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DIETARY ACCULTURATION AMONG AFRICAN MIGRANTS IN AUSTRALIA

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he study sought to describe sub-Saharan African (SSA) post-migration food habits and eating patterns and examine how the food habits of SSA households in Australia reflect post-migration acculturation. Data were obtained on 139 households of demographically diverse recent migrants from across sub-Saharan Africa. The study found that SSA migrants and refugees experienced dietary acculturation characterised by three processes: substitution, supplementation and modification of recipes. They experienced difficulty locating their traditional foods, in particular, African vegetables (34.2%), unprocessed maize meal (29.1%), Camel milk (23.1%) and maize grain (13.7%). The new foods adopted since arrivals were pizza, breakfast cereals and fast foods, but also included new fruits and vegetables. Takeaway food such as Pizza Hut or McDonalds featured prominently in the SSA post-migration diet. Reasons for eating out were favourite food (48.3%), routine family outing (38.3%), special occasion (33.3%) and no time to cook (25%). A significant change in meal pattern was the inclusion of breakfast, although 21% reported skipping breakfast. In conclusion, many of the observed dietary changes were not consistent with good health and may predispose this population to rapid weight gain and chronic disease. Rapid modernisation and the Anglo-Australian culture interact in a complex way with traditional eating and socialisation practices of SSA migrants. Understanding these forces can allow effective health promotion and community development strategies to be developed for the future health of SSA migrants and their communities.



Biography

Andre M N Renzaho has obtained PhD in Public Health Nutrition from Deakin University, Australia. He joined Western Sydney University in 2015 and prior to that, he was the Director of Migration, Social Disadvantage, and Health Programs within the Global Society Unit, the Department of Epidemiology & Preventive Medicine, Monash University. With a background in Global Health and International Development, he has professional experience in complex humanitarian emergencies and development practice, international public health, and nutrition epidemiology. He has worked with a number of United Nations including working with Care Australia, Concern Worldwide, Medecins Sans Frontieres, the United Nations High Commission for Refugees, and the United Nations Children's Fund. He has also undertaken Consultancy work for State and Commonwealth Governments in Australia and has been a member of a number of governmental and non-governmental Boards, Committees, Expert Panels, and Taskforce.

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