

Eating Patterns Among Foreign & U.S. Born Latino and African American Residents of East & South Los Angeles: A Mixed Method Approach

Valerie Ruelas, MSW, Natail Nunez, Ellen Iverson, MPH, Preston Kiekel, PhD, Anne Petters, MD, Michele Kipke, PhD
Children's Hospital Los Angeles & Keck School of Medicine of University of Southern California

Background

- Health disparities present in underserved communities
- Disproportionate prevalence of diabetes & obesity
- Diet is a risk factor for disease¹
- Immigrants in U.S. report poorer health than those remaining in home country¹
- Less acculturated Latinos report healthier eating habits²

Study Site & Sample

East & South Los Angeles

- Low income communities
- High diabetes & obesity rates

Survey Sample: reflects demographics of community

Qualitative Sample:

Community residents recruited from housing projects, councils, & social/health service agencies (44)
Community providers and leaders (66)



Methods

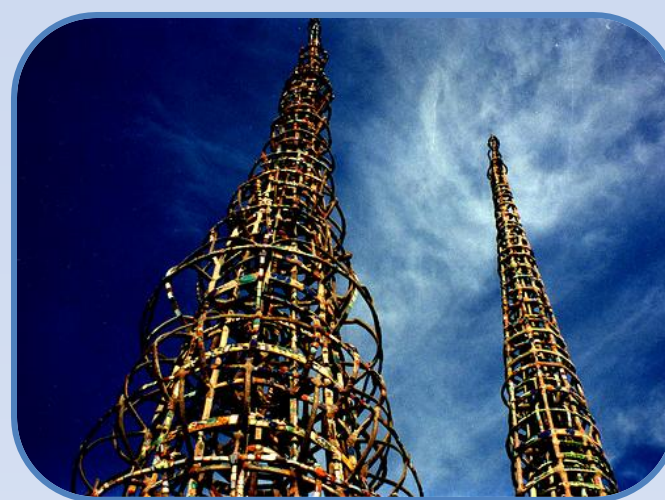
- Mixed method: qualitative & quantitative

Survey (2008)

- N=382
- Random digit dial (RDD) survey, 30 min.
- Self-reported household head

Community interviews (2006)

- N=110
- Semi-structured, 1.5 hrs.
- Audio-taped & transcribed



Analysis: Qualitative & Quantitative

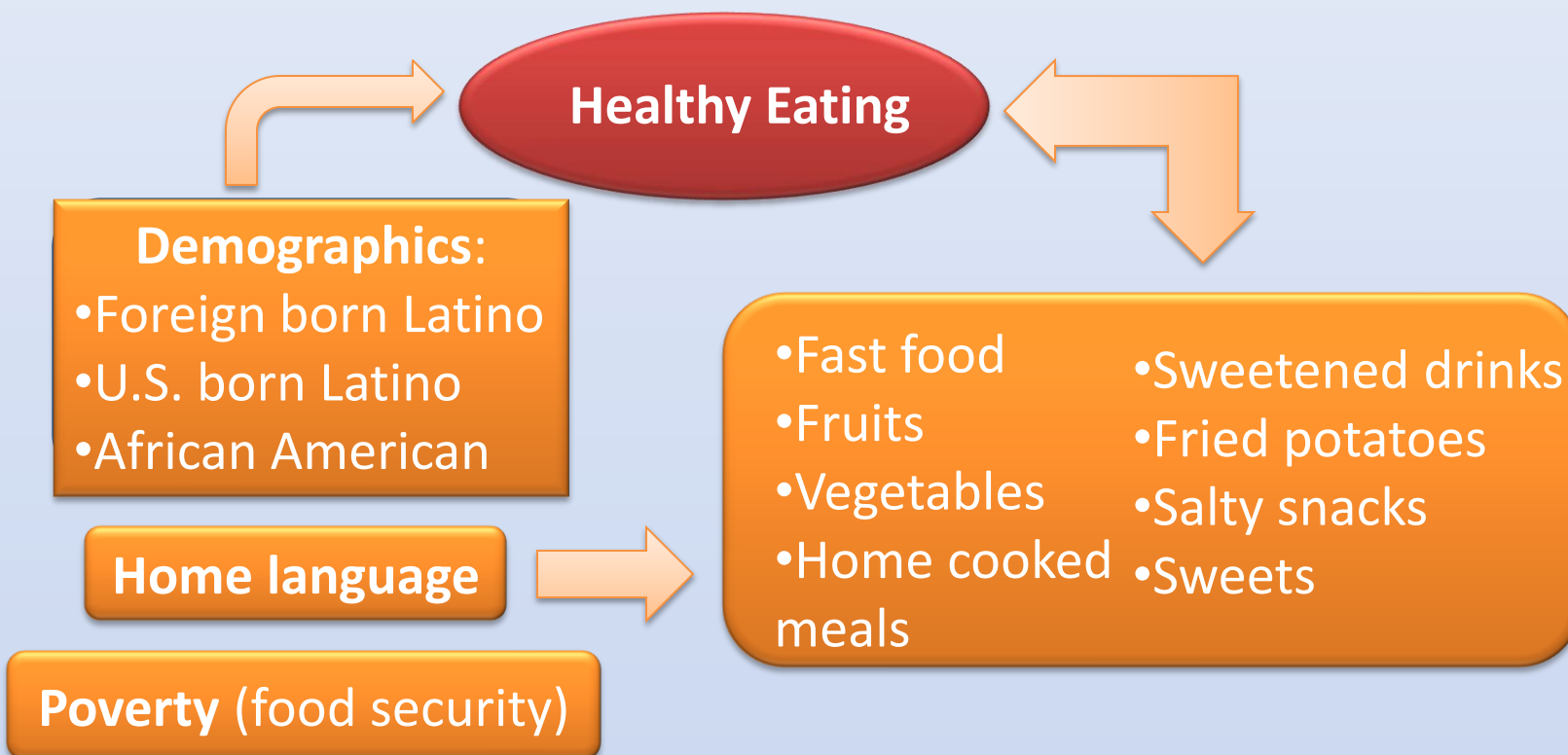
Survey

- SPSS
- Univariate & bivariate analysis
- Multinomial & binomial logistic regression

Interviews

- QSR N6
- Content analysis
- Themes: decisions affecting food purchases & food choice changes over time

Conceptual Model



Survey Profile

	Foreign born Latino	U.S. born Latino	African-American
Age (mean)	42.4	43.1	51
Gender (female)	77%	75%	88%
Education (H.S. diploma)	25%	69%	76%
Income (below poverty line)	63%	47%	47%
Income (below 185% of poverty line)	94%	80%	78%
Food security (ran out of food last yr)	64%	39%	41%
Avg. household size	4.6	3.8	3.0

Survey Findings

- Obesity rates were higher among African Americans (AA) and US-born Latinos (USBL) compared to foreign-born Latinos (FBL) ($p < .001$).
- FBL reported higher daily fruit consumption compared to USBL ($p = .05$) and AA ($p < .001$).
- AA reported higher daily consumption of vegetables versus USBL ($p = .009$) and FBL ($p = .003$).
- FBL reported consuming less fast food the previous day compared to USBL ($p = .021$) and AA ($p = .004$).
- AA were more likely to shop twice or once a month compared to FBL and USBL ($p < .001$), suggesting less access to fresh fruits and vegetables.
- AA were more likely to have one or more chronic health problem including diabetes than FBL ($p = .020$) and USBL ($p = .010$).
- Respondents with lowest income reported consuming more sweetened drinks ($p = .029$) and salty snacks ($p = .021$).

Interview Key Themes

- **Lack of familiar produce from country of origin:** "...there are a lot of things that they don't have here, and if you go to Mexico they do, like for example I like wild sweet potato, there is a fruit over there that we call *bonete*, it looks like papaya." (translated – Foreign Born Latina)
- **Lack of availability of healthy foods:** "...at Hispanic supermarkets they rarely have spinach...or they'll have regular lettuce but they don't have the romaine...they won't have fresh turkey ham...just the processed one...they will not have any non-fat stuff... go to Ralphs you'll find non-fat cheese, non-fat milk..." (US Born Latina)



- **Cost barrier:** "Well sometimes [the food] isn't fresh, I just base it on what is on sale, depending on the money one has, sometimes, I go on the days they have sales..." (translated Foreign Born Latina)

- **Lack of quality markets in community:** "Food 4 Less is better on prices, but Ralphs, Albertsons and all that over there [outside community] it's better on quality...over here... you go to the fruit and vegetable section, and it's too warm... looking not too good...it's lower quality over here than it is over there...here they're not held up to a certain standard...it makes me feel like they don't care because of where we are at..." (African American Male)



- **Transportation:** "...sometimes when I go farther out [of the community], things would be better, the food would be better, better quality." (African American Female)

Conclusions

- Immigrant respondents are more likely to engage in healthier eating patterns.
- Qualitative findings reveal additional factors (e.g. cost, location, availability of healthy choices) affecting food purchases and eating behaviors.



- Findings serve to inform the design of culturally competent interventions for diverse communities

- Additional studies are needed to determine factors related to immigrants' protective eating behaviors and promote interventions designed to maintain healthy behaviors once in the US.



- Results can guide policy makers in tailoring policies related to healthy eating and access to healthy food choices among residents of varying ethnicity, acculturation and income level.

References

1. Neuhauser ML, Thompson B, Coronado GD, Solomon CC. High Fat Intake and Lower Fruit and Vegetables Intakes Are Associated with Greater Acculturation Among Mexicans Living in Washington State. *Journal of The American Dietetic Association*. 2004;104:51-57.
2. Satia-Abouta J, Patterson RE, Neuhauser ML, Elder J. Dietary Acculturation: Applications to nutrition research and dietetics. *Journal of The American Dietetic Association*. 2002;101:1105-1118.