

OPINIONS OF KENYAN IMMIGRANTS LIVING IN JYVÄSKYLÄ
ABOUT THEIR DIETARY HABITS

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Abstract <p>The aim of this study was to gather information on the opinions of Kenyan immigrants living in Jyväskylä about their dietary habits. The purpose of this study is to provide information that can be used to educate Kenyan immigrants about healthy eating habits.</p> <p>Qualitative research method was used to collect the data which was composed of a focus group with a face to face interview with three Kenyans who had lived in jyvaskylä for more than six months. The interviews were conducted in January 2015 and data analysis was conducted through thematic analysis.</p> <p>The findings showed that availability, affordability, income, freshness, culture and food beliefs were the major factors that affected their dietary pattern while in Kenya. In addition taste, price religion and time were some of the factors that affected them when they migrated to Finland, Jyväskylä.</p> <p>The study was carried out on Kenyans who live in Jyväskylä and hence further research should be carried out under the same research topic with a larger sample size covering other cities in Finland.</p>		
Keywords Kenya, nutrition, immigrants, food habits, dietary change, acculturation, income, food beliefs, food taboos, religion		
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1. INTRODUCTION

Diet is defined as food and drink that is eaten or drunk by a person (Cambridge Dictionaries Online, N.d). According to WHO (2014), nutrition is consumption of food in relation to the body's dietary needs. . Poor nutrition is said to reduce immunity, increase vulnerability to diseases, diminish physical and mental growth and also reduce productivity. (WHO 2014)

Common belief about nutrition refers to cultural food practices which immigrants used in their own country for generations. According to a study by McEwen, Straus and Croker (2009), on Somali immigrants in Britain shows that the majority of the interviewees believed in feeding their children with foods rich in fat were nutritious so as to increase their weight. They ate meat daily and less vegetables and fruits this led to a high number of obese children. (McEwen, Straus & Croker, 2009.)

Obesity among immigrants is becoming a major public health problem internationally. Migration and acculturation is not well understood to the contribution of obesity. (Renzaho, Swinburn & Burns, 2008, 32, 594-600.)

Acculturation refers to the process that immigrants face when they move to a new country and adopt its norms. Dietary acculturation occurs when the immigrants adopt the eating habits and preferences of food of the host country. (Satia, 2013, 219.) Acculturation and migration go hand in hand and understanding both will help to bring to light the health issues, health gains, stress, coping strategies, dietary practices, family togetherness and eating disorders that immigrants are facing. (Renzaho, Swinburn & Burns, 2008, 32, 594-600.)

A study carried out in Minnesota found out that Somali girls have a deficiency in Calcium and vitamin D. (Benbenek & Garwick, 2011) Cross-cultural psychology has shown that there is a vital connection between cultural context and individual behavior development which occurs when an immigrant goes to the host country and their eating habits. (Applied psychology, 1997.)

Dietary restrictions are very important factors when people migrate to a new country where limitations like vegetarianism and religion limit people from getting the required nutritional content (Green, Waters, Haikerwal, O'Neill, Raman, Booth, Gibbons, 2003). There are not many researches done on nutrition or food habits of Kenyan immigrants living in other countries. This research is focusing to finding out the nutritional changes and its effects on immigrants with a focus on Kenyan immigrants living in Jyväskylä.

2. THE ROLE OF ACCULTURATION ON MIGRANTS EATING HABITS

Acculturation and the education level of immigrants' plays a major role in the type of food consumed in the host country. A study carried out in Netherlands among the Surinamese immigrants show that the more interaction between the Dutch and the Surinamese women resulted in less use of oil when cooking and also red meat was infrequently used. (Nikolaou, Dam & Stronks, 2006.) When it comes to dietary acculturation many immigrants do not abandon all their traditional foods but rather they use some and discard others for example many people of Asian descent did not stop eating rice which was their staple food but incorporated sandwiches to replace other traditional foods. (Satia, 2013)

Dietary change may be influenced by food accessibility where traditional foods may be really expensive to import hence opting for cheaper host food. The amount of income earned, religion professed, age, home country and food beliefs like healing properties also contribute to dietary changes. (Gilbert & Khokhar, 2008, 204.) Age generation affects the dietary changes in immigrants because people who migrate to a country when they are old they tend to stick to their traditional foods but younger immigrants easily adopt the new host eating habits. A study conducted in the UK about immigrants from south Asia showed that the older generation of immigrants did not change their dietary habits since they were separated from the mainstream population therefore they continued eating their cultural foods. The younger generation of south

Asians was easily influenced into consuming the host foods like potato chips, burgers and sandwiches which were high in fat leading to poor health (Gilbert & Khokhar, 2008, 210). Dietary acculturation is may be influenced by composition of the household and labor supply for example when immigrants migrate to America they end up working long hours than they did back in their home country therefore having less time for cooking food. Household composition affects dietary change because if families are made up of large a number of people and their traditional foods are labor intensive to prepare they may opt for easier to make food or fast food. (Akresh, 2007 , 406.)

However if the immigrants move to a region that is highly concentrated with people from their ethnicity the dietary acculturation is much slower and they may continue eating their traditional food depending on the inhabitants' food habits. Studies conducted in Sweden and Denmark suggest that immigrants in this country have opted for fruit syrups and Ice cream as opposed to healthy foods like fruits and vegetables which are rich in fiber and vitamin c.(Gilbert & Khokhar, 2008, 205.)

In a study done by Chaufan, Constantino and Davis (2011, 147-158), Latino immigrants in the USA attributed unhealthy eating to price, location of food outlets, working conditions and limitations to food assistance. The immigrants who participated in the study said that healthy food are expensive and when they compare the price to unhealthy food, they thought it was better to spend their money on cheaper food. (Chaufan et. al. 2011, 147-158.) This was because of lack of enough income or unemployment. The location of healthier foods that were cheaper for example vegetables was located far and the transportation to those places was not adequate. This leads them to buy more expensive grocery that was available close by. Some of them had to wake up

as early as 2 or 3 am to go to work and the only shop that was opened at that time sold unhealthy food. (ibid., 147-158.)

Since they were immigrants, some bosses treated them poorly at work. They would be made to work without breaks, they were expected to work longer hours and some bosses even after all that did not pay them the minimum wage required by the USA law or worse they did not pay them at all. This contributed to poor eating schedules, fatigue, stress and little or no money to spend on food. (ibid., 147-158.)

2.1 Changing dietary habits in a new environment

Immigrants in Europe face a risk of acquiring degenerative diseases. This can be due to the rise of eating unhealthy food, genes, lack of exercising and migration related stress. Migration related stress can be as a result of low paying jobs, long working hours which leads to irregular eating patterns and unhealthy habits. (Gilbert & Khokhar, 2008, 203.) When moving from one culture to a new country or place with a different culture, people tend to change their lifestyle to fit in the new culture. Meal times and content are usually different from one culture to another. (Parsons, Godson, Williams & Cade, 1999, 113.)

Participants in a research done on Iranian immigrants in Victoria, Australia reported that since migrating, they have been able to achieve a better work life balance because the working hours are less compared to Iran (Delavari, Farrelly, Renzaho, Mellor & Swinburn 2013, 73). This enhanced time to think

more about nutrition and exercise. Moreover, in Australia there are a lot of government sponsored health, diet and exercise campaigns. Some also reported that the Australian government considered sports and exercise important as compared to Iran where there are no sidewalks or bicycles lanes. (Delavari et al. 2013, 73.) A female participant reported that there are no legal restrictions in dressing that forces them to wear the hijab and body in Australia as it was in Iran which made it strenuous to engage in physical activities in public places. Hijab is a scarf used for covering the head so as not to expose the hair. They had a fear that their hijab might slip off and reveal the hair which would warrant an arrest. (ibid., 73.) Most of the participants said that they had interest in trying new foods available to them in Australia which contributed to weight gain in the beginning after migration. They later on became aware of their eating and exercise after migrating and had begun to take health issues more seriously. (ibid., 75.)

2.2 Beliefs and food taboos

Beliefs' play a major role when a migrants move to a new country. These beliefs are not scientifically proven but come from traditional practices that cannot be corroborated. Some people do not consume red meat because they believe that it's wrong to kill or cause injury to an animal for food which is considered immoral. Africa has a lot of food taboos which may be similar or differ from country to country. In many countries fresh milk is not commonly consumed by adults except for some ethnic communities from East Africa namely the Masai, Fulbe, Nuba etc are thought to give wholesome food to their young men and warriors. (Rochow, 2009.)

In mid-west Nigeria, children are not fed eggs and meat. They believe that if the children are fed with them it will make them steal. Children are also not allowed to eat gizzards and thighs of ducks. These parts are exclusively for the elderly. The children are however allowed to eat the lower part of the thigh or the head of the duck. (Rochow, 2009.) In the central part of Africa there are communities who do not consume animal milk and they regard it as revolting because it is a secretion from the body which is similar to urine. In other parts of south east Asia which are remote do not consume chicken or eggs as they believe that it terminates human fertility (Factors affecting Food selection, 2014)

A study which was carried out on dietary beliefs of Somali immigrants in the UK showed that the participants interviewed believed that eating fruits and vegetables was a sign of poverty while eating meat was meant for the wealthy people in the society (McEwen, Straus & Croker, 2009, 119). They also believed that food consumed in the UK was genetically modified and hence thought it was less healthy. Studies conducted about Indian immigrants showed that they believed consuming fatty foods that contain chilies and a sweet pudding made of gram flour and sugar which is roasted in ghee was a remedy for a sore throat.

According to a group of African Caribbean immigrants they believed that consuming vegetables and herbal tea regularly helped to relieve diabetes and hypertension. Also tea from ackee leaves was widely believed to cure colds. (Gilbert & Khokhar, 2008, 209.) In Kenya there are beliefs that don't have any

scientific explanations and they may have negative nutrition effect on the population for example among the Mbeere community children were not allowed to eat offal as they believed it would stunt their growth (Oniang'o & Komokoti, 1999). Also according to a study carried out in Kenya by Oniang'o and Komokoti showed that among the Maasai community a pregnant woman was advised to not to consume fatty foods and if they ate a heavy meal they should vomit so that the baby remains small hence an easy delivery (Oniang'o & Komokoti, 1999).

2.3 Religious dietary restrictions and laws

Religion also plays a role in the type of food consumed and the manner in which it is prepared. Immigrants who are of the Islamic faith can eat all sorts of vegetables and sea food but they cannot eat food mixed with blood or pig's meat which is considered unclean. According to a study carried out which focused on the choice of food and food traditions of migrants in Sweden of Bosnian descent. It showed that the people interviewed stated that animals had to be slaughtered in a particular manner to make them authorized to eat. (Jonsson, Wallin, Hallberg & Gustafsson, 2002, 157.)

Buddhists refrain from meat and are more of vegetarians. They also take all their foods in moderation. Natural foods of the earth are considered most pure. (Waibel, N.d.) In Eastern Orthodox Christianity, they have a restriction on meat and fish. In Islam, pork and certain birds are prohibited; alcohol is prohibited as well as coffee/tea/stimulants are avoided. In Judaism, pork and shellfish are prohibited while eating meat and dairy in the same meal is also

prohibited. Land animals that do not have cloven hooves and that do not chew their cud are forbidden and considered as unclean e.g., hare, pig, camel etc. (Waibel, N.d.)

Rastafarianism has a restriction of not eating meat and fish. They are strictly vegetarians and also have a restriction on using salts, preservatives and condiments. Herbal drinks are permitted while alcohol, coffee, and soft drinks are prohibited. Marijuana used extensively for religious and medicinal purposes. They also consider pigs and shellfish as scavengers and unclean. They also view foods grown with chemicals as unnatural and hence do not consume them. They believe that there are biblical texts that support the use of herbs (marijuana and other herbs) (Waibel, Nd.) Seventh-day Adventists have a restriction on pork. They also do not consume meat and fish. Vegetarian diet is more encouraged while alcohol, coffee, and tea are prohibited. (Waibel, Nd.)

Another example is with the Hindu society. They have a cast system in which each cast has its food taboos. The 4 cast in order of first to last are: Brahmin who are considered priestly, Kshatriya who are involved with defence, Vaisya who deal with agriculture and business, and Shudra who do menial labour. Brahmins do not eat meat, fish, or eggs and many orthodox Brahmins abstain from cooking or eating onion and garlic. Garlic and onion are believed increase passions like anger and sex drive. They however take milk and milk products. The milk and milk products are thought as very sacred because the cow is considered as "a holy mother". (Hindu Dietary Customs, 2007.) The other three casts consume fish, eggs and meat but only from chicken, goat or

lamb. However, these are not cooked or eaten during religious occasions, marriages, mourning periods, breaking religious fasts or pilgrimages. The Indian government declared Mahatman Gandhi's Day as meatless day meaning that meat is not sold anywhere. (Hindu Dietary Customs, 2007.)

2.4 Dietary patterns

A study done by Pan, Dixon, Himburg, and Huffman (1999, 55), found that Asians students had changed their eating patterns after moving to America. Those who consumed 2 meals per day increased because of skipping breakfast. The students who took part in this research attributed this to their school schedules (Pan, et al, 1999, 55). Koctürk and Runefors (1991) developed a model after observing the food habits. The model helps us to understand different combination of cultures and the process of adapting to a new dietary pattern (Koctürk &Runefors, 1991, 185-192). According to the Koctürk and Runefors model of dietary pattern adaptation, immigrants tend to let go of the food habits they had in their home country and increase in adaptation of new dietary patterns. The major factors that surround these changes are identity and taste. (ibid., 185-192.)

When new foods are introduced into one's diet, taste is a major factor and thus accessory foods are incorporated. Although accessory foods are not considered as 'real food', they also play a big role to food as they enhance the taste and presentation of a meal. These accessory foods are drinks, sweets, fats and oil, nuts, herbs and spices. (ibid., 185-192) The staple foods are usually

carbohydrates which are complemented with other foods for example, vegetables and meat. The staple food may remain the same for several generations. Substitution of complementary foods may take a long time to happen as these have more of cultural ties. These are what people relate to or identify when asked about what they eat. (ibid., 185-192)



Figure 1

The process of adaptation to a new dietary pattern after migration (Koçtürk & Runefors, 1991)

Meal pattern in rural Pakistan was always as a result of physiological needs that relates to work that is hard labour and adaptation to climate (Olsen & Wandel, 2005, 311-339). The women who participated in Olsen and Wandel (2005, 311-339) research reported that their meal patterns had changed after they had moved to Oslo, Norway. The women said that they now consumed less hot meals, they have more irregular meals and had a higher intake of

energy food later in the day. The consumption of fewer hot meals is as a result of adaption to the Norwegian climate and also because of less physical activities. (ibid., 311-339.) In Pakistan they had a fixed routine of doing things and hence a fixed time of eating food. They only ate food during the scheduled time but since they moved to Norway, they have had changes whereby people eat whenever they want, whatever they want and whenever they feel hungry. The weekends have now become culturally important to them because that is when the whole family can gather at the same time. (ibid., 311-339.)

3. KENYA AND FINNISH FOOD HABITS

Kenya is a country located in the east coast of Africa bordered by Somalia, Ethiopia, Tanzania, Sudan, Uganda and the Indian Ocean. According to the Finnish immigration service there are 968 Kenyans permanently living in Finland. (Foreign citizens living permanently in Finland, 31 Dec. 2013.)

3.1 History and food of Kenya

The Portuguese arrived in 1496 on the coast of Kenya and introduced foods from Brazil. Maize, bananas, pineapple, chilies, peppers, sweet potatoes, and cassava made their way to the coast and became the local staple foods. They also brought oranges, lemons, and limes from China and India, as well as pigs. (Food in every country, N.d.) Pastoralism (cattle herding) has a long history and imbedded in Kenya to date. Around A.D. 1000, a clan from North

Africa called Hima introduced cattle herding and by the 1600s, ethnic groups like the Maasai and Turkana ate beef exclusively. They depended on their cattle to provided meat, milk, butter, and blood. (Food in every country, N.d.)

When the Europeans arrived at the coastal shores of Kenya, they brought with them white potatoes, cucumbers, and tomatoes. The British imported many Indians for labor thus curries (spicy dishes made with curry spice), *chapattis* (a flat, disk-shaped bread made of wheat flour, water, and salt) and chutneys (a relish made of spices, herbs, and/or fruit) became a traditional Sunday lunch for many Kenyans and continues to be so. (Food in every country, N.d.) The traditional foods in Kenya reflect the various ethnic groups. Most of the dishes are inexpensive and fulfilling. The staple foods are corn, maize, potatoes and beans. *Ugali* (a stiff porridge made of maize flour) and meat are mostly eaten inland, while in the coast the people consume a wide selection of food. (Food in every country, N.d.)

3.2 Finnish food habits

Meals in Finland are served three times in a day and snacks are eaten in between the meals. Many Finns enjoy eating rye bread which has health benefits that include weight loss, minimizing heart diseases and helps to stabilize blood sugar. (Food for life Finland, 2009). Breakfast usually consists of porridge also known as puuro in Finnish which is made of oats and also sandwiches with cheese or butter. When it comes to drinks being served while

eating include piima (sour milk), milk, juice or coffee. Other foods which are served for lunch or dinner include potatoes, eggs, milk and vegetables. Fish is also widely eaten in Finland for example salmon, Baltic herrings or white fish. This are served with spinach or wild mushrooms especially in the spring. For deserts, ice cream is served with strawberries, wild berries or chocolate sauce. (Finnish Nutrition Recommendations, 2014.)

4. AIM AND PURPOSE

The aim of the thesis is to find out the eating habits of Kenyan immigrants living in Jyvaskyla. The purpose of this study is to provide information that can be used to educate Kenyan immigrants about healthy eating habits.

4.1 Research questions

1. What were the eating habits practiced by Kenyans living in Jyväskylä while in Kenya?
2. What are the opinions of Kenyan immigrants concerning their eating habits while in Jyväskylä Finland?

5. IMPLEMENTATION OF THE STUDY

5.1. Research methodology

This study was conducted through qualitative research. This study aims were to understand more on the experiences and attitudes of social aspect of life rather than analyzing numbers. It aims were researching on the questions 'what', 'how' or 'why' rather than researching on 'how many' or 'how much' which applies to quantitative research. (Patton&Cohran, 2002.) The current research method does not enforce variables or possible outcomes for the study but lets the meaning emerge from the participants. It also portrays a better understanding through the participants first hand experiences and truthful reporting on the research question. (Data collection strategies II qualitative research, N.d.) The main objective of qualitative analysis is to provide a humanistic view of research issue and it relies on the beliefs, emotions and people's relationships.

5.2 Participants and recruitment

The main criteria used in this research were length of stay and age. The participants were Kenyans who had lived in Jyväskylä for more than six months and were above 18 years of age. The exclusion criteria were Kenyans born and living in Jyväskylä. These criteria helped in data collections that fulfilled the research's purpose and aims. The recruitment was conducted through purposive sampling. Purposive sampling is also known as judgmental selection or subjective sampling. It relies on the judgment of the

researcher when selection sample units. These sample units could be people, cases/organizations, events or pieces of data that are being studied. In purposive sampling the data being studied is quite small. The main goal of purposive sampling is to focus on particular characteristics of a population that is being studied. This enabled the researcher to answer the research questions. (Purposive sampling, N.d.)

There are various types of purposive sampling techniques but in this research only two types were used. These types were homogeneous sampling and critical sampling. In homogeneous sampling technique, the units are selected based on similar characteristics. (Patton, 2001.) Critical case sampling is useful in exploratory qualitative, research with limited resources and also in a research of single cases or small number of cases can be decisive in explaining the phenomenon of interest (Patton, 2001, 236).

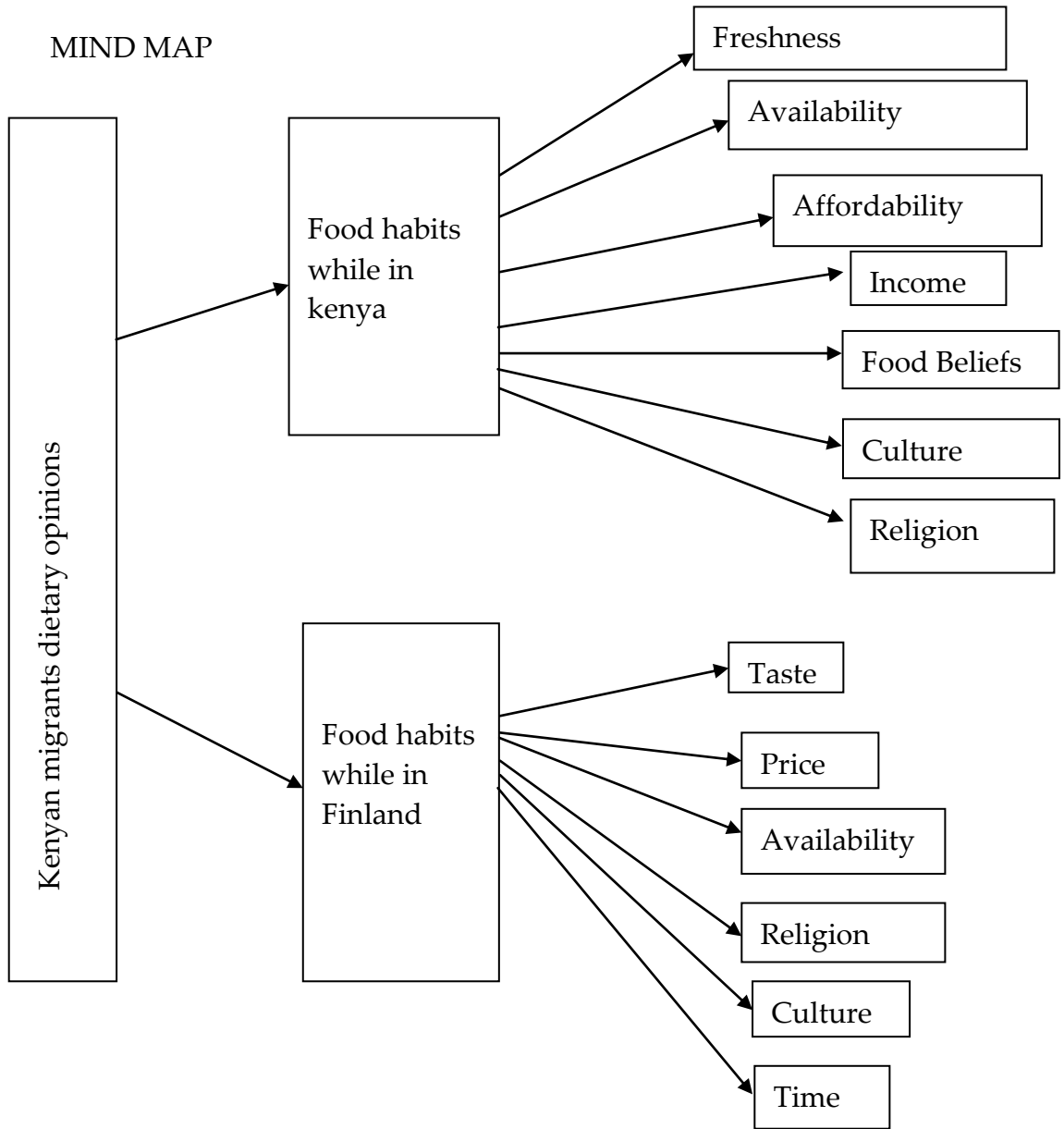
5.3. Methods for data collection

Qualitative data collection was used in this study using focus groups. They bring out the cultural norms of a group and also a broad view of the issues affecting them by merging both the interview process and observation of the participants (Qualitative research method, N.d, 3). Focus groups comprises of a moderator, secretary and the participants whose number should be between six to ten people. This is recommended so that everyone in the group has time to air their views. The main advantage of using focus groups instead of structured interviews is that despite increasing the sample size of the participants there is no additional costs and requires less time to organize. In

the study there were three participants and the interview took place in one of the participant's home. The interview lasted 30 minutes and there were two main categories, eating habits while in Kenya and also eating habits since they moved to Finland. The main categories were then broken down into six questions which were aimed at answering the research questions.

5.4. Data analysis

In the current study, thematic analyzing method was used. Thematic analysis was used to categorize the data in this study by reviewing the data collected and making notes and then grouping them into various categories. This helped the researcher to read the entire data then developed themes out of the data. (Boyatzis, 1998.) The authors of the thesis then listened to audio recordings of the interviews and then transformed it into written material using formal English. The audio recordings were then transcribed word by word using Microsoft word 2010 with font style Palatino Linotype and the size was 12. The number of transcribed pages was 13 pages and the participants' confidentiality was guaranteed. The data acquired from the participants was recorded using a recorder and a tablet then saved to the hard drive. The saved data was then systematical grouped into themes and sub themes were formed from the main themes. The data which was not related to the any of the themes was discarded.



6 FINDINGS

6.1 Kenyan food habits

According to the all the participants they had varying eating patterns which ranged from three to four times a day. Kenyans meal pattern included carbohydrates, proteins and vitamins and the respondents ensured that the meals contained some or all the food groups. Also the carbohydrates were also consumed a lot because people in Kenya perform a lot of manual labor.

“.....larger proportions of carbohydrates because, in Kenya we work a lot, we need energy...”

Some of the participants did not put any nutritional value on the food they ate but only on the taste. They all concurred that there were certain factors that dictated their choice of food which were **availability, affordability, level of income, freshness and food beliefs**. Different types of foods were **available** but depended on where one lived and the further one lived from the rural areas the more expensive it got.

“.....it depends where you live because like in the rural areas most guys grow most of the things that we eat so it is easy to access.... pork is not cheap and is not easily available”

Affordability and level of income go hand in hand because the higher the level of income the more affordable the food products were. They mentioned that when certain food products were off season they became expensive because only few people sold them therefore only few people would be able

to afford. It was also noted that certain foods could be substituted for others and hence give the desired nutritional content.

“...beef is cheap in Kenya and easily availableBeef you have different sizes depending on the size of your pocket and the size of your appetite.”

Freshness of the food products was another factor that they all observed while buying food products. They considered fresh products as having more nutrients than eating frozen products and hence preferred buying fresh products for example meat was bought straight from the butchery.

“It was easy to buy these from butchers and sukumawiki (kales) from mama mboga so easily.”

Food beliefs and **religion** were also major factors which dictated the types of food types consumed by the respondents. Due to the fact that they came from different communities meant that they had different food restrictions and beliefs that did not have any scientific backing or logical reason

“..... There are certain parts of chicken that kids are not supposed to eat. I don't know if it is out of respect or just a stupid belief but they say when in a family, when you cook, there are certain parts that are supposed to be eaten by the man of the house..... They call it the chest.....Also Sundu is the back side. The back side is meant to be for the man of the house and then the parts like legs and wings, the parts that don't have a lot of meat and so much meat, were meant for the kids and ... yeah.”

Religion is widely practiced in Kenya and there are two main religions in Kenya that is Christians and Muslims therefore there are certain meat

products that are forbidden for example pork is forbidden for Muslims and to some Christians.

"...those of the Christian faith have some verses in the bible that say that Jesus when he was casting out demons from some people who were possessed he sent them to the pigs. Also the Muslim community does not eat pork because it is also considered unclean."

6.2 Eating habits while in Finland

All the participants reported that their eating habits had changed since they moved to Finland. They all reported that their eating habits have become worse. They ate junk foods and traditional foods while in Kenya but now they eat mainly junk food.

"... I drink mostly tea and most of the time is chicken and rice, chicken and rice no variety. It's worse."

When asked to explain more on why their eating habits have become worse, the main reasons were due to **availability, allergy and taste**. The availability of foods that are suitable for them when they are allergic to certain food groups was not easily available and hence they ended up eating the same foods every other day. Since they cannot find the foods that they are used to, they now opt for junk food since these are easily available. Eating the same food all the time is worse for them. Taste is also an important factor when it comes to our choices in food. If the food does not taste the same as the ones back at home, it make it difficult for them to try new foods or even adopt to the food culture.

“I was used to our traditional foods of which are not available in Finland. I am also still finding it hard to adjust to the taste of food here in Finland To get what I am comfortable with and that is available regularly is hard.”

Time was another huge factor for change in their eating habits. Juggling between work and school schedule was the reason behind their habit change. They had a regular time for eating while in Kenya that is breakfast was taken in a specific period in the morning the same goes for lunch and dinner. Since coming to Finland the regularity of time to eat food had been lost due to school schedule and their work schedule.

Affordability was also a factor in their current habits. They now eat a lot of junk and ready / microwave meals from the stores. The junk foods and ‘ready to eat’ food in their opinion are affordable. These types of foods also cut down on the time needed to prepare a meal hence it was more ideal for them. All the participants agreed that food is easily **accessible** in Finland even though it is not what they are used to eating.

“You wake up you drink a glass of juice you rush to class. You go to work you come back at four and maybe eat so no schedule for eating.”

“.....you only warm in the microwave and eat. The best thing is that we also exercise a lot otherwise this just would have a big toll on us.”

The participants mentioned that although food is accessible, the **prices** are either too high or the **quality** is compromised. They further explained that quality is involved in freshness of food. Vegetables were given as an example

of foods that the quality or freshness was compromised. They also mentioned that most vegetables are frozen and if it was not frozen it came from a different country. They had noticed that the foods that come from a different country that is out of Finland were quite cheap as compared to the ones that have the Finnish mark. A comparison was made between Kenya and Finland and they said that food is expensive in Finland as compared to Kenya.

“.....food from Brazil or some other place out of Finland is quite cheap and you wonder why.”

Kenya and Finland are two different countries in terms of **economy and culture**. Since both countries have different economy situations, prices of foods will be different.

“Pork is not I don't know if it's about the culture back home, pork is not cheap and is not easily available. Then beef is cheap in Kenya and easily available but here it's expensive. You see, so there are differences.”

Culture also plays a big role on the price of food and integrating in a new place. To learn a new culture, get to know more about their food. Food is also a good tool to use when integrating into a new culture.

“..... you don't necessary have to like the food but through food you can, should I use the word “integrate”? It is a way of integrating as well to the culture.”

When asked about their beliefs about food while in Finland, all the participants said that their beliefs in foods have changed. This is due to interaction with people from other countries with different culture. They know have more respect to other people's cultural choice of food and are a little bit more flexible with food. Some participants are more in an adventure mood and wanted to try something that is not considered as food back home.

"..... sometimes if you stick to tradition you will see that other traditions are not fit or not right or that the other foods not good..... Other people value it so I don't hold the same beliefs that I had while in Kenya because I have interacted with people from China. Some of my friends have told me openly that they eat dogs you know. They eat weird things, things that you can't think of you know. So this, this has changed my beliefs so much that if you don't eat something someone somewhere eats and likes it and it works for them. I have even thought of trying something that is very weird. One day we wanted to buy frog legs but we didn't know how to prepare them. But one, I think sometimes we will buy them and see how they taste."

7. DISCUSSION

7.1 Kenyan food habits

Kenya comprises of 42 tribes and therefore each tribe has its own food preference and own traditional staple food. The common meal in Kenya across all communities is Ugali and kales. These are Kenya's staple foods which are consumed by urban and country dwellers. These foods are taken together with fish, beans, beef or mutton based on personal interest.

In agreement with Gilbert and Khoklar (2008, 204), religion, **income** and **food beliefs** play a major role in dietary changes. According to Jonsson, Wallin, Hallberg and Gustafsson (2002, 157) **religion** is a vital social norm where people of the Islamic faith can eat all types of vegetables and sea food but cannot eat food mixed with blood or pig's meat which is considered as unclean. Similarly, Kenyan immigrants also hold in high regard religion where the population comprises of a number of religions where the main ones are Christianity and Muslim. Certain animal meats like pig meat are forbidden and this limits the amount of protein choices for the followers. As portrayed in the study by Rochow (2009) beliefs play a big role in the types of foods consumed and Africa as a continent has many of them which differ from country to county. Kenya is no exception to food taboos as revealed in the findings where the participants gave different food beliefs according to their ethnicity.

In agreement with Gilbert and Khokhar (2008, 205) when people move to a region that is highly concentrated with people from their ethnicity dietary acculturation is slower because of trying to preserve their own **culture**. In

Kenya people have stuck to their traditional food products based on their ethnicity.

As seen in Oniang'o and Komokoti (1999) study, the level of income dictates the types of food one eats because the Kenyan population is classified into three social classes the wealthy, middle class and poor population. Based on this the people's purchasing power was based on how much they earned. Availability and affordability are also important in the choice of food one eats. It was also realized in the interview that the people who lived in the countryside bought fresh products since most of them are farmers and fishermen therefore the food products were very cheap, available and affordable compared to the urban settlers. According to a study carried out by government of Kenya and UNICEF in 1992 in Nyanza province showed that mutton was more widely consumed than goat meat because it was widely available and did not contain much fat (Oniang'o & Komokoti, 1999).

7.2 Eating habits while in Finland

As seen in the study of Koctürk and Runefors (1991), **taste** was mentioned as a major contributing factor to participant's food habits. Although they found foods that were similar to their home, they said that the taste was not the same. Taste is such a huge factor in their diet such that they were finding it hard to adjust to the Finnish foods. In our opinion, Kenya and Finland both have different culture and climate. Culture and climate have a big impact on the type of food available and the taste. Incoming migrants should be made aware of this fact and maybe encouraged to try the Finnish food and also continue to make food from their own countries. They can use what is available and substitutes for what they cannot find. Although there are

products that are not available, there are a lot more products here in Finland that you can also find in Kenya. The problem is getting information on where they are sold.

As seen in the study done by Pan, Dixon, Himburg and Huffman (1999), the participants in the current study also attributed change to their eating habits to **time** due to school schedules. At the moment they do not eat as often as they would like to or as they did back at home in Kenya. They also admitted to working apart from going to school. We may not have asked how many hours they work in a day or what their school schedules looks like in a day but they said that combination of the both affected their eating pattern. They sometimes have less time to cook therefore they opt for ready to eat food that is just warmed in the microwave in a few minutes. As it also seen in Parsons, Godson, Williams and Cade (1999), the participants in this study all mentioned that they had a regular eating pattern when they were in Kenya and it is not the same case at the moment while they are in Finland. We do believe that due to culture, the eating time may vary from country to country. In Finland, as seen in school cafeterias, lunch time starts as early as 10:30 am while in Kenya, most people have their lunch from 12:00pm to 2pm.

In agreement with Chaufan et. al. (2011), the participants also admitted to eating unhealthy food because it is **cheaper** and easily **available**. They also said that unhealthy foods do not require a lot of time to prepare. They are aware that they are eating unhealthy food but one interviewee added that at least they do exercise otherwise they would have gained a lot of weight.

In this study it was found that pork is not eaten by many people in Kenya because of **religious** ties. In Kenya consumption of pork is forbidden to people from the Islam faith, some Christian sects and it is tradition in some tribes not to eat pork, this is also seen in Jonsson, Wallin, Hallberg and Gustafsson (2002) study. The pork issue is a good example of **culture, availability and pricing**.

7.3 Ethical Considerations

Confidentiality is one of the most important principles to be considered by a researcher because he/she has to protect the identity of the participants from whom data is drawn from. In this study, we adhered to the above ethical considerations in a professional manner. Consent forms were issued and signed by the participants stating that they were not forced or obligated but gave their input in a free manner and they could withdraw at any moment if they wished. (Patton & Cochran, 2002, 5.)

Data handling and record keeping

Data handling is protection of research data by storing, archiving, discarding during and after the research project in a secure manner. Data handling also includes making policies and procedures that will guide on how to handle the collected data by electronic and non-electronic means. These play a big role in the integrity of research data. (Responsible conduct in data management,

2005.) The research data was collected by making sure that there was no information that would identify the participant. After the data collection session, the data was organized so as to ensure that all the necessary data are present. All the unnecessary ones were discarded. The researchers then made a policy that after all the data was collected; it would be stored in a locked file in the computer and was only accessed by both researchers.

7.4 Credibility, integrity and objectivity

In every qualitative research study carried out it is important that the researchers ensure that their findings are trustworthy and according to Lincoln and Guba (1985) they came up with ways to evaluate if the data collected is trustworthy. The first criteria for maintaining data trustworthiness is credibility which emphasizes confidence in the certainty of the results of the research from the participants' perspective. The participants are the only people who can authentically judge of the findings whether they are credible or not. (Trochim, 2006.) It's vital to find a good method of data collection which guarantees credibility and in our research we are going to use group interviews which will be conducted face to face to ensure that if there is any ambiguity in the answers we would ask the participants to expound on them.

Data integrity is important to ensure the detection of errors in the process of data collection whether the errors were deliberate or not. Data integrity is guaranteed by ensuring that quality assurance and quality control conditions are adhered to. Quality assurance was done as a preventive measure to detect

errors early in the research process. Quality control was done during and after the data collection process by identifying the required actions to be taken in order to correct a fault (Northern Illinois University, 2005). In the case of this study's qualitative research data integrity was carried out by using preventive measures to ensure that the data collected is free from errors. This was ensured that data collected was only accessible by the researchers and kept in a safe place.

Data objectivity is important when carrying out qualitative research because the researcher has to carry out the data collection and remain impartial without contaminating it. The readers should feel that the research did not portray personal prejudices and that the findings reflect what was investigated. (Payne & Payne, 2004.) In this study we remained impartial and the data collected from the interviews is free from our personal beliefs and values.

There are other evaluative criteria used by Lincoln and Guba (1985) that is transferability and dependability. Transferability is realized when the researcher does a thorough investigation of describing the research issue and assumptions that were key to the research. (Trochim, 2006) In this study this evaluation criteria was met and will then be used by people in the health sector to guide new Kenyan immigrants on the best nutritional habits while in Finland. Dependability criteria is based on the reliability of the data to be replicated without changing its form over time. (Trochim, 2006) The authors of this research ensured dependability by reporting step by step the processes involved in the research.

7.5 Conclusion and Recommendations for further studies

The study findings demonstrate that culture and beliefs plays a big role in one's food habit despite relocating to new country. The participants used to eat regularly and healthier foods while still living in Kenya. While in Kenya the factors that influenced their food patterns were freshness, affordability, availability, income, food beliefs, religion and culture.

When they moved to Jyväskylä, found it challenging to adapt to new dietary practices because the food did not taste the same or the staples that they were used to consuming are not available. Their current dietary patterns is influenced by, taste, price availability, religion and culture. Their diet now includes more of junk food as opposed to healthy foods. Healthy dietary practices are influenced by, desirability, availability, price and accessibility of food.

Based on the results of this study, we recommend that health care professionals to be knowledgeable of the types of foods that are common in Kenya so as to give advice on a Proper balanced diet while in Jyväskylä. They should also give information to incoming migrants about the Finnish culture and weather and its effect on the food that are available here. We also recommend that they give information of places where migrants can find the same foods from their country that are sold in Finland or substitutes for them. Since this study only cover a small number of participants and was done in one city, we recommend that further researcher can be done in other cities to find out if the results are the same.

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Appendix 1: Introduction letter

JAMK University of Applied Sciences

Contact information:

Email:

Date:

Dear Participant,

We are bachelor of health care nursing students studying at JAMK University of Applied Sciences. We are carrying out a research for our bachelor's thesis on the topic "Nutritional habits of Kenyan immigrants living in Jyväskylä". The purpose of this study is to provide information that can be used to educate Kenyan immigrants about healthy nutritional habits and the aim of the study is to find out the nutritional habits of Kenyan immigrants living in Jyväskylä.

Your participation is completely voluntary and you are free to withdraw at any time. The interview will last for approximately 40 - 60 minutes and there is no remuneration for taking part in this research. During the interview, there will be voice recording and note taking. Each participant is required to sign a consent form to confirm participation in the interview. You may contact the students if you have any questions or concerns.

Thank you for your participation!

Yours Sincerely,

Duncan Gathimba _____ Roselidah Otieno _____

Appendix 2: Consent form

I agree to sign this form to facilitate the mentioned students to carry out their research on “Nutritional habits of Kenyan immigrants living in Jyväskylä”. As a voluntary participant, I am allowing the researchers to use a tape recorder during the interview. I am aware that I have the right to withdraw from the interview at any time.

I am assured that confidentiality will be maintained throughout the research. I am also assured that I will not be identified from the data analysis in the research. I understand that all the tape-recorded information and personal information is solely for the purpose of the research and will not affect my safety in any way.

Date and place

Name of Participant

Participant’s signature

Researcher’s signature

Duncan Gathimba

Roselidah Otieno

Appendix 3: Interview questions

Kenyan food habits

1. What were your eating habits while in Kenya?
2. Describe what you consider as a healthy meal in Kenya?
3. In your opinion, what makes those foods that you have mentioned as healthy?
4. Could you please explain if you had any challenges with food in Kenya?
5. Could you please describe any beliefs you have about food?

Eating habits while in Finland

1. Could you describe how your eating habits have changed in Finland?
2. Could you describe the accessibility of food in Finland?
3. Can you explain any beliefs that you have about foods while in Finland?