PhD course
Older People - Food, Health, Eating, Meals and Nutrition.
Applying different methodological and scientific approaches
Aalborg University 11-13 May 2016
Project progress paper

Food and health through empowerment and social inclusion. Moroccan women living in Denmark for three decades

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The projects takes place in cooperation with Lecturer Birgitte Gade Brander and Lecturer Runa Midtvåge
Introduction

Migrants started to arrive in Denmark in the 1970s. Mostly young men came to seek employment and their young wives joined them. The public policy at that time did not encourage women to learn Danish nor to take work. The target group of the project about ‘Food and health through empowerment and social inclusion’ started with 17 Moroccan women. Most of them are able to speak proper Danish and read and write; however, a few are illiterate. The women have created a network which they call a Sewing Club. It has providing them with a platform to share knowledge, skills, and information about living in the Danish society. The context of the research is the dual identity of the Moroccan women, who have lived and learned in an alien culture balancing between their Moroccan and Danish customs through their food and health understandings. How are they socially included in a new culture where many ethnic minorities are marginalised due to language, culture, food, social class? The women have organised the Sewing Club by themselves which uses the facilities at a Senior Activity Centre (including a nursing home) in Copenhagen that promotes (ethnic) pluralism (mangfoldinghed). This paper provides insights into the methodology and methodological considerations discussed and elaborate during the project and literature referred to.

Objective of the project

The objective of the study/project is to examine and challenge empowerment processes of a group of Moroccan women through their self-perception of food, health and inclusion during their lives in Denmark. Have they come to an understanding in their daily lives of ‘Sense of coherence’ (SOC) (comprehensiveness, manageability and meaningfulness – A. Antonovsky) and by this achieved empowerment to handle their lives and eventually have the feeling of inclusion? The project includes both 1) a research component to understand and analyse how the women perceived themselves and their constructed practices in their daily lives, and 2) to challenge them through dialogues and activities to integrate more considerations of a health promoting lifestyles and in that respect empower themselves. That might even lead to encouraging other ethnic minority people to be included in the activities, or to establish and inspire other women’s groups to do the same. It was considered a possibility for the Senior Activity Centre to be able to attract more ethnic minority citizens to the Centre – and eventually to the nursing home in the longer perspective. The problem formulated for this project is: How it is possible to strengthen ethnic minority women’s empowerment and feeling of coherence through food, health and social inclusion?
**Theoretical approaches**

A. Antonovsky's sense of coherence (SOC 1987) and P. Freire's (1970) ideas about the liberation theology, which is to be materialised through democratic and empowering health education, were starting points in the project approach. Further on it was complemented with the concepts of food literacy (Vidgen and Gallegos 2014), health literacy (Nutbeam 2000, 2008; Chin 2011). Each of the theories is contested and debated and they all lead to enlarged and broad concepts of personal understanding and reading of the environment to be able to improve one's own lives as well as the lives of others in a broader societal context, e.g., leading to empowerment. Empowerment is related to social forces that affect one's sense of control and feelings of power. Furthermore, empowerment encompasses the need of social support to reinforce resources, assistance and motivation and thus provide the individual to make decisions (Shearer & Fleury 2006; Hawks 1992; Ellis-Stoll & Popkess-Vawter 1998). From the broad theoretical approaches, the aim is to narrow the focus to health and food literacy.

Food Literacy is here defined as the ability that strengthens individuals, families, and society to protect food quality and the importance of knowledge and competences to handle food in all processes from planning of meals to consumption (Vidgen and Gallegos 2014).

Health literacy is in this project defined according Nutbeam's concept of "critical health literacy", where each individual is able to improve one's ability to analyse information critically and through conscious cognition lead to social actions and the use of information to exert greater control over life events and situations (Nutbeam 2000, 2008).

**Methodologies**

The methodologies were deliberately selected to be qualitative, applying both phenomenological (Kristensen 2007; Jacobsen et al 2015) as well as hermeneutic approaches (Dahlager & Fredslund 2007). Phenomenological when working with narratives of the women and in observations during the practical activities, and hermeneutical when it comes to dialogues about health and food literacy – a dialogue about how food in a Danish and global context may support the health of the Moroccan women (hereafter called ‘the women’).

The researchers and the women created together the frames for activities within topics of health and food practices. The common activities involved making food together; physical activities through yoga and physical training in a gym room with apparatuses; workshops with specific topics (e.g., diabetes); Antonovsky's SOC 13 questionnaire about health and feeling of confidence; registration of daily food consumption; focus group discussions and individual narrative life-story interviews.
From the outset the intention was to create action-oriented participatory research with a bottom-up perspective together with the women in the group (Park 1993, Korbeissi et al 2011; Minkler and Wallerstein 2008; Nielsen and Nielsen 2015). However, it was realised by the three researchers from the Danish and the English education in Nutrition and Health (Metropolitan University College) that our ambitions went far ahead of the interests of the women, and we had to revise the research strategy. It was not possible to make a common action-oriented research, because the women involved were not sharing the researcher’s interest in involving other people or groups to work on health improvements. Accordingly, the project changed in this phase from emphasizing the change and empowerment to focus more on the research to understand the life and self-perceptions of the women in the perspective of food and health literacy.

Most important was that the research team had to ensure ethical dimension of the project as some of the women felt insecure about the interests of the researchers and were not eager in being interviewed. The research strategy was changed to be much more explorative with the focus to understand the women on their own terms and interests. The various activities and interviews are accordingly carried out with continuous reflections about the learning for both parts, and whether activities can be done differently. We have to not only use the existing methodological literature, but also use our long term experiences from other research in Denmark and abroad. To gap the cultural differences young women with Arabic background were involved in the project.

After six months implementing the project, including food making workshops and regular meetings with physical activities, the women were more confident, and interviews and focus groups discussions were carried out. They enjoy the food activities and half of the group takes part in physical activities, several do not take part due to various physical problems. Often there are social events which have to be handled, and they send regrets not to participate. At present the project has lasted 1.5 year with continued physical activities each or every second week; three food workshops and shopping together; one focus group interview and 5 individual interviews. One or two more interviews and one focus group are planned in the coming months to finalise the interviews.
The project has undertaken a number of literature searches. The subject for the research focussing on older ethnic minority women and food and health literacy in Denmark is not a popular theme and very little literature is found on the topic. International literature is mainly focussing at various aspects of ethnic food in different contexts like the US and particularly in Canada. It is established knowledge from qualitative based research that ethnic minorities are assessing their health much worse than Danes in general (35 percent compared to 19 percent ethnic Danes consider their health as reasonable, bad or very bad). Diabetes 2 is also 8 times higher among ethnic minorities than among ethnic Danes (Eskildsen, Biswas & Ahlmark, 2012; Petersen, Rasmussen and Blaakilde, 2012; Singhammer, 2008; Hansen & Kjøller, 2006). The other focus areas is ethnic minorities migrated to other (Western) countries, which is part of the 'migration' literature. In the Danish contexts, the migration literature has its own history very closely linked to the public policies on migration and including some health investigations of quantitative health assessments. More lately the ideological and emotional debates on refugees deal with the cultural differences, but with other foci than this study. The Association of Anthropological Studies published in 2015 an edited volume by Karen Valentin and Karen Fog Olwig (eds.) 'Mobilitet og tilknytning' (Mobility and attachment). A few studies are looking further into older ethnic minority women in Denmark, but still in process. One study concerns older ethnic minorities in nursing homes (Blaakilde et al), and about
Turkish women in Denmark (Danish Gerontology Society’s General Conference 2015) where qualitative approaches and narrative analysis are applied.

Accordingly the search has been concentrated on the theoretical and methodological approaches how to be inspired from the theories on food and health literacy, inclusion, and empowerment.


Challenges in methodology

The individual interviews for the present study could be classified within the interpretive phenomenological and narrative approach. The research team developed a guideline for the core questions to use as a loose frame for the interviews. The main themes included: Family and life in Denmark and Morocco; personal life experiences coming to Denmark and work and health in Denmark, including religion; gender and generational roles; food and health literacy; education and life skills; language and inclusion; networks and neighbourhoods; experiences with the municipality, rights and duties, expectations living in Denmark; comparisons between Denmark and Morocco.

The interviews we consider successful and one of the most important sources for the analysis; however, fairly few wants to be interviewed. One of the reasons is that their Danish is not very proficient. Different types of written formats were introduced in the beginning like Antonovskys SOC 13 questionnaire. Nevertheless, this methodology proved not to be applicable as several of the women are illiterate. Accordingly, we changed into making oral interviews about daily food and filling the formats for some of the participants who are not writing themselves. The information on more exact amount of food consumed everyday proved to be unreasonably low and not reliable information, and
we are planning a focus group to discuss only food to approach this theme from a different perspective.

**Preliminary findings**

It is premature to make conclusions from the study as the deep analyses are yet to be carried out. A contextual understanding have nevertheless been learned, which is summarised below.

The women came to Denmark when they were very young due to their husbands had employment in Denmark. It was a most difficult time to arrive in Denmark and settle without much support. For most of them children were being born soon after. There were not many efforts to integrate them. Those who started to work learned Danish, whereas those with many children who never were employed are still very weak in Danish. They have all been married, but some are divorced and some have lost their husbands. They are today between 50 and 65 years old. They all have children, between two and ten, and are much involved in taking care of the grandchildren. Most of the children are living in Denmark. There are still close contacts to Morocco, and most will visits relatives every year.

They are all mildly to more heavily overweight. Most of them suffer from diabetes 2, and they have many different diagnoses related to their skeleton and motion apparatus. It is difficult to carry out most of the elementary yoga positions due to arm, shoulder, knee, foot and back problems. However, they are strong in some of their muscles, which can be used in training equipment in the gym facilities at the Senior Activity Centre. They are interested in losing weight, but most of them love bread and sweet cakes. Today they eat mixed Danish and Moroccan food dishes.

Most of them are not able to work fulltime due to their physical and for some also psychological conditions. The husbands are beginning to retire from employment, and they are themselves partly on public support or start to retire. They live in a neighbourhood where they have few Danish friends; they meet in the Club 2-3 times a week to talk and be together, and to learn for instance to write Arabic scripts and some Danish. They are eager to take part in activities, but they prefer the Arabic spoken environment. The Club has come to be a very important social point and exchange of knowledge of how to manage life in Denmark. For those who are not able to manage the Danish language, the club is particularly important. Another important function of the Club is to avoid loneliness, especially for those who no longer have their husbands, but also for the others who seem to benefit and enjoy the social activities in the women community. There are other social activities within the broader Moroccan community like funerals, religious parties, coming home from travels to Mecca etc. which are very important social events. Their identities are divided between being Danish and Moroccans, but they have no intentions of returning to Morocco. Their lives are today too integrated in Denmark.
References


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