

Factors Influencing Dietary Habits of Eritrean and Ethiopian Migrants in Switzerland

**Bachelor-Thesis presentation
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Why do they
put Ananas in
rice?

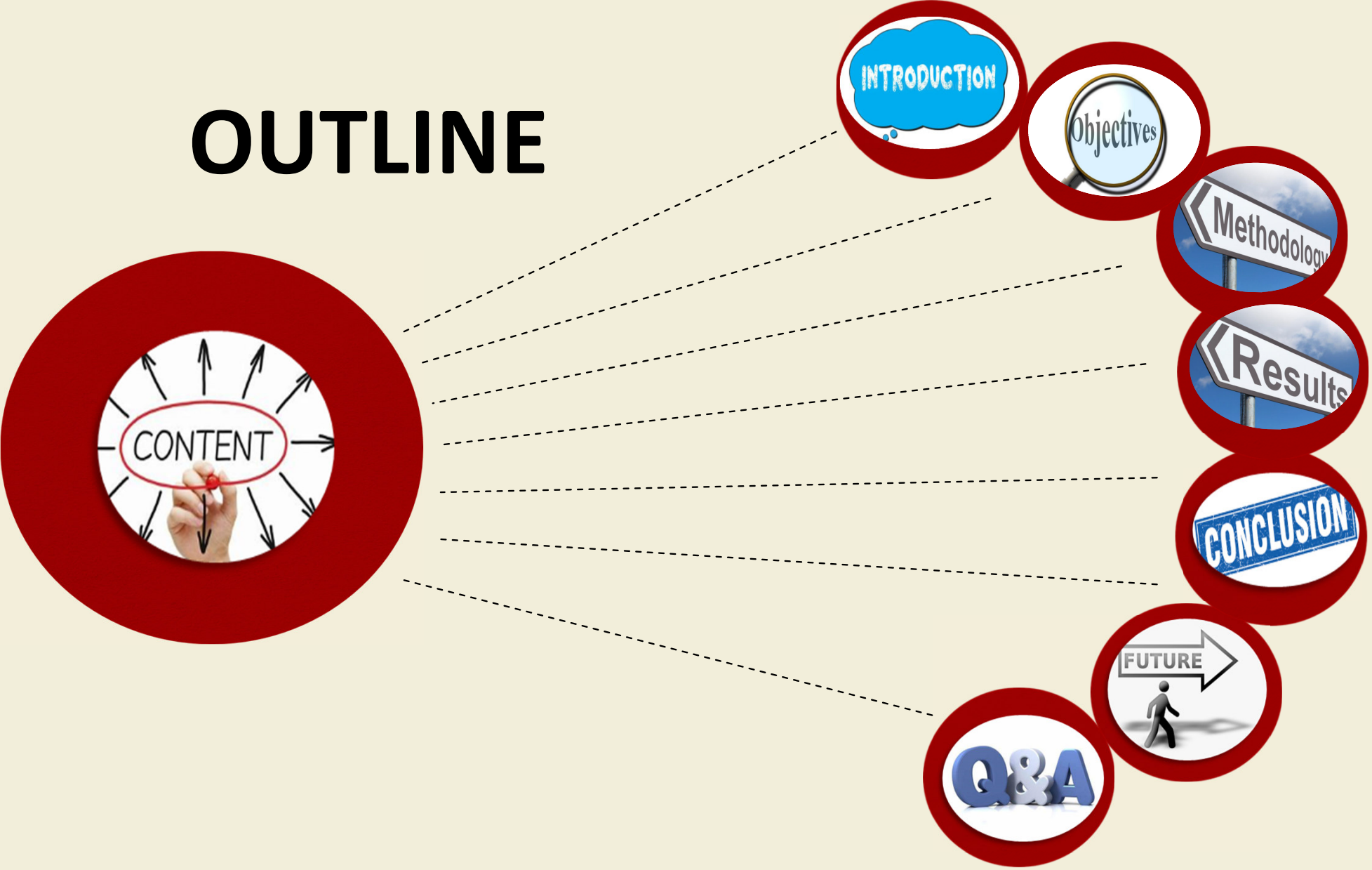
The
chocolate
taste so good



They eat
horse meat?

Cheese heaven
but why are
some stinky?

OUTLINE



INTRODUCTION

42,168
Eritreans
4,369
Ethiopians

281 MILLION
International
migrants

14,928
asylum
seekers

Migration experiences = vulnerability to general health issues

OBJECTIVE AND RESEARCH QUESTION

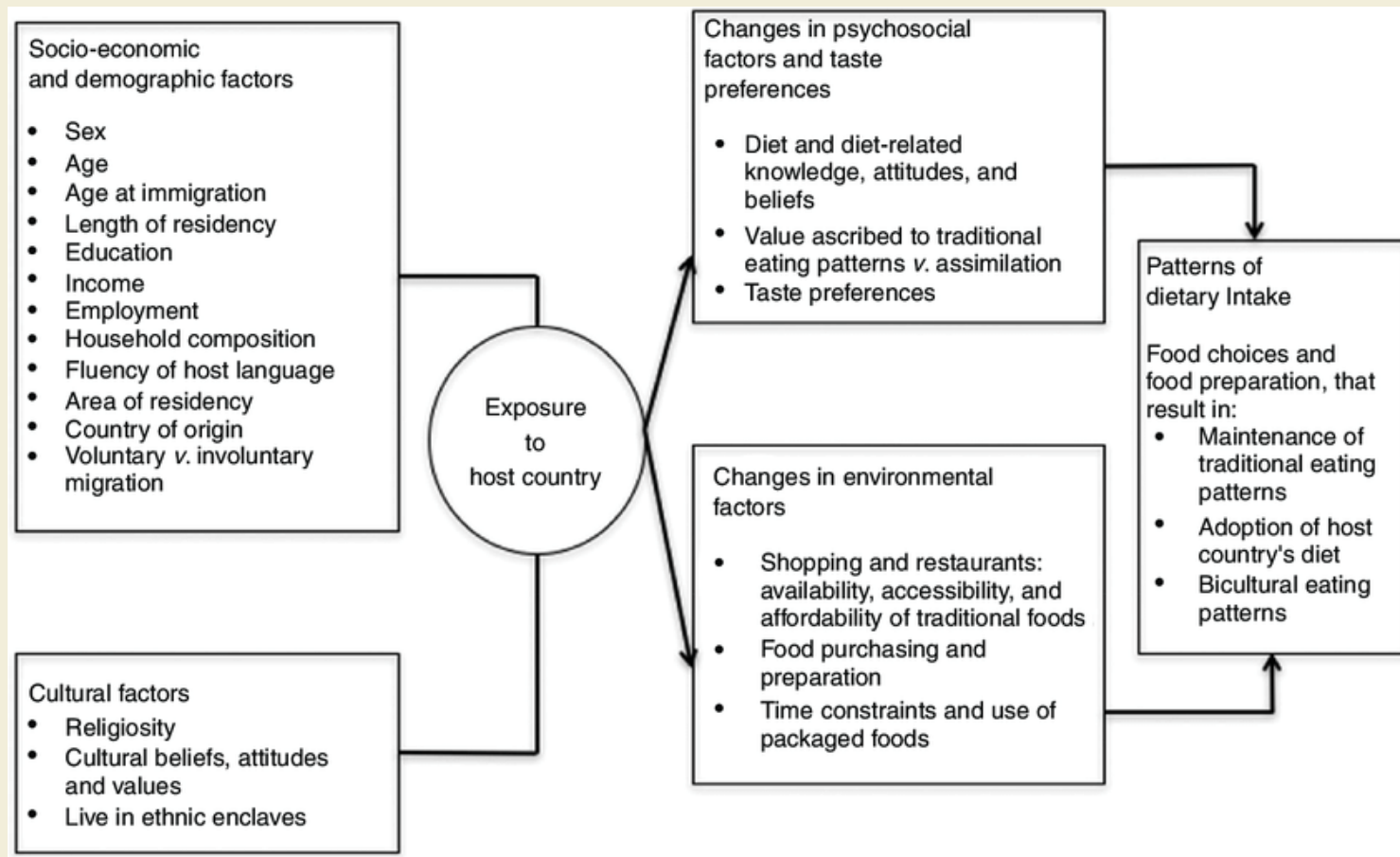
Research question: "Which factors cause dietary habit changes in Eritrean and Ethiopian migrants in the first five years of their arrival in Switzerland?"

- Represent a large foreign group
- Lack of research, underrepresentation in studies
- Awareness among health professionals and dietitians to effectively meet their needs
- **Research aim:** assessing dietary habit influencing factors pre-to- post migration



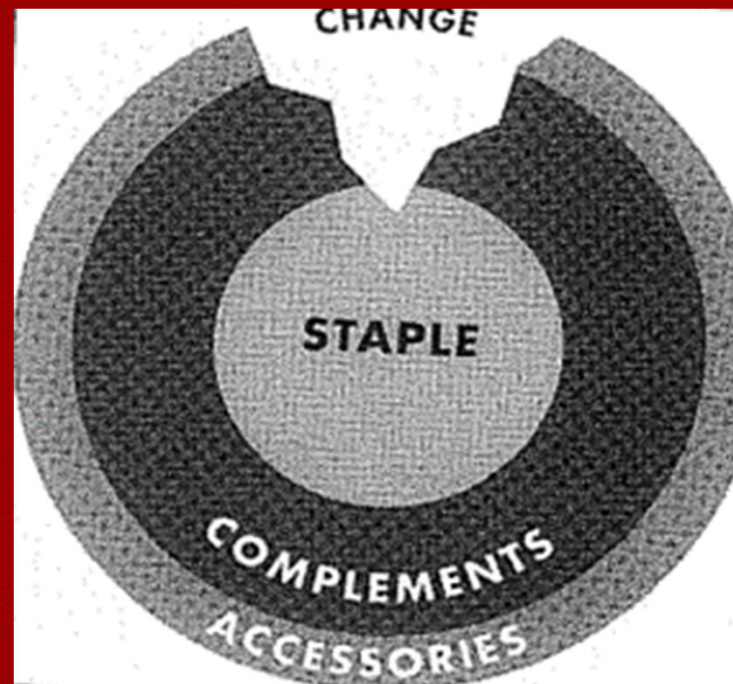
LITERATURE REVIEW

Satia Abouta et al. (2002) model



LITERATURE REVIEW

The structure of food habits (Kocktürk,1995 P.4)



METHODOLOGY

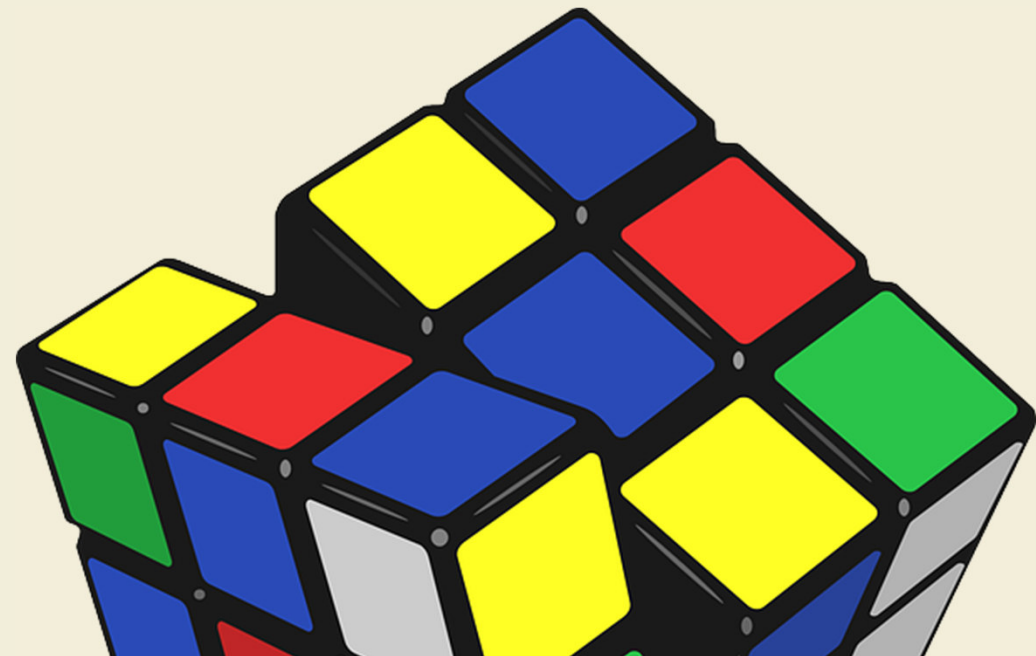
- Qualitative research method
- Semi-structured interview using the SPSS method based on Satia-Abouta et al. (2002) and the Kocktürk (1995) model
- 5 Participants
- Data analysis based on Mayring's approach (2015)



RESULTS

Results divided into 4 parts

- ❖ Changed or maintained dietary habits pre- to post-migration
- ❖ Continuity and Importance of traditional foods
- ❖ Coping with new adopted Foods in Switzerland
- ❖ Factors influencing dietary habits



Changed or maintained dietary habits pre- to post-migration



Changed

- Meal regularity & composition
- Fewer staplefoods, using culteries, and eating alone
- More kitchen appliances and convenience food

Maintained

- Lunch as heaviest meal
- Use of traditional spices

Changed or maintained food groups

Changed

- More grains, potatoes, vegetables and soft drinks
- Less fruit, Legumes and milk
- More meat, fish and dairy product
- Overall broader selection

Maintained

- Teff and Injera
- Water
- Spiced butter
- Different spices



Continuity and Importance of traditional foods



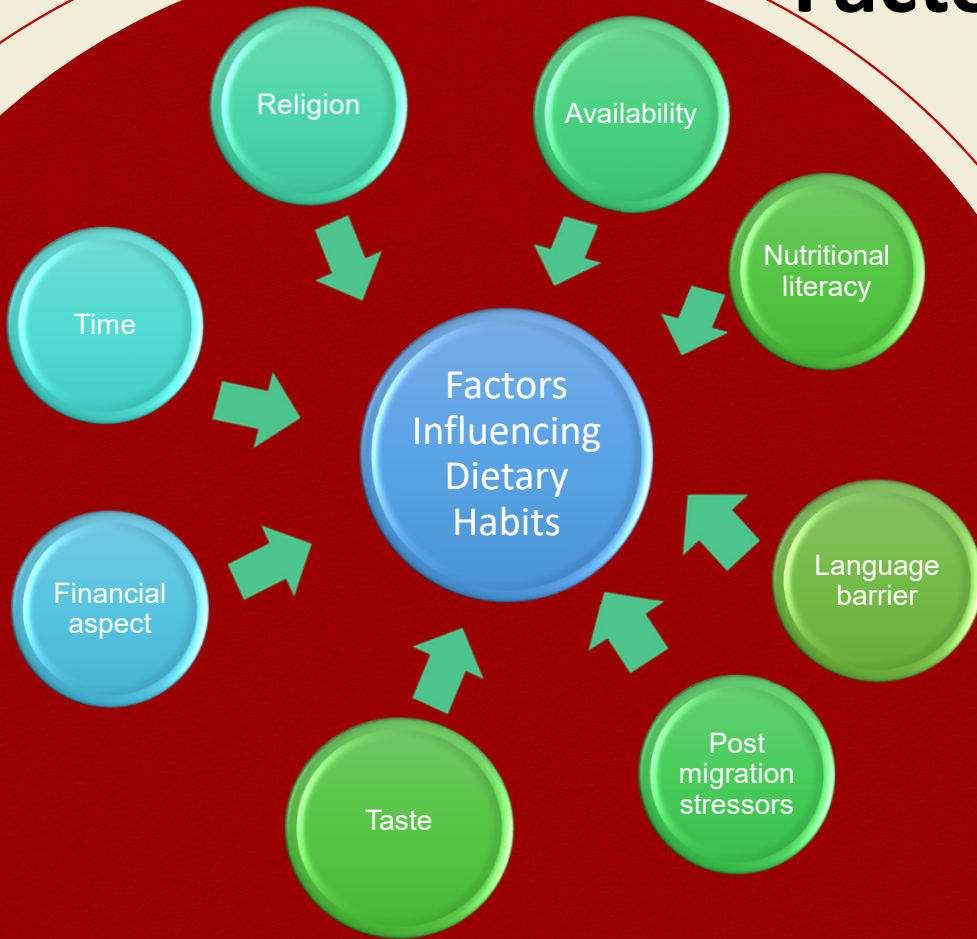
- Connection with culture and background and social factor
- Easy to source: berbere or mitmita (spicy chili blend)
- Difficult to source: spiced butter, camel meat and kocho

Coping with new adopted Foods in Switzerland

- Food in the host country bland
- Monotonous food consumption
- New foods discovered post-migration and incorporated: cheese, shrimps
- New foods discovered post-migration but not incorporated: Canned foods, Raclette, Fondue, Pork, and Horse meat
- Reason for consumption: taste and personal preference



Factors influencing dietary habits



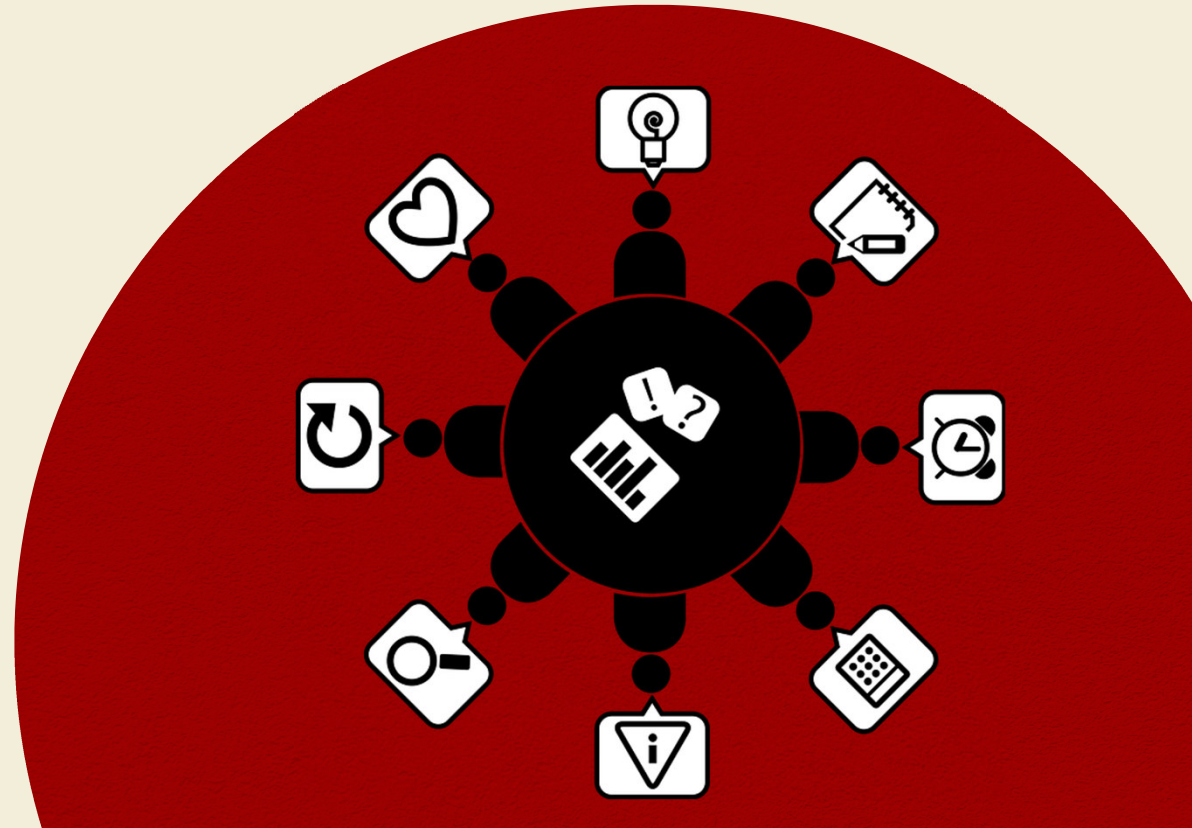
- Variety of food selections in Switzerland but not everything
- Avoid eating pork or horse meat
- Not enough time to cook
- Money affects their food choices
- Meat or dairy products are less consumed
- No access to nutritious food at the beginning
- Not enough knowledge about food
- Language barrier is a big hurdle

DISCUSSION

- Most factors mentioned align with previous research
- Provides valuable insights for dietitians and other health care professionals
- Helps ease the dietary change process

Strength: heterogenous participants

Limitations: length of stay = memory bias ?



CONCLUSION



- Overview of challenges among Ethiopian and Eritrean migrants
- Potential intervention point for dietitians
- Intervention ideas: workshops, guidance in reading food labels, shopping, or cooking together

FUTURE RESEARCH



- Further research in this area
 - bigger sample size
 - In-depth research with other influencing factors
- Policymakers and practitioners must consider the factors while designing interventions

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LITERATURE

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- Unsplash: <https://unsplash.com>
- Pixabay: <https://pixabay.com/nl>



**THANK
YOU!**

Q & A



Potential Q & A points

Topic selection and Overview

Scope :The global rise in migration, including in Switzerland

- need to address migrants' healthcare, particularly their dietary habits
- Qualitative interviews with Eritrean and Ethiopian migrants (5 years)
- reveals the role of food availability, religion, time constraints, finances, taste preferences, language barriers, and nutritional literacy shape migrants' dietary choices
- Healthcare professionals and dietitians, should understand these influences to provide tailored support

Significance and Why this topic? - has not been thoroughly explored in the field, could contribute new insights and better understand of migrants' health needs, personal motivation

Literature Review and Theoretical Framework:

Study findings compared with literature builds on existing research on nutrition and migrants

- specifically explores under-researched area of target group
- Most findings align with other studies findings (increase in consumption of grains and pasta products), Decrease in legumes and fruit consumption
- not aligned: meat and dairy consumption ,possible reason researched population mostly Asians, the study target group already consume meat and dairy products in country of origin

Research Design and Methodology

What Methodology approach : qualitative research

Why this method? for a comprehensive view of the issue, not a lot of studies- explorative research approach to gain deeper insights on the matter

Findings, Contributions, Limitations, and Implications:

- **Strength:** heterogenous sample and adaptable questions (semi structured interview method)
- **Limitations:** small size sample, length of stay memory bias, generalizability on wider population
- **Surprises:** connivence foods and sweet beverages consumption
- **Contribution in practice:** contribute new insights for dietitian and health professional, policy makers incorporate needs while creating intervention and health programs

Self-Reflection and Future Work:

Redo: - incorporate more samples data sources for a broader view

- integrate migrants that are new in Switzerland (eliminate the memory bias)
- better time management

Future research: - explore increase sample size

- incorporate other factors such as health,
- psychological, social and sociodemographic factors, in depth research