

Perspective

To Eat or Not to Eat? Immigrants' Food Choices and Barriers to Healthy Eating in the United States

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Introduction

Eating patterns and obesity epidemics among immigrants in the US

Approximately one-third of U.S. adults is obese and faces increased risks of developing chronic diseases, including cardiovascular conditions, diabetes and cancer [1,2]. This reality is even more alarming among the foreign born and ethnic minority groups. Hispanics (or Latinos), experience higher rates of obesity than their white counterparts [1]. Upon arrival in the United States (U.S.), Latino immigrants are less likely to be overweight compared to U.S. born residents; however, their rates of obesity increase through time [3,4]. Today, about 13% of the U.S. population is foreign-born, with individuals from Latin America making up the largest group at 53% [5].

Many factors are at stake when it comes to trying to explain the rising obesity trend among Latinos, whose eating habits tend to deteriorate the longer they have resided in the U.S. This latter phenomenon is partly due to dietary acculturation, signaled by the adoption of the food and consumption patterns of the host country [6]. Today, it is amply acknowledged that the suboptimal American diet is deficient in nutrient-rich foods including fruits, vegetables, and whole grains, and superfluous in energy-dense sources of solid fats, added sugars, and alcoholic beverages [7].

Immigrants' diets tend to feature fresh or homemade foods, as well as traditional cooking preparations and ways of eating, which may or may not include the healthiest ingredients [8]. Recent immigrants, including Latinos, tend to have healthier dietary patterns including higher fruit and vegetable consumption than U.S.-born residents [9,10]. For example, foreign-born Hispanic adolescents present greater intake of rice, beans, fruits, and vegetables and are less likely to skip breakfast and lunch compared to their U.S.-born peers [11]. A cross-sectional study found that foreign-born Hispanic households cooked more meals at home compared to U.S.-born Hispanics [12].

Nevertheless, through time, immigrants face various circumstances that alter their eating patterns. Low-income Latinos, in particular, suffer from the impact of environmental and structural

factors, such as the of abundance and the easiness to buy and consume unhealthy staples compared to lean meats and fresh vegetables, which requires preparation [8]. As a result of lack of affordability, accessibility, and/or luxury status, Latino immigrants also experience an increased consumption of high-calorie fast foods [13]. Ultimately, immigration to the U.S. and prolonged residency (≥ 15 years) tend to alter individual eating patterns, including skipping meals due to time constraints, increasing snacking, and decreasing consumption of fruits and vegetables [9,13].

A review conducted by Satia-Abouta et al. [6], found that the direction of the effect between acculturation level and dietary intake, albeit significant, was inconsistent. For example, neither fat intake nor vegetable/fruit consumption was found to have a positive, negative, and null association with acculturation [6]. Thus, immigrants' dietary pattern changes caused by dietary acculturation can be healthful or unhealthful and are affected by various factors. One notable factor is the role of cultural habits influencing eating patterns [14] a topic to which we now turn.

Communities in the diaspora: The role of nostalgia in recreating food traditions

The research literature has recently begun to acknowledge the cultural and emotional significance of traditional foods in contributing to immigrants' dietary adaptation in the countries of destination [10,15]. Immigrants' craving for familiar staples is closely related to their nostalgic attachment to familiar images (e.g., smells, texture, flavors) that contribute to alleviate their sense of isolation and feelings of homesickness.

Latin American immigrants, in particular, tend to retain their traditional foods even after decades of settlement in the U.S. [16]. Our research on Latinas' consumption of familiar foods has been key for a better understanding of their weight management in relationship to their body image satisfaction [14]. Our work, supported by several research grants and publications [10,15,17,18] reveals Latinas' tendency to reproduce emotional and cultural bonding with culturally-familiar foods that are prepared, cooked and consumed either regularly or a part of special festivities (e.g., Christmas, national celebrations). Hence, we have coined the term "nostalgic foods" to refer to those traditional staples that play a key role in recreating immigrants' homeland as a virtual community abroad.

Our work on Latinas' retention and consumption of nostalgic foods suggest that first-generation Latinas often function as "food gatekeepers," culture transmitters, and role models for other members of their families, especially their daughters [10,17]. For these women (often mothers, grandmothers, aunts) feeding others becomes a culturally acceptable way to show their care for their relatives and peers, as well as a cultural vehicle to pass along family traditions (e.g., recipes, forms of preparation). Ultimately, food becomes a symbol of

belonging and a vivid token of immigrants' countries of origin and their traditional cultures.

Our research also suggests the presence of particular protective factors against obesity, diabetes and cardiovascular disease, particularly due to Latinos' intake of fruits and vegetables, whole grains, beans, and rice [10,18]. Unfortunately, not all food items invoking nostalgic belonging are actually healthy. Much of Latinas' traditional foods and everyday eating patterns indicate an abundance of saturated fats and highly caloric staples.

Based on our research findings [10,18], we conclude that Latinos tend to retain highly caloric fat-saturated nostalgic items instead of healthy ones. Although the reasons for this dietary adaptation are still inconclusive, our results suggest several potential factors. To begin with, once in the U.S. Latinas encounter several barriers to their access and consumption of healthy traditional foods. Typically, financial constraints keep them from buying, and consuming, lean meats, fruits and vegetables in favor of affordable highly caloric staples.

Our study results also show that Latinas tend to adopt sedentary life-styles in the U.S., contrary to the more active lives they used to have in their countries of origin. In other words, Latinas' physical activity (or lack of) becomes a determinant of their propensity to gaining weight in the U.S. Our study participants' obesogenic patterns were also determined by their busy daily schedules that left them with little time for cooking healthy home meals. Most women mentioned a regular tendency to snack and munch on sweets and salty chips, particularly given the little time they had for regular meals (e.g., breakfast, lunch). Furthermore, most acknowledged feeling overwhelmed with their multi-tasking activities (e.g., being caretakers, workers, students) and using snacking as a coping mechanism against stress [10]. In the end, we conclude that low-income Latinas tend to engage with dietary patterns that are biased towards highly caloric foods, rich in saturated oils and fats.

Implications for research and intervention

A better understanding of Latino immigrants' preferences, preparation and consumption of culturally-familiar foods will likely help inform future public health interventions towards improving, and preserving, their healthy eating habits. We propose several strategies for healthy eating among Latino immigrants particularly, and minority populations generally, that could be taken into account as implications for health interventions and health promotion programs. An increase in intake of fruits and vegetables seems to be the most important change required for making healthy life styles [19]. Unfortunately, accessibility and affordability are too often out of reach for disadvantaged populations. One solution would be to subsidize the prices of fruits and vegetables sold at bodegas, neighborhood markets and local farms.

Health interventions should take advantage of immigrants' natural gathering sites, such as bodegas or beauty parlors, as well as the natural role played by lay advisors, in order to disseminate food alternatives that include fruits and vegetables. Having access to low-calorie recipes written in Spanish and healthy food preparation techniques of their favorite foods could improve Latinos' eating patterns. Lastly, intervention programs that focus on the community level (rather than the individual one) will be more effective in

improving nutritional pattern of Latino immigrant populations.

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