



Minority Ethnic Communities

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1. INTRODUCTION

The nutritional recommendations detailed in other sections of the Food and Health Policy applies to people from the minority ethnic groups within Birmingham. It is now acknowledged that people from black and ethnic minorities are a disadvantaged group of the population in terms of health (DH, 1992; Balarajan and Raleigh 1995). Overall, the prevalence of disorders such as heart disease, diabetes, hypertension, stroke and mental illness tends to be high but, despite these increased health needs, uptake of healthcare services tends to be low. Health problems are often compounded by factors such as poverty, unemployment, poor housing, communication difficulties and social isolation, particularly for women. Many of these problems have nutritional implications.

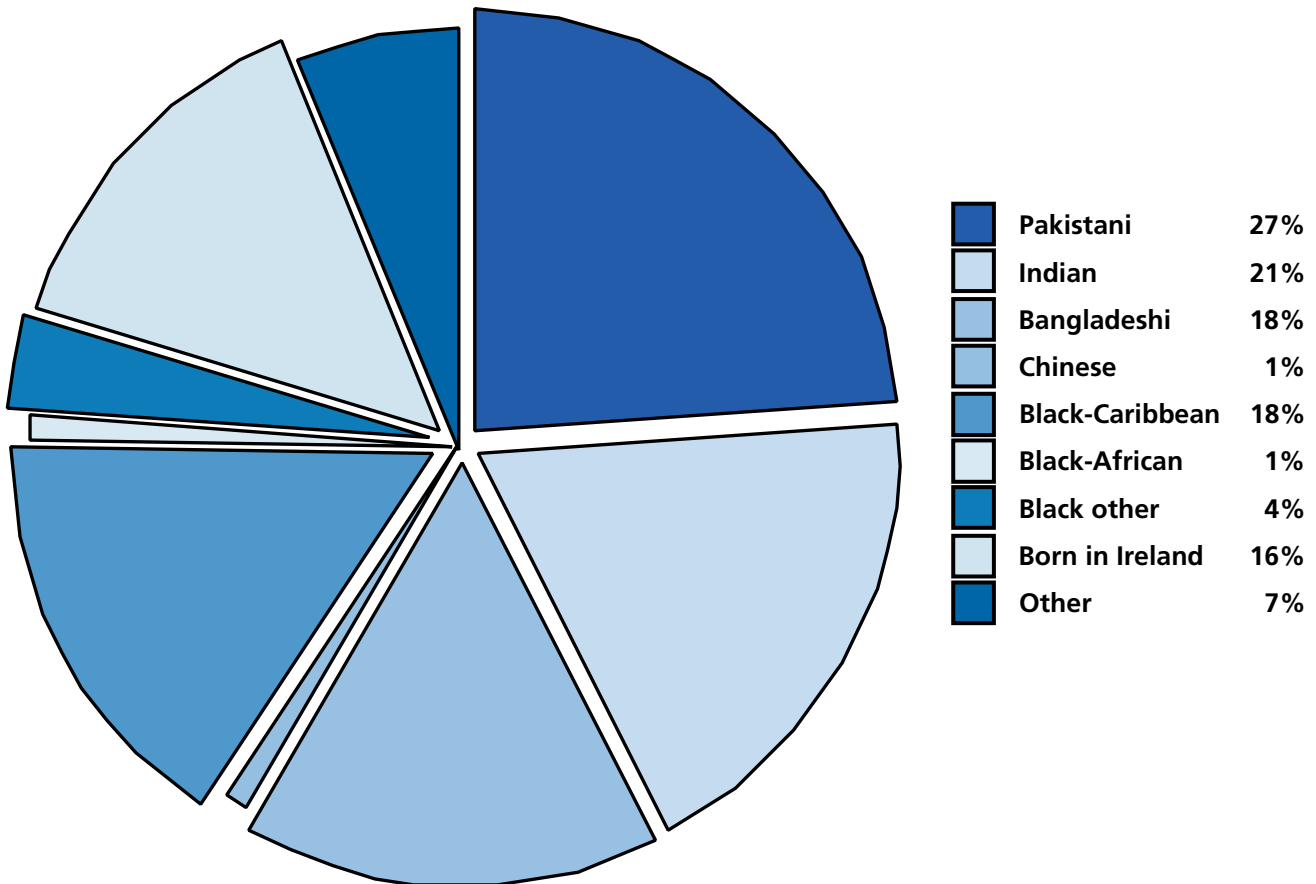
There is enormous diversity in culture, traditions and food habits both between and within different ethnic

groups and even within a single family. It is vital that health professionals understand and are familiar with these factors when offering dietary guidance. About half of those of minority ethnic origin in the UK were born in this country, a proportion which will steadily increase with time. As a result, western influences on diet have affected traditional eating patterns to a considerable extent. Some people consume a diet which is no different to that of their indigenous peers. Others, particularly older people or those who have recently immigrated, retain their traditional eating practices. When traditional diets change to that of the indigenous population, it tends to be by including snacks and drinks in the first instance.

21.5% of the Birmingham population is made up of people from minority ethnic communities.

The chart below demonstrates the proportions of ethnic groups within this 21.5%.

BLACK AND MINORITY ETHNIC GROUPS IN BIRMINGHAM (1996)





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The information in this section is intended to give general guidance about the typical eating patterns and food preferences of people from the following ethnic groups within Birmingham: -

Asian
African-Caribbean
Chinese
Jewish

As there are a variety of influences on food choice of which religion and culture are only two, it is appropriate to read this as general guidance only. When giving advice to an individual or family about food and nutrition it is important to base it on their individual diet and preferences.

1.1 FACTORS WHICH INFLUENCE FOOD CHOICE INCLUDE.

- Economic Status
- Climate Influences
- Food Availability
- Food Quality
- Marketing
- Cooking Techniques
- Health Restrictions
- Education
- Other Family Members
- Religious Taboo
- Traditional Practices
- Social Influences
- Food Beliefs
- Personal Preferences
- Influence of Local Culture
- Feelings/body image

2.0 ASIAN COMMUNITIES

The three main religions of Asians living in Birmingham are Hinduism, Sikhism and Islam. Each religion has specific dietary requirements.

Hinduism is characterised by the worship of many Gods, a caste system and belief in reincarnation. The Cow is sacred to orthodox Hindus who do not eat beef.

The major Hindu festivals are Holi and Diwali during which there is an abundance of rich foods. Hindu women may fast for one or two days of each week. This is to please the appropriate god so that he grants their wishes.

Sikhism was separated from Hinduism and founded in the 16th century. Sikhs believe in only one God and reject the authority of the Veda, (Hindu writings).

Like Hindus, Sikhs will generally avoid beef. The Sikh Temple of Gurudwara serves free meals and most people who attend will consume one meal daily at the temple. This usually consists of a vegetarian dish, chapatti and dessert.

Islam The religion of Muslims teaches that there is only one God and that Mohammed is his Prophet.

Many Muslims fast during the month of Ramadan and no food or drink will be taken between sunrise and sunset. A heavy meal is usually consumed before sunrise and again on breaking the fast. The old, chronically ill, pregnant and breastfeeding women and children under 12 are exempt from fasting. See appendix 1 for guidance about diabetes and Ramadan.

It is against the Islamic religion to eat pork and orthodox Muslims may reject manufactured foods, which contain animal fat. Many will only eat halal meat, which involves ritual slaughter of the animal.

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2.1 FOOD PREFERENCES

The table below gives specific details of the foods consumed by the main Asian groups in Britain

From the INDIAN PUNJAB		From GURJARAT		From PAKISTAN	From BANGLADESH
SIKHS	HINDUS	HINDUS	MUSLIMS	MUSLIMS	MUSLIMS
Main Staple Cereal					
Chapattis	Chapattis	Chapattis	Chapattis or Rice	Chapattis	Rice
Main fats					
Ghee Butter Oil	Ghee Butter Oil	Ghee Butter Oil	Ghee Butter Oil	Ghee Butter Oil	Ghee Butter Oil
Meat and Fish					
No beef some vegetarians others eat mainly chicken or mutton no fish	No beef mostly vegetarians no fish	No beef Mostly Vegetarians No fish	No pork Halal meat only (usually chicken or mutton) Little if any fish	No pork Halal meat only (usually chicken or mutton) Little fish if any	No pork Halal meat only (usually chicken or mutton) A lot of fresh or dried fish
Dairy Products					
Very Important Milk Yoghurt Curd Cheese	Very Important Milk Yoghurt Curd Cheese	Important Milk Yoghurt	Fairly important Milk Yoghurt	Fairly important Milk Yoghurt	Little consumed Milk
Eggs not a major part of the diet	Eggs not eaten by strict vegetarians	Eggs not eaten by strict vegetarians	Eggs usually hard boiled, fried or omelette	Eggs usually hard boiled, fried or omelette	Eggs usually hard boiled, fried or omelette
Pulses					
Major source of protein	Major source of protein	Major source of protein	Important	Important	Important
Vegetables and Fruits					
Curries Occasional Salad Fresh Fruit	Curries Occasional Salad Fresh Fruit	Curries Occasional Salad Fresh Fruit	Curries Occasional Salad Fresh Fruit	Curries Occasional Salad Fresh Fruit	Curries Occasional Salad Fresh Fruit



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An example of what might constitute an evening meal for an Asian family is dhal, a meat or vegetable dish, chapattis and/or rice, side salad, natural yoghurt, pickle and fresh fruit.

Shopping may often be done by a male member of the household and the cooking will be done by one of the female members. Family structures could include the nuclear family, an extended family or a joint family including the wives and children of several of the sons of the family. In their country of origin an Asian family would place great emphasis on getting together for a meal, whether it be lunch or dinner. However on settling in the UK, lack of time and the availability of convenience foods has meant that family meals are less important.

2.2 HOT AND COLD FOODS

The belief in “hot ” and “cold” foods is held to varying degrees by Asians.

Hot foods are said to excite the emotions, raise body temperature and promote activity. These foods are therefore used when someone has a ‘cold’ condition such as depression or low blood pressure.

Cold foods are said to reduce body temperature and impart cheerfulness and strength. Pregnancy is a hot condition and therefore cold foods are eaten to balance this.

List of Hot and Cold Foods

● Hot Foods

Ginger, garlic, nuts, almonds, ginger wine, brandy, Gur/honey, coffee, grapes, karela, (a bitter gourd) aubergine, lady fingers, radish, spinach, green chillies, fish, chicken, pork, meat, egg, pigs, trotters, certain lentils (masoor dal)

● Cold Foods

Orange juice, cucumber, rice, lassi, lentils, lemon, sugar cane, kheer, cold water

Health professionals should be aware of these beliefs so that their advice is appropriate

2.3 INFANT FEEDING PRACTICES IN ASIAN POPULATIONS

Breast Feeding: The incidence of breastfeeding is much greater in the Indian Sub Continent than in Asian communities in the UK. There are several reasons for low numbers of Asian mother's breastfeeding.

- Verbal communication is the basis for support, hence non-English speaking mothers may be denied this help, except in areas well supplied with interpreters.
- Mothers in the UK have to cope with housework, shopping, cooking and other responsibilities without the lying in period she would have had in her country of origin.
- Breastfeeding is not usually carried out in the presence of men. Not all British homes are big enough to provide separate rooms for men and women in order to obtain the necessary privacy. Therefore the mother may have to leave the living room and retreat to her bedroom every time the baby wants to feed.

Weaning: good weaning practices may be compromised by social disadvantage and the varying quality, expense and availability of familiar Asian foods. Late weaning and prolonged breastfeeding are commonly practised with infants who have only been in the UK for a short time. In the UK, late weaning may be partly due to the poor availability of suitable foods and lack of adequate and appropriate advice. There is a tendency for Asian infants to be weaned on sweet proprietary weaning foods, which are low in protein and iron. This is due to a limited availability of halal savoury proprietary products.

- Mums should be encouraged to cook savoury weaning foods at home. Spices can be used but should be limited to a small amount. Salt should be avoided.
- The practice of sweetening milk and adding foods such as rusk, honey, Weetabix and baby rice to bottles is common and should be discouraged.

See reference 1.

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3.0 AFRICAN-CARIBBEAN COMMUNITIES

The name African-Caribbean collectively refers to people of African descent who come from the many Caribbean islands.

The majority of people from the Caribbean moved to the UK during the 1950's and 1960's, notably from Jamaica.

Although African-Caribbean people are generally Christian, there are many faiths in the Caribbean.

Two main religions which affect dietary practices are Seventh Day Adventism and Rastafarianism.

Seventh Day Adventist's - became a separate body after the expected Second Coming of Christ failed to be realised in 1844. They believe that Christ's coming is imminent and observe Saturday instead of Sunday as their Sabbath. Followers are often vegetarian. If meat and fish are eaten, pork is avoided, as are fish without scales and fins. Alcohol and other stimulants are avoided.



Rastafarian - members are originally of a Jamaican religion that regards Ras Tafari, the former emperor of Ethiopia, Haile Selassie, as God.

In Rastafarians the degree of dietary restriction depends upon the individual. Many are vegetarian or vegan. The majority of followers will only eat 'ITAL' foods, which are foods considered to be in a whole and natural state. Processed or preserved foods are excluded. Specific foods not consumed are pork, fish without fins and scales, fruit of the vine and stimulants.



3.1 DIETARY HABITS OF AFRICAN-CARIBBEANS

- When discussing the Caribbean diet, it is important to remember that the people of the Caribbean are not a homogeneous group.

Dietary practices of each island have been influenced by different historical, political, social and geographical factors.

For example, development of the sugar colonies brought many cultures to the Caribbean. Hence dietary practices will vary considerably and dishes with similar or the same name can contain different ingredients.



- An example of what might constitute a meal for an African-Caribbean family is meat or fish, starchy root or banana or both, vegetables, probably 2 or 3 e.g. chicken with rice/red peas and fried plantain, and salad. Possibly dumplings in addition, e.g. beef stew with vegetables and dumplings. Usually there is no dessert - maybe a fruit.
- People tend to have one main meal a day. Where the job allows this is at about 3 or 4pm, otherwise at 6 - 7pm.





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REGIONAL DIETS OF MAIN AFRICAN-CARIBBEAN GROUPS IN BRITAIN

FOOD AND DESCRIPTION	COOKING METHOD	USAGE
BREAD - often dense, hard dough bread		With or without spreading fat. Breakfast/lunch/snacks
CREAM CRACKERS		Snack eaten with cheese and spreading fat.
BUN - flat round cake contains molasses		Snack eaten with cheese and spreading fat.
ROTI - flat pancake made from flour and water	Cooked on a hot greased surface	Parties/festive occasions Served with curry.
FRITTERS - batter mixture often contains saltfish	Deep fried	Breakfast/snack. May be taken with bread.
DUMPLINGS - made with flour, salt or sugar baking powder and water. Cornmeal may be added	Boiled or fried	Eaten with fish/meat/vegetables. Fried: used as snack Boiled: used in one pot meals
MACARONI - may have added milk, cheese eggs, onions, flour and fat	Boiled/baked in the oven	Macaroni cheese. Usually eaten in combination with a rice dish.
YELLOW CORNFLOUR - made from ground corn. Fine or coarse texture.	Boiled with water. 'Turned' cornmeal (boiled with water, seasoning, pepper, onion etc.until thickened) used with wheat flour to make dumplings	Weaning food or porridge Eaten with meat or vegetables
RICE - white or brown , polished, par-boiled	Boiled	Large amounts taken, sometimes with added butter, margarine, coconut cream, beans.
STARCHY ROOT VEGETABLES (can also be called provisions) Yams, eddoe, sweet potato, potato, cassava, tannia, dasheen	Boiled, baked, roasted, mashed or creamed.	Usually the main part of meal. Eaten with protein foods and vegetables. More than one usually taken at a meal. Added to soup (one-pot meals). Made into puddings, e.g. sweet potato pudding.
STARCHY FRUITS - green banana, plantain, and breadfruit.	Boiled, baked. Plantain sometimes fried.	Main part of a meal. Plantain sometimes used for breakfast, soups, and stews.
VEGETABLES - callaloo, karela, kale, spinach, dasheen leaves, pumpkin, pak choi, okra, eggplant, christophene (chocho)	Boiled/steamed / stir fried	Fresh vegetables preferred. Used in soups and stews. Carrots may be grated and juice combined with water and condensed milk to make a drink.
PULSES (usually dried) - pigeon/gungo peas, cowpeas, lima, or sugar beans, chick peas, split peas, red kidney beans.	Soaked as necessary. Boiled	Added to soups and stews. May be eaten in combination with rice.

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FOOD AND DESCRIPTION	COOKING METHOD	USAGE
FRUIT - bananas, mango, melon, orange, paw paw, limes, sugar apple (sweetsop) star apple, otaheite, avocado, and ackee.	Usually eaten fresh.	Can be used to make ice cream, pudding, juices, punches, jams and jellies. Some are imported and therefore very expensive. Avocados and ackee are fruits commonly used as vegetables. Avocado sometimes called pear. Ackee served with salt fish.
MEAT - Pork, beef, lamb, mutton, goat, rabbit. All cuts of meat may be consumed. Many traditional dishes use offal, tails, hides, feet and heads.	Meat is usually marinated or seasoned before cooking. Stewed, curried, roasted, steamed, fried and very occasionally grilled. Often browned by frying or with the use of burnt sugar.	Eaten with cereals or staple starches, particularly rice.
POULTRY - Mainly chicken	As above	As above
FISH - All types eaten, i.e. Snappers, mackerel, flying fish, coley, mullet, salted fish	Fried, steamed, stewed salad and baked.	Fish served with vegetables and staple starches. Salt fish eaten with ackee or dumplings
DAIRY PRODUCTS - Milk: fresh or tinned (evaporated, condensed). Cheese: natural or processed.		Dairy products are not used in large amounts. Used in drinks and puddings, condensed used in preference to fresh milk. Cheese often used as a snack with cream crackers, bread or bun.
FATS AND OILS - Vegetable, coconut, olive, red palm oil, lard, butter, margarine.		Used for frying, steaming and roasting etc. Red palm oil is often used to give flavouring and colouring to particular foods.
EGGS	Fried, scrambled, boiled, occasionally as an omelette.	Cakes, puddings, salads, garnishes, macaroni based dishes, fritters etc.
NUTS - Cashew, peanut, almond, red palm, coconut (and coconut cream)		Snacks Coconut cream added to soups, rice and peas, cornmeal puddings etc.
SEEDS - Pumpkin, watermelon, sesame, guinea.		Added to curries. Eaten as snacks.
DRINKS - Fruit juices e.g. orange, mango, and pineapple. Herbal teas - sweetened. Malted drinks or hot chocolate. Milk - based energy drinks. Non alcoholic malt drinks. Glucose energy drinks. Home made juices, i.e. lime juice sweetened with sugar. Carrot juice punch (carrot, tinned milk, nutmeg, sugar). 'Punch' (Stout, tinned milk, sugar, nutmeg, raw egg).		



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3.2 INFANT FEEDING PRACTICES IN THE AFRICAN-CARIBBEAN POPULATION

- **Breast-feeding:** in the homeland 90% of women breast feed their babies initially, however this is often short lived and exclusive breast-feeding is rare. The large-scale marketing of infant formula and the early return of women to work are implicated in early cessation
- **Weaning:** infants are traditionally weaned as early as 1 month of age and 45% are reported to be receiving food by 3 months. In contrast late weaning is commonly observed in the orthodox Rastafarian population. Common weaning foods include high starch foods such as cornmeal, oat or rice porridge. Infants then need to move onto a variety of foods. - See Under Fives section.

4.0 CHINESE COMMUNITIES

Most of the Chinese in Britain originate from Hong Kong (rural and urban areas) and others come from South China.

Many Chinese people came to Britain during the 1950's, but most Chinese immigrants came after 1962 to work in the catering trade.

4.1 FOOD PREFERENCES

China is a large country and there are regional differences, which provide an infinite variety of Chinese cuisines. Chinese people from the different provinces have brought with them their regional diets.

In traditional Chinese medicine, good health depends on maintaining a balance in the body of two opposite elements 'yin' (cold) and 'yang' (hot).

'Yin' and 'Yang' foods

Diet plays an important role in helping individuals maintain a normal healthy balance in their body and to correct imbalances.

Some foods have 'heating' (yang) properties and others have 'cooling' (yin) properties. Other foods are considered neutral.

It must be remembered that the 'hot'/yang and 'cold'/yin terminology is independent of actual temperature of the food when it is eaten, or thermal heating properties.

A typical meal consists of rice, some meat or fish, vegetables and soup. Soups can be part of the main course or eaten on their own.

People tend to have breakfast and two main meals. The timing of the meal tends to be as follows: People at home: 8am, 12-1pm, 6-7pm. People working in catering: 11.30am, 4-5pm, 12.30-1.30 a.m. .

All dishes are served together. Eggs, meat, fish and vegetable dishes, or their combinations are served in individual dishes, for people to serve themselves. Rice is served in individual rice bowls.

Hot Foods ('Yang')	Neutral Foods ('Yin Yang')	Cold Foods ('Yin')
Meat Herbs Alcoholic drinks Ginger Pepper Spices Oils and fats Foods which produce 'yang' energies tend to be spicy, high calorie, oily, fried or foods strong in flavour	Fish Rice Some vegetables These foods are regarded as balanced or neutral	Some fruits and vegetables Foods which produce 'yin' energies are usually thin, bland, watery or low in calories



5.0 JEWISH COMMUNITIES

Judaism is an ancient religion. Many people of the Jewish faith have been born in Britain of families which have been here for several generations.

Most have come from Europe and some from the Middle East.

Dietary laws are fundamental to the Jewish religion. They believe that every time they eat, they are reaffirming that holiness and indeed, reminding themselves that they are the people that 'the Lord hath chosen'.

Orthodox Jewish people follow strictly the dietary laws and customs of Kasrut.

A basic law of Kasrut is that meat and milk foods must be kept apart in cooking and eating.

All utensils used in the preparation, cooking and serving of either product must be washed and kept separate. e.g. crockery, cupboards, ovens, tablecloths, tea towels etc.

Only Kosher meat, bought from a Kosher butcher should be eaten.

5.1 FOOD PREFERENCES

A meal consists of either Kosher meat or fish and potatoes or rice, vegetables and fruit.

Also cheese, egg or herring with salad or bread are considered a meal.

People tend to have 3 meals a day: breakfast, lunch and dinner.

Meals are usually served in courses.

6.0 REFERENCES.

1. An enquiry into the traditional beliefs of Asian Women about Weaning 1994. Sandra Rote 1994 - unpublished.



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APPENDIX 1

DIABETES AND RAMADAN

Guidelines for Fasting Safely During The Holy Month

Fasting during Ramadan is one of the five pillars of Islam

Fasting is obligatory for all healthy adult Muslims. Exemption from fasting is granted to certain people, including children under twelve, the sick, the elderly, pregnant and breast-feeding women and travellers. However they are expected to do the fast later on their own and many prefer to do it with others at Ramadan.

During Ramadan the treatment for diabetes will change because of fasting.

Patients will need to speak with their doctor before changing medication or insulin doses.

Changes to Diabetic Diet

The diet should normally be based on the following guidelines:

- Regular meals based on starchy foods e.g. rice, chapati, bread, cereals
- Avoid adding sugar to foods
- Choose sugar-free drinks
- Lower fat intake
- Five servings of fruits and vegetables each day

During Ramadan dietary habits change. Only 2 meals a day are eaten, Sehri (early morning meal) and Iftar (break of fast after sunset). There are longer gaps between meals and greater amounts of foods and different types of foods are eaten. In Ramadan people may experience large swings in blood sugar levels.

During Ramadan, follow these dietary guidelines to help control blood glucose:

- Limit the amount of sweet foods taken at Iftar. Have small amounts of foods such as laddoo, jelabi, burfi.
- Fill up on starchy foods such as basmati rice and chapati.
- Include fruits, vegetables, dhal and yoghurt in meals at Iftar and Sehri
- Try and have the meal at Sehri just before sunrise, not at midnight. This will spread out energy intake more evenly.
- All drinks should be sugar-free. Choose sugar-free types of fizzy drinks and cordials. Avoid adding sugar to drinks, use a sweetener where needed e.g. Canderel/Sweetex.
- Have 1-2 glasses of fruit juice/day. Choose sugar-free drinks or water to quench your thirst.
- Limit fried foods such as paratha, samosas, chevda and bombay mix. Measure and reduce the amount of oil used in cooking (ideally aim for 1-2 tablespoons for a 4 person dish)

Changes to Diabetic Treatment

DIET ONLY

People controlled by diet alone may fast

Diet and Tablets

Patients who take tablets for diabetes may fast but the timing of tablets will change. It is essential to take tablets during Ramadan as they are needed to even out blood sugars.

- If medication is normally taken in the morning only, take the same dose at Iftar instead
- If medication is normally taken twice a day, take the morning dose at Iftar and take the normal evening dose at Sehri
- If medication is normally taken three times a day, patients should consult their diabetes doctor as the dose and timing will have to be changed for Ramadan.

DIET AND INSULIN

If patients are treated with insulin they will need to be very careful if they decide to fast.

1. Usually normal doses are swapped over, e.g. take the normal morning dose at Iftar, and the normal evening dose at Sehri.
2. People may need to discuss medication with their doctor.
3. In order to avoid low blood sugar, rest as much as possible during the day.

Do not stop insulin during Ramadan.

MONITORING DURING RAMADAN

During Ramadan blood sugars may swing from very high to very low.

Patients need to know the signs and symptoms of low blood sugar. These include weakness, sweating, trembling, tingling in the lips and fingers, slurred speech, bad temper, hunger, sleepiness.

If the blood sugar level goes below 3.5 or if patients feel any of these symptoms, they should break the fast and take a sweet drink, followed by a starchy food such as chapati or bread.

Patients on tablets or insulin, should seek advice from their doctor immediately if their blood sugar goes low.

It may be wise to rest during the day while fasting and be more active at night after eating. This will help to balance blood sugar levels.