second effect of this framework is the “all or nothing” approach: problems are either solved or not solved within the problem/solution framework. Issues that can be alleviated, mitigated, or addressed do not fit into this rubric. So hunger is, and has been, framed as a problem to which there is clearly a solution or clearly no solution, but rarely anything in between. Trying to fit within this construct may have the effect of forcing the state and medical practitioners to simplify problems in order for their “solutions” to seem comprehensive and complete.

It is within this framework that Mitchell suggested that it was a lack of local knowledge of agriculture and a lack of impetus to start farming that compounded the issue of deficiency diseases such as beriberi in Battle Creek. Indeed, Mitchell argued that it was unfortunate that the subjects of her nutritional survey could not “see that relief from starvation rations and economic independence might come through agriculture.”26

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In just such simple matters as these just reviewed an opportunity is offered of assisting the people by means of education in practical agriculture if they are willing to cooperate. It is a pitiable sight to see tons of fish dumped into the harbor, tillable land unculti-
vated, and the men sitting around idle and discouraged because fishing is poor or the weather unsuitable. At such times these men could be farming if they had the inclination and knowledge.27

Moral salvation through agriculture is a theme of the self-help movement. If people are starving, the argument goes, it is because they are not willing to put in the hard work required to provide for themselves through a “return to the land.” Since agriculture is linked with moral “good works,” the inability to engage in small-scale agriculture is associated with laziness, moral incertitude, and depravity. It doesn’t matter that subsistence plots might be impractical. Mitchell acknowledged this: “to be sure, land must be cleared and perhaps drained, and gardens must be fenced,” but added that, “this could be done out of fishing season.” The prospect of working soil, draining land, and building fences outside the fishing season is perhaps unrealistic when one considers that the fishing season exists because of the inhospitable weather conditions on much of the island outside of the summer months. Devoting the fishing season to small scale agriculture was also not a viable option. Mitchell continues:

Above all these people need to appreciate that a small expenditure for seeds and a little hard work in the garden would yield a good return in food products, thus reducing the amount of food that must be purchased at the high prices prevailing in that part of the country.28

Again, the value of a “small expenditure” and a “little hard work” is extolled. Solutions requiring expenditures often overestimate the ability of the unemployed to raise capital, especially within the context of the merchant credit system. Promoters of the self-help model ignored the role played by class as well as regional differences in determining one’s ability to raise the resources required to engage in farming. This was especially difficult for those who were most at risk of developing nutritional deficiency diseases. Those who were expected to “help themselves” were the least likely to be able to do so.

Mitchell, and others, argued that education was the key to getting the poor to start their own subsistence plots. From their point of view, it was not that the unemployed were too sick or too poor to start farming their land; rather, it was that they lacked education. People needed to be taught “better standards of living … the clean and economic use of food,” and they needed to be encouraged to “become financially independent.” Financial independence was to be accomplished, “in some cases by agriculture, in others by industrial work and in still others by encouragement to a greater ambition even their chosen work of fishing.” Again, use of the word “ambition” suggests a lack of initiative and it ignores the fluctuation in market price for catches. Here, the unrelenting market fluctuation in a capitalist system is dissociated from its ultimate effect. The suggestion that financial independence
could be reached through industrial work also reveals Mitchell’s distorted point of view, although its implied sentiment is common even today: the poor should “get out there” and “get working.”

The role played by charity in providing a solution to nutrition problems in Newfoundland is also a common element of discourses on hunger and its “solutions” at the time:

In anticipation of the nutritive needs of the people some foods were solicited from several commercial organizations this spring. The plan outlined to the companies contributing was to use these commodities for certain selected experimental families where definite states of malnutrition or deficiency disease existed. The foods were then shipped to the I.G.A. [International Grenfell Association] stations to be stored there and apportioned to the families at the nurse’s discretion and only so long as the families continued to cooperate in our project. Every attempt was made to control this donation in such a way as to conform to the general I.G.A. Policy of maintaining the economic independence and self-respect of the people.

Mitchell’s analysis outlines the conceptual tripod of agriculture, education and charity on which the self-help model rests. It is not apparent what effect Mitchell’s views had on government policy, but it is clear that her analysis contains many of the elements typical to the state’s approach to the issue of malnutrition. It can be taken as an expression of the general attitudes of the “benevolent” intelligentsia at the time and it aligns closely with literature that would emerge from analogous circles during later economic crises. At the heart of these sentiments was a middle class interest in limiting state welfare programs and emphasizing the role of private charity for the “deserving” poor, and for moral “good works” such as farming, education, and family responsibility.

Finally, we should mention the role that self-help advocates wanted women to play as educators, students, and household managers. It is a common feature of the self-help scheme to leave “community survival” in the hands of women. Mitchell is less ambiguous about the role that women were expected to play in agriculture than some contemporary development literature, but only slightly so. She advised that, “an attempt at teaching the rudiments of cookery and a better use of their materials may be greeted by the ‘skipper’ as ‘fairy food,’ but if the new ideas are slowly and tactfully introduced some of them will take root.” The task of educating women in home economics and agriculture would best be borne by:

... a young woman with a proper personality and with practical training in sociology, agriculture and home economics might profitably spend a year in the district teaching... this is distinctly a woman’s job, and the right woman who would have a sympathetic understanding of the problem and be a friend to the people might be able to show results even in one year....
That teaching agricultural skills and home economics was a “woman’s job” suggests that such tasks also fell within the domain of women. The educational work of the Jubilee Guilds of Newfoundland and Labrador, for example, focused primarily on women, according to Cullum, “because the Guild leadership recognized their importance in the development of home and community; their influence was increased by means of education in improvements in the areas of domestic science and hygiene, and through the establishment of home industries for the production of handicrafts.”

This highlights the fact that women were often presented as agents responsible for “community survival.” Women were valued to the extent that they performed unpaid labour aimed at keeping themselves and others from starving. Their labour would not be “formal” or wage-earning but consisted of self-help and domestic work. Women’s self-help labour is “free” by virtue of the fact that it consists of tasks that go unpaid.

Promotion of the self-help model was not confined to medical literature. Awareness of beriberi and other nutritional deficiencies permeated media coverage in at least one instance. In 1939 Morley Richards, a “special commissioner” sent by the London Daily Express wrote a series of articles on the status of Newfoundland. Richards claimed that half of the population was living on the “starvation line” with one quarter living on the dole, which was valued at “three-pennyworth of food a day.” Further, he argued, malnutrition was “widespread and increasing.” These articles did more than document the conditions endured by the poor in Newfoundland, they outlined the government’s response. As he described it, the policy was to deny relief as far as was possible and keep dole rations sufficiently low as to discourage claimants from getting “lazy.” Richards quotes Commissioner John C. Puddester, the minister in charge of health and welfare, with the following:

“We give out clothes, pay rents and buy utensils without saying a word, otherwise the people would queue up for more relief as a right.... A man with a family on the dole receives 140dols worth of food in a year. That is more than he earned fishing. But they have got lazy....”

Such statements reveal that the fear of pauperism played a role in keeping the dole ration at an inadequate level. Richards also publicised the government policy to “refuse transport [of the ill] to hospital whenever possible. Make the community get together to provide it ... on no account will return fares be paid when a patient is discharged. They must make their own arrangements. What they do is their own concern.”

These columns provide insight into the effects of the Commission of Government’s self-help model. Five years after the introduction of brown flour to the dole ration, beriberi remained a problem. Nutritional surveys carried out in 1941 by J.M. Olds, for example, estimated that as much as seventy percent of the population suffered deficiency of B complex vitamins. The Commission took great pains to repu-
diate Richards’ claims. The Secretary of State for Dominion Affairs wrote to the Governor requesting “material to enable me to counter these statements”:

Please telegraph particulars of practice adopted in regard to transport facilities for patients and such other material as to hospital service etc. as would be useful to me in answering enquiries. Convenient also if relief figures for February could be given and approximate figures for March. Inadequacy of dole ration is prominently stressed in Daily Express article; general thesis is that “half the population are living on the starvation line” and that “thousands of unemployed fishermen and their families are on the verge of starvation, their only clothes strips of sacking and their children half naked.”

Response to the Secretary’s request consisted of the following:

Instructions referred to given because of tendency to abuse privileges and preventing impositions. Where destitution proved assistance readily tendered but we expect that relatives and friends and community in general should render some assistance to sick poor whenever possible. Patients and relatives when able to pay are expected to do so ... total number on relief February 75,447 persons.... Approximate figures for March 80,000.

Family is often the most intimate source of “private” charity and family members are often the first people to whom the sick, poor, or needy look for aid. The idea that every family should care for its members allows policy makers to see the family as a limitless reserve. It also assumes that all families are based on a model of reciprocal altruism; it belies the complexity of family relationships and assumes that families are essentially cohesive, functional units. Second, it assumes that family members are equipped to help a sick or poor relative.

The issue of morality again becomes apparent in later communiqués from the Commission which sought to mitigate the dramatic tone in Richards’s analysis of Newfoundland’s economic status:

Daily Express articles, only first four of which have reached us, cannot be said to be wholly false in particulars given. Writer has achieved an exaggerated impression of conditions here rather by his mode of presentation, style of writing and selection of special cases. For instance, cases he describes of destitution in St. John’s are homes of well known ne’er-do-wells, and similar conditions could be found in every country.

The issue of “hard work” is also raised:

The family is expected to produce [in the rural sections; in St. John’s and other barren places vegetables are supplied by Government] vegetables, fish, game, eggs, poultry, etc. And where there is a will it can be done. If they are short of these things it is their own fault, and they should not be considered for a supply of goods, which through their own indifference, they are without.
The Commissioners assumed that families were able to produce their own supplementary foods, and failure to do so showed a lack of will. Mirroring Mitchell’s earlier discussion, government plans to promote small-scale farming and expand the role of charity were consolidated in language which stressed the supposed moral dimensions of poverty. This discussion of the emphasis placed on subsistence farming, moral and domestic education, and charity (including family) has shown the connection between concerns over nutritional issues and the promotion of self-help ideology and a state policy which emphasized fiscal conservatism rather than a concern for adequate relief provisions for the poor.

**THE COD CRISIS, (MAL)NUTRITION, AND THE ‘INFORMAL ECONOMY’**

Variously called the “black economy,” the “informal sector,” the “second economy” and the “irregular economy,” the term “informal economy” refers to economic activities that fall outside the regulation of economic and legal institutions. This section considers the use of the term during a recent economic crisis and the similarities between the rhetoric of the informal economy and its self-help ascendants. There are striking similarities between the two discourses, not the least of which is that they emerge, as Gerry has argued, during slumps in “national and international economies alike.”

Before examining the concept of the “informal economy,” however, it is useful to consider its application to the nutrition, food-security and economic crisis in Newfoundland. These issues find expression in the work of Rosemary Ommer and Nancy S. Turner which was carried out under the mandate of the *Coasts Under Stress (CUS)* project. That multi-disciplinary project intended “to offer policy makers an informed awareness of the implications, both positive and negative, of social and environmental restructuring, so that they will be able to shape future policy more effectively.” Providing a “history” of nutrition, diet, and health, “with a particular focus on the issue of decreasing food security in places where once-stable food webs have suffered radical shock,” *Resetting the Kitchen Table: Food Security, Culture, Health and Resilience in Coastal Communities* is an example of academic discourse bound by the idea that “once-stable food webs” did exist but have been disrupted by, “alterations to the environment, usually at large scales, which are thought to be caused, at least in part, by things such as climate change.” Ommer expressed this view in an article in *Transition* and in a subsequent article by herself and Turner in *Labour/Le Travail.*

The concept of the “informal economy” is based on a dualist model of economic organization wherein the distinction between wage labour and self-employment serves to categorize economic activities as either formal or informal. The “informal economy” is, according to its original formulation, a dynamic and diverse set of ac-
Ommer uses the term in a different way than those advanced in development theory by scholars such as Keith Hart (1973). In *The Informal Economy in Newfoundland*, Ommer defines the “informal economy” by what it is not; namely, “a formal economic system recognized and protected by the law ... based on capitalist principles meaning, simplistically, that the acquisition of individual and corporate wealth has been systematized, approved of, and protected by law.” Following this operational definition, she proposes an alternative:

> [A] way of systematizing economies based not on individual wealth but on community survival ... a community could be a kin group in an African village, a Highland Scots clan of the 14th century, a group of people living in a housing cooperative ... or a Newfoundland outport settlement ... *their common logic of survival is grounded in sustenance of the group: it implies wealth sharing and often manifests through dealings paid for ‘in kind.’*  

The argument that communities are arranged around a common goal of “sustenance of the group” ignores the possibility that inequalities are reproduced at the community level. The element of community in Ommer’s description requires some translation. The examples she provides are necessarily “rural,” because her formulation requires that “community” not include urban areas. Presumably, the exclusion of cities in the definition of “community” is required in order to move the argument forward to its eventual application to the Newfoundland outport.

The ways in which outports used “informal” economic activities in the past, according to Ommer, were implicit in the truck system as an “interface” between the formal and informal economies:

> The merchant encouraged the settler to blend commercial and non-commercial activities, to ensure year-round settlement as cheaply as possible. So to subsist the settlers also grew some of their own foodstuff, built their houses and wharves, cut firewood, and made many of their own clothes. Of course, to do this they needed some start-up inputs from the formal economy — cloth for clothes, a saw for firewood, nails for building, and so on. Merchant account books, even from the 1930s in Newfoundland outport stores, show people “buying” exactly those things, that is, getting them on account in exchange for fish....The fishers didn’t buy vegetables, or milk, or butter — they were feeding themselves through the informal economy.

Ommer’s suggestion is not evidence, however, of efficiency in ensuring the “sustenance of the group.” The widespread nutritional deficiencies of the 1930s demonstrate that farming was not aimed at feeding communities but rather at supplementing the food of particular families. Further, the ability to “buy” supplies from the merchant on credit was limited to those who were fortunate enough not to
be in debt once the summer’s fishing was over. In the 1930s, it was likely that the poorest did not have the kind of “start-up inputs” that Ommer describes.

According toOmmer and Turner:

Food is a vital cultural expression. Food security, then, speaks to physical health and cultural and emotional health and well-being — and, by extension, environmental well-being also, since, in small local communities, usually a substantial component of people’s activity involves growing (or protecting the growth of), harvesting, and preparing local foodstuffs.

The argument that communities are grounded in a logic of cooperative effort — aimed at ensuring the “sustenance of the group,” — effaces the dynamic relationships inherent to any community. In the case of Newfoundland, such a statement exaggerates the amount of time devoted to harvesting food while understating the role played by income in determining what foods are available. Ommer and Turner’s “Informal Rural Economies in History” elaborates on the concept. They concentrate “on rural informal economies, because it is in rural areas that ecology and subsistence economics — the specific place-based practices of subsistence — come together as they did in the pre-industrial world.”

It is worth examining their work within the context of the politics of nutrition. At issue is the contention that rural communities are based on something called “ecology” and “subsistence economics,” and that these represent the “place-based” practices of subsistence and therefore pre-industrial economic patterns. If the term “ecology” is meant to signify a relationship between the individual and his or her environment, it is not made clear how rural places are unique in fostering this relationship. Perhaps having the most bearing on nutritional issues, the use of the word “subsistence” suggests that rural communities are organized in such a way as to nurture a relationship between the individual and his or her environment in ways that allow him or her to obtain the necessities of life. The truth is that rural economic activities, whether “formal” or “informal,” did not provide adequate protection against economic collapse during the Depression.

Ommer and Turner assert that there has been a “long history of state and business resistance to informal economic activities, perhaps arising in some instances (though not all) from confusion about, and distrust of, the motivations behind the operation of economic activities on the ‘other side’ of the formal economic fence.” The opposite, however, is often the case. Consider this comment made in the early 1990s by John Efford, Minister of Social Services in the Liberal government:

Before 1949, the average person survived on his or her own initiative. More and more each year, people are becoming more and more dependent on Government. If there’s one thing I would like to accomplish, it is to instil that back in people so that they can become more self-supporting.... I’m not suggesting ... we go back to that. But in rural Newfoundland, people grew their own vegetables. Today they find themselves with-
out work, but they don’t in many cases grow their own vegetables. Do you see anything wrong with people growing their own potatoes and cabbages for the winter? I don’t (quoted in Gushue [1991]).

If, for Ommer and Turner, feeding oneself through the informal economy included growing one’s own vegetables, then it would appear that such activities were sometimes encouraged by government. Informal activities aimed at increasing food security, rather than existing as a set of economic activities on “the ‘other’ side of the formal economic fence” are touted as viable and necessary forms of self-help by a government concerned about increased spending on social security.

Newfoundland history, according to Ommer and Turner, “documents a particular expression of the informal economy.” They go on to assert that “In all cases, the informal economy was characterized by resource dependence, ‘satisficer’ mentality, kin-organization, and a small scale society in which informal economic arrangements and an egalitarian ethic were commonplace and understood.” Because it is not made clear what period or place they are referring to, it is difficult to assess the veracity of such claims.

It is clear that they see a dichotomy between egalitarian, informal economic activities and unequal, formal economic systems. Community and family are not, I suggest, based on equality, no matter how small their scale. Much of Ommer and Turner’s analysis rests on the assumption that the words “rural,” “kin,” or “family” imply some form of equality. Consider, by contrast, a journal entry from Ilka D. Dickman in Appointment to Newfoundland:

When I was in New Harbour last time, I got my dinner in a “dole” home, modestly announced only as “a cup of tea.” I told the woman that she should not make any particular effort to perhaps get white bread for me; I even prefer the “brown” bread, which they all utterly dislike. Whereupon she said she could not offer me anything else. At the table, I then see on one plate brown bread, on another white bread. I am told that the white bread was not theirs but their daughter’s, whose husband is not “on dole.” They live at the same house, eat at the same table! I told this later to my landlady, and she found this quite a matter of course and told me that they were, after all, two families. I then explained to her what I meant, and I said that I do not believe that in such a case she would act like that, and after some considerations she admitted that I am probably right.

That suggests that inequalities can be reproduced within the community and within the family. Indeed, it shows that the line dividing those who were fed well and those who were not could run straight up the dining table.

Rather than give a model for economic recovery and rural sustainability (a stated goal of their work), Ommer and Turner provide an ideological basis for cuts to welfare spending and an answer to concerns that the unemployed would become dependent on income support. In order to make informal economic activities ac-
ceptable solutions to contemporary economic crises, subsistence farming and other informal economic activities must appear to have worked in the past. Yet there is little evidence that this was the case.

A model of economic recovery which rests on the promotion of the “informal economy” is analogous to the promotion of self-help schemes during the Depression. Promotion of small-scale farming or subsistence measures during times of economic crisis is not limited to Newfoundland. The idea of the “informal economy” has its roots in development literature which emerged from efforts to study economic systems in African urban centres. The ideology represented in the promotion of subsistence, combined with the emphasis on the individual in the biomedical conceptualization of hunger, justifies downloading responsibility for food security onto the poor. In common with development literature that describes the unregulated activities of the urban poor in the Third World, the emergence of the “informal economy” concept in Newfoundland was connected to concern over mass unemployment and welfare dependency. For all of the incongruities between the 1930s and the 1990s (that is, the difference between Ommer and Turner’s use of the term informal economy and the self-help movement) the impetus for moving towards an accounting of unregulated labour is shared. The fear of pauperization, welfare dependence, and (violent) organization of the unemployed are just some of the themes which are shared between the “informal economy” in the Newfoundland context and its use in development literature emerging from studies of the Third World.

CONCLUSION

“Nutritional disasters” are simultaneously the result of economic catastrophe and a human exposition of the economic crisis. Indeed, as Nancy Scheper-Hughes suggests, “the hungry body exists as a potent critique of the society in which it exists.” It is imperative that we consider whose interests are served by promoting the idea that the solution to economic disaster is a renewed industriousness of the poor and some version of a “return to the land.” In historical and contemporary discourses on nutritional deficiency in Newfoundland, the state played a limited role in preventing adverse health effects on the population while the responsibility of the individual for his or her self, family, and community expanded.

The concept of the “informal economy” encourages us to see the poor and working classes, particularly women, as an elastic, resilient, flexible and (potentially) harmonious work force which should redirect its attention from wage labour and state relief towards projects of self-help and practices of self-sufficiency. Both the self-help scheme and the model of the “informal economy” overestimate the ability and willingness of communities, and indeed families, to share food or work amongst themselves. Such a conceptualization also underestimates the complexity
and limitations of community and family and assumes that words such as “rural” and “community” should be synonymous with “harmonious.” Further, the notion that communities are based on a “common logic of survival grounded in sustenance of the group” is to dismiss the class differences that exist in rural communities. Some rural people owned the means of production and employed others. Not all people living in rural Newfoundland were able to engage in practices of self-help. In fact, the poorest and most at risk were the least able to fend for themselves. Those who promoted self-help schemes and later the “informal economy” encouraged the notion that the poor and unemployed are a homogeneous group that should be prodded into uniting in a common creative effort to shoulder the burden of their own welfare, thereby easing the burden on state to provide adequate relief.

BIBLIOGRAPHY

“Internal communiqué.” Secretary of the State for Dominion Affairs, 30 March 1939.


Notes

12 Ibid., 19.
25See, for example, Wharton (1980), Bongaarts (2003). Literature emerging from the UN quite often refers to the “hunger problem” (see Diouf, 2003).
27Ibid., 101.
29Ibid., 102.
30This practice of helping only those families which cooperated with the project is an example of charity given with conditions. In this case, subjects were made to earn their charitable donations by participating in the project.
33This was a continuation of an expansion of the role to be played by women as “organizers and administrators” united in a “fight to transform everyday life” which has roots in the social reform movement of the 1920s and World War I. See, for example, Overton, “Self-Help, Charity, and Individual Responsibility,” 97.
34See, for example, Oniang’s and Mukudi’s recent article on malnutrition and gender which highlights women’s contributions to food production and food preparation as “critical underpinnings for the social and economic development of communities.” Nutrition and Gender.” In Nutrition: A Foundation for Development, Geneva: ACC/SCN, 2002.
36Ibid., 103.
39Ibid.
40Evening Telegram, 6 January 1932, 12.
42Great Britain. Internal communiqué. Secretary of the State for Dominion Affairs. 30 March 1939.
This is a task which Ommer warns us will be required in the first sentence of her article entitled “The Informal Economy in Newfoundland” (Transition, Vanier Institute of the Family. June, 1994). “What is the informal economy?” it begins, “to start, I’m going to take you through my logic, to my definition, and then we’ll look at Newfoundland.” Indeed, some might argue that an exposition of the logic behind this definition is required because it is being applied to Newfoundland. That is, the term requires some reworking to apply to the rural sector, the site/subject of Ommer’s analysis and the subject of much concern during the cod crisis. Originally the term was used to describe the proliferation of self-employment and casual labour in cities in the developing world.

Ommer, R. “The Informal Economy in Newfoundland,” 8.

Ibid, 9.


Ibid, 128.

Ommer and Turner open their analysis up to criticisms which might use the Depression era as a counter-example to the alleged success of self-help ideologies. They raise the example of the Depression and in doing so they conceal the disjuncture between nutritional deficiency epidemics and the so-called success of the “informal economy” in order to make their argument.


The irony in this example consists in the fact that those in the family who had the “privilege” of consuming the white bread were more likely, if both sides of the family were inadequately fed, to suffer from beriberi.