

Executive Summary

Introduction

Methods

Results

Constraints and

Conclusions

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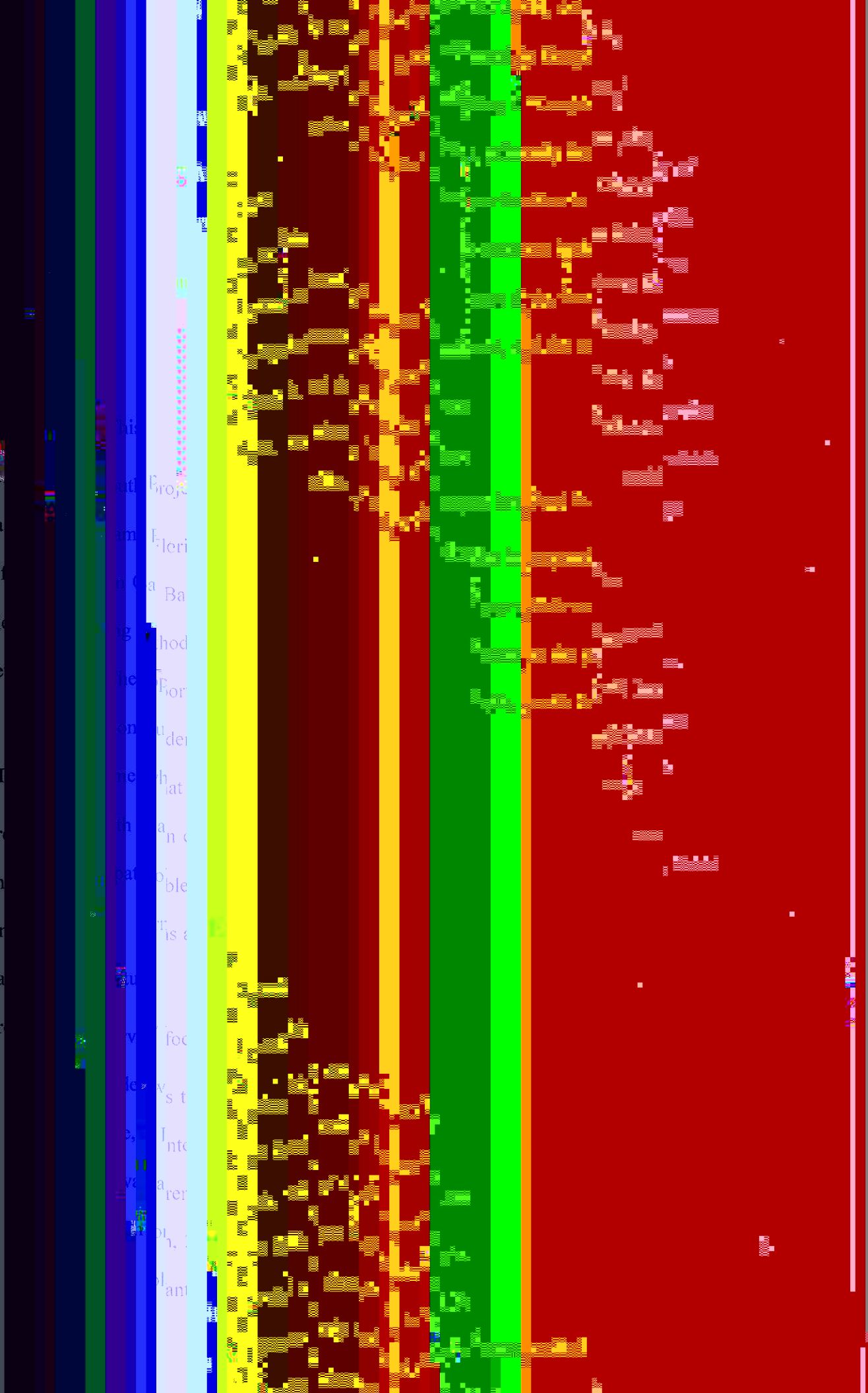
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3. Food and Recommendations

1. Food differences for the children between week- and week-
lunch food, in the form of school lunches consisting of
striking. is most of what is being eaten. Other, outside of
Con s food typ
Arne ng, American men dat s appear only as occasional breakfast foods. While the
day women es: The dif in how they viewed American food was their
Arne s, the over American nus was that Burmese foods should primarily be
the s e items--
Re adu Child rican item be taught to ake better food choic school.
trad differed on al
cons erall conse t
2. lthy sna calories: All Burmese have begun to American junk
com cluding he pattern of onsuming calories in form of liquids.
es es we seen should nk food sna ks consumed and mo althy snacks are
Junk yah, par he Kayah wo en in this sample, eat most junk food.
fo ation-ks, liquid n should foc on the impact of these choices--
espec As ries--o adopting te. c
eat e fewer ju ck
t ticularly th m
3. chronic i A mix of Bur ese and biomedical tr ents are used.
ally -Educatio us
ne ation--I of these Bur ese plant and foods b therapies would be
appro n body siz
Tre llnesses: A n
priate evaluation II

<p>3. Future i urmeser con Reco topi s.</p>	<p>es fo nity end</p>	<p>u The re fuge and how to go about doing so. Conduct trainings on these</p>	<p>items can be marketed outside the The re fugees are uns re of w ing so.</p>
<p>4. Health j culturatio Reco con sumption of hea h and body det ermined, as v mea s a day. Co and heights and</p>	<p>es: tter ence Its age as ct h ght</p>	<p>is little current chronic disease present are of concern: Record and analyze additional info and children, as well as focus group data on Switches to American high calori low n ity increases in overall consumption relate health screen ings for all adults, includ ing HI on adults and children.</p>	<p>this population, the dietary ay food children's ideas bout diet, ent foods/drinks need to be a change from two to three ic and fasting cholesterol, ation education programs to include: population which eat te 1/5 of suggested be noted that the traditional l to cultural aspects of adap ords such as calories, nutrition education n, etc. are not familiar to this population.</p>
<p>I. Cultural foc mixed d consum meal pat meal pat Approp fiber, irc</p>	<p>--T ion--C es fr n to n is s. ter calc</p>	<p>Culturally appropriate health and r e healthy plate approach is not us ful for on bowls. Additionally, diagrams which de airy products are not useful. It should als meals a day. Programs should be adap ms need to be used in nu n, etc. are not familiar to this population.</p>	<p>ation education programs to include: population which eat te 1/5 of suggested be noted that the traditional l to cultural aspects of adap ords such as calories, nutrition education n, etc. are not familiar to this population.</p>

3. An initiative should be on the question posed to us:

you

4. Tips: trying better when eating out, healthy snacks.

5. Information on high prestige healthy foods that are cons

Recommendation: Promote pride in Burmese food

Consider an annual festival with less emphasis on servin

Consider Burmese meals for the public--one day a mon

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democratize the appeal of Burmese food to Americans.

community.

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Recommendation: The garden should focus on those

health that are most expensive: vegetables, fruits (expand fr

and identity

for 'sweets' High quality proteins (such as fish, chicken, a

oda.

Recommendation: The population should be furth

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methods of preservation, such as freezing and canning. Th

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freezer when participants can store pickled food.

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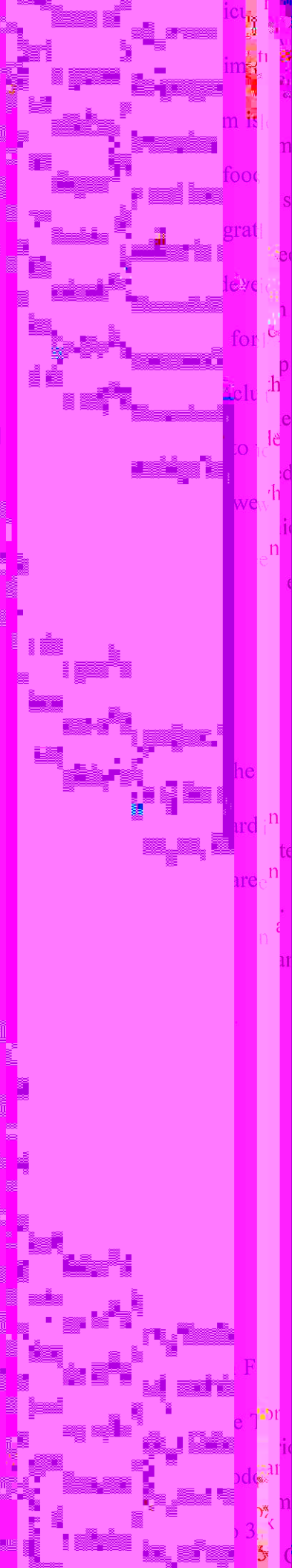
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Kayah. There were 6 components to the project: participant observation, 24-hour food diaries, 2 weekly food recalls, 3 health interviews, focus groups, and 2 days of garden plot interviews.

Data collection and analysis

Participant observation

Members of the team participated in the Garden Advisory Board meetings (the board is a member of the board), attended and interacted with the Garden House (the community) at the Burmese festival, a wedding party, a community meeting, and two focus group interviews. Particular attention was paid to the types of food and beverages chosen and consumed, as well as comments about diet and health.

Food recall

Respondents were from three different Burmese ethnicities: Kayah (n=3, 33%), Shan (n=2, 8%), and Karen (n=14, 58%). One adult household was interviewed; age range was 9-51 years. Eighty percent of households interviewed were female. The 24-hour food recall included time of meal, time of day, and with whom they ate, the types and quantities of food consumed, and the sources of food (see Appendix 1). Lastly, a checklist was provided to each interviewee to view foods which may have been forgotten (see Appendix 1).

The data from the 24-hour food recall were collected on Sunday mornings and recorded for food consumed on the previous Saturday. These Sunday food recalls were collected to record

the data on weekends and evenings; we also collected data on Burmese consumption. All coding was based on the number of Burmese meals, number of servings of healthy snacks and servings of unhealthy snacks. The location of consumption was also taken into account. Consumption was typical for the day recorded.

Weekly recalls

Similar to the 24-hour recalls, two participants were asked to keep records of what they ate over one week. One was a female Karen, the other was a male Burmese.

Health interview

We collected 24-hour recalls from three adults who had chronic health problems: diabetes, hypertension, and/or hyperlipidemia. In addition, we asked them about their health problems and how they treated them and connections they saw between the diet and their diet (see Appendix 3 for the guide).

Focus Groups

Two focus groups were conducted at a community center, one for men and one for women. Participants were asked about ideal behaviors, allocation of resources, eating habits, cooking traditions, and future plans for the Tarabai Gardens (Appendix 3). Interpreters translated; each focus group was conducted in a mix of English, Burmese, Karen and Kachin.

day that was most likely to represent the maximum. We checked. We stratified by age, gender, ethnic group, and meals, servings of liquid calories (soda, energy drinks). For the latter three categories, 70% of respondents felt their diet was typical for the day recorded.

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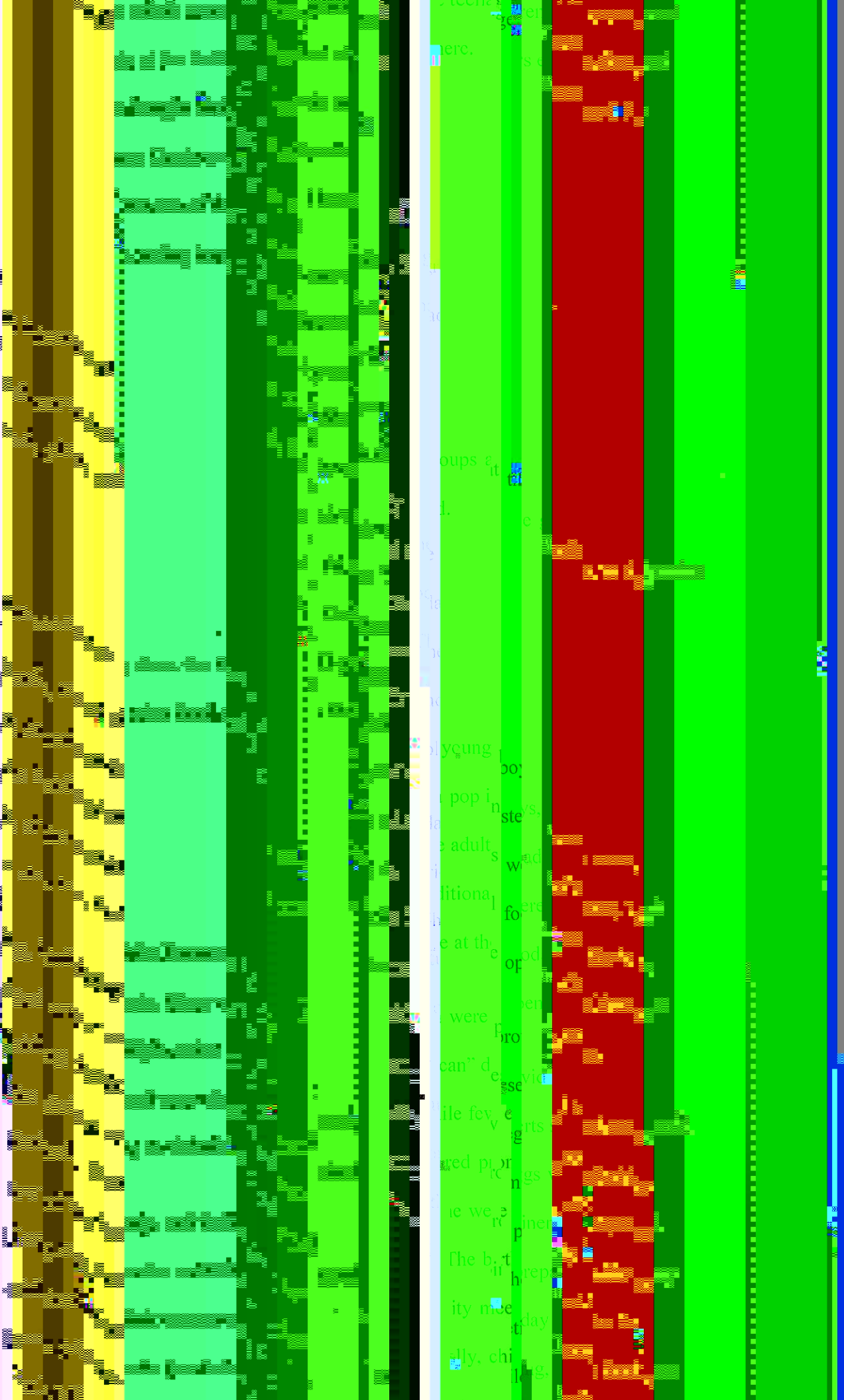
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Food Recalls and Weekly Food Consumption

American and Burmese meals

There were very few American meals eaten by the Burmese on Saturday. Almost everyone interviewed ate Burmese meals. This pattern is one of two meals a day, one mid-morning and one late afternoon (usually (not always) labeled breakfast and dinner. Of the four American meals eaten on Saturday breakfast was consumed in each of the meals. Three of the meals were categorized as breakfast (pancakes, a sandwich, bread and coffee, and bread with a slice of cheese), and were eaten at home. One of these meals (a sandwich: bread, chicken, cheese, tomatoes, ketchup, pepper, green onions) was categorized as "lunch" and was consumed at work (a sandwich shop). During the school week, the ratio between Burmese to American meals reverses. More American meals are consumed on the weekdays in the form of school breakfasts (free to all students and school lunches free or reduced rate to qualifying students based on household income). The teenagers interviewed during the week ate biscuits (3x), cheese pizza (2x), chicken sandwich (2x), a muffin (2x), pepperoni pizza, chicken with rice, buffalo chicken, yellow rice with chicken, strawberries, and peaches. In comparison, the Burmese meals consumed were: rice with eggs (2x), a papaya salad, rice with pork, rice with broccoli and chicken, rice with chicken and an egg, rice with chicken, rice with potatoes, rice with fish and shrimp, and strawberries.

Healthy/junk food snacks and liquid calories

In the Saturday food consumption, we found the most common healthy snack was grapes (6x). In frequency were oranges (4x), apples (2x), followed by avocados, ginger soup, bananas, and wheat bread (1x each). In the junk food snacks category, potato chips were consumed the

most (3x). Candy was the second highest junk food category (2x), while ramen noodles, crackers, cookies, and popsicles were all consumed once each. For liquid calories, Coca Cola was the most consumed (7x), followed by apple juice and orange juice (4x each). Coffee, Pepsi and milk were third (2x), and diet soda, fruit juice, and tea were the least consumed of all liquid calories (1x each). Comparing the three categories of food shows that liquid calories were the most consumed by this population. Healthy snacks were second and junk food snacks were third on the list. At least all of the junk food was consumed at home.

Forgotten foods

The most commonly forgotten foods were cereals, apple orange juice, soda (particularly Coca Cola) and fruits (particularly grapes). Forgotten foods were documented for 11 of the participants (Table 1).

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Forgotten Foods

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les	5x

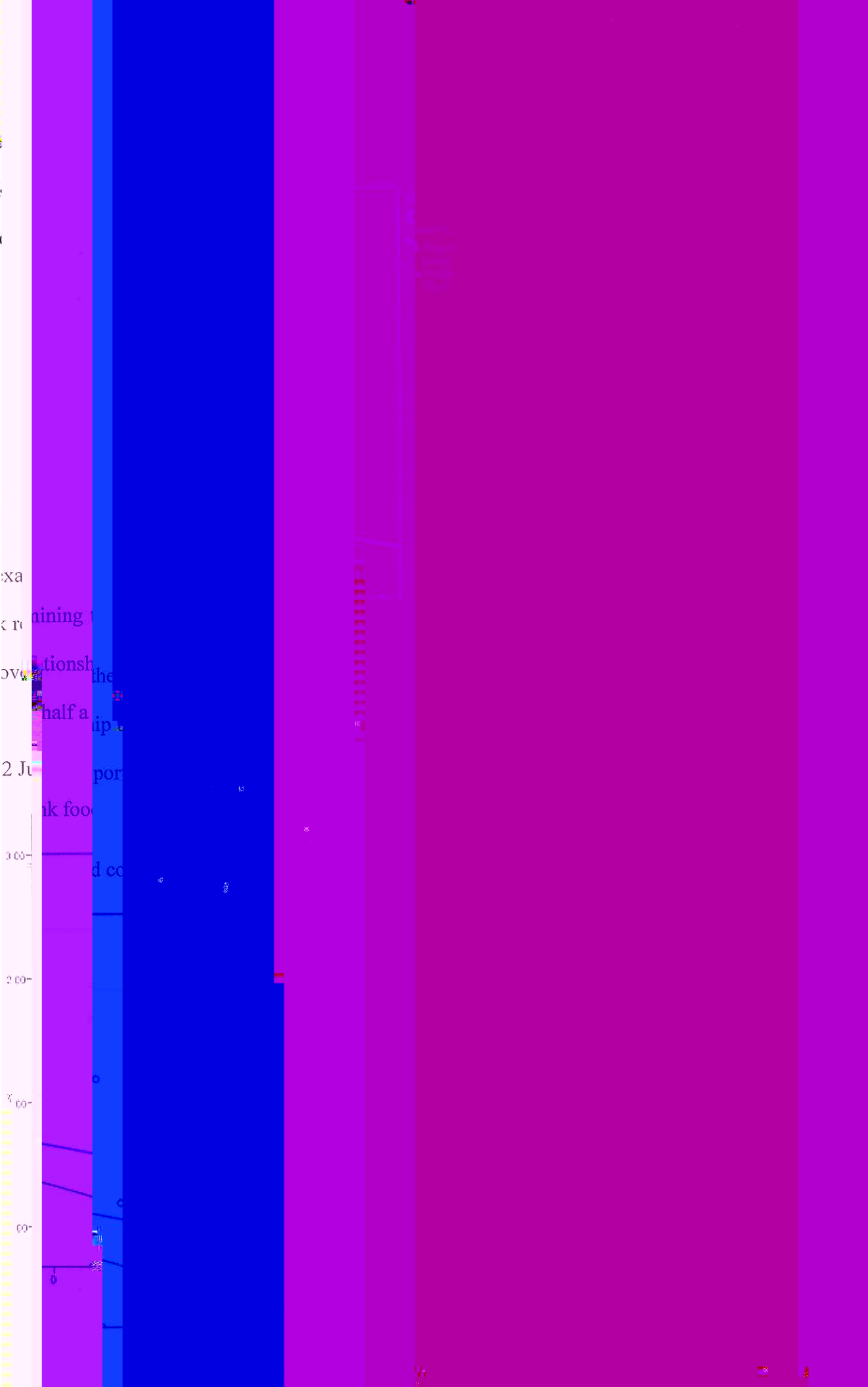
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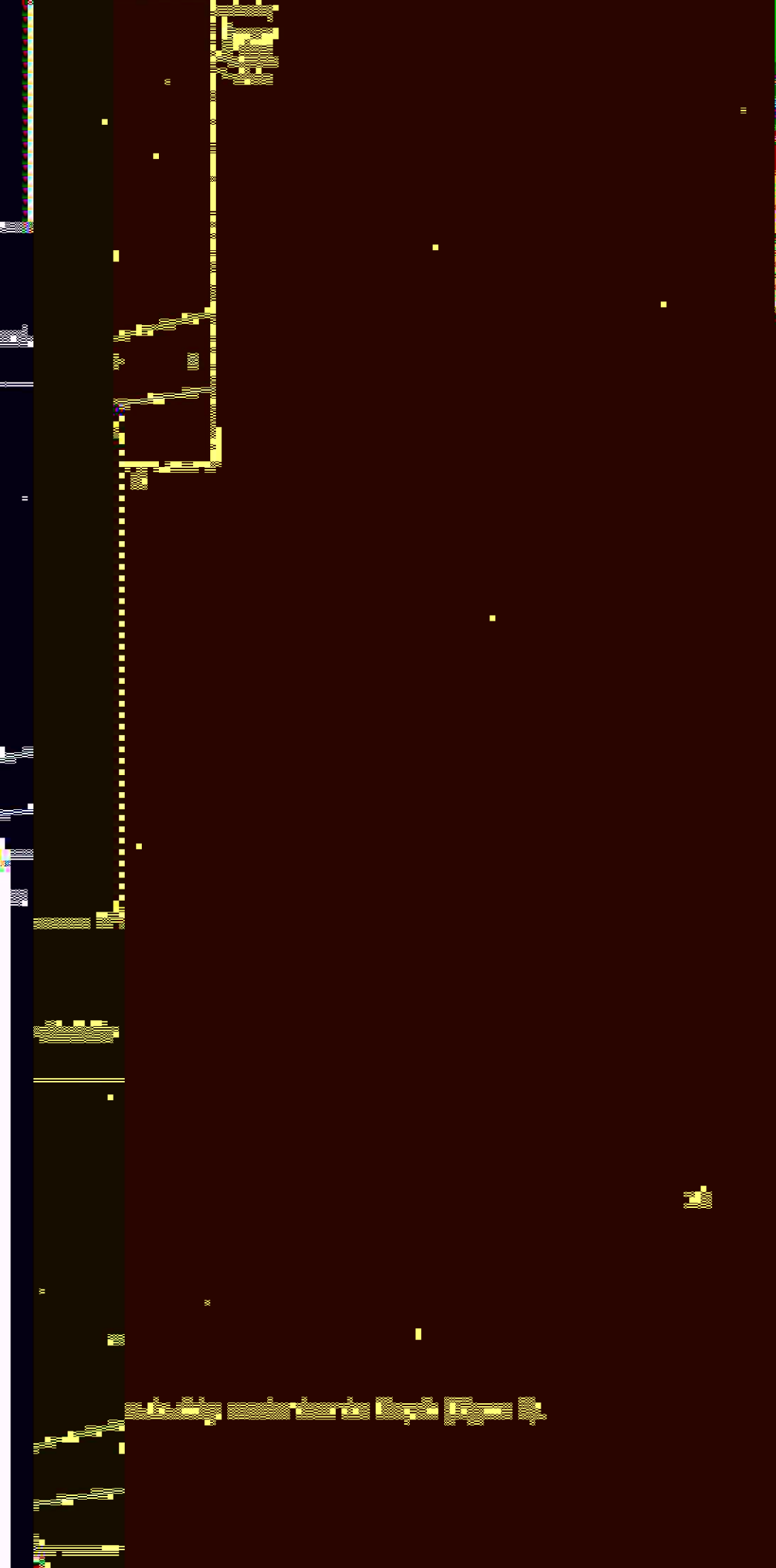
Fig.

Number of Junk Food Portions



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Fig. 3 Health

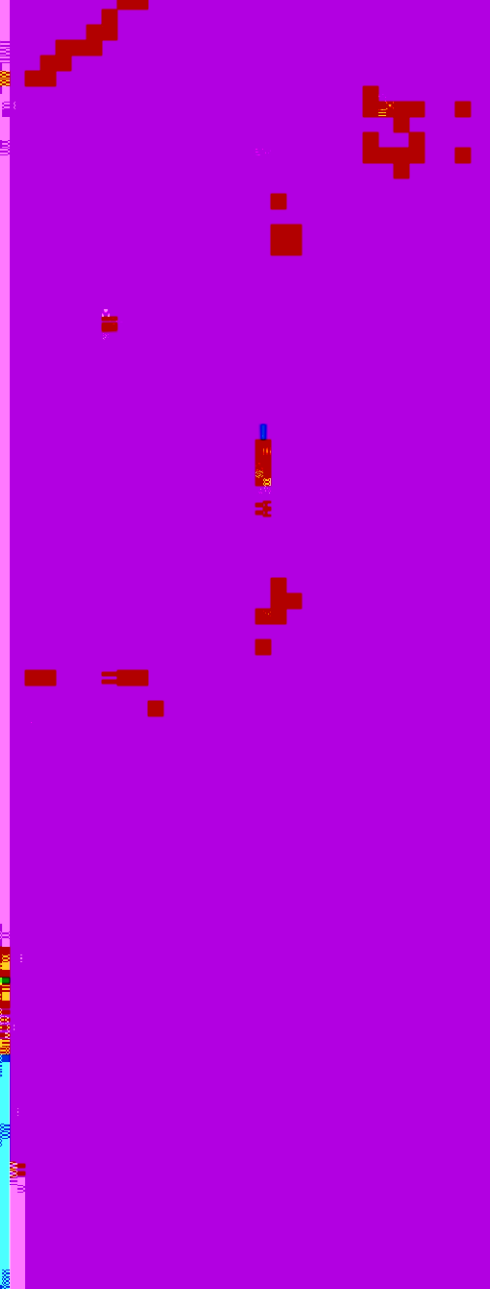
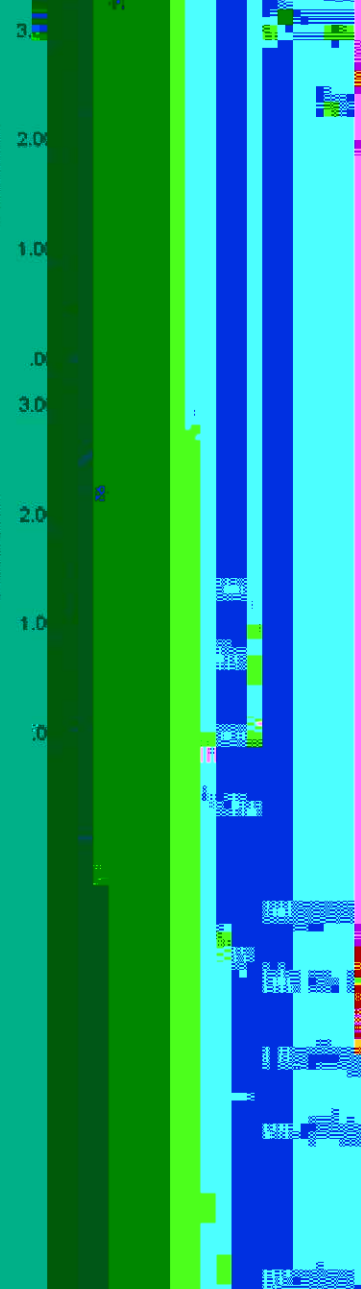


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Fig. 4

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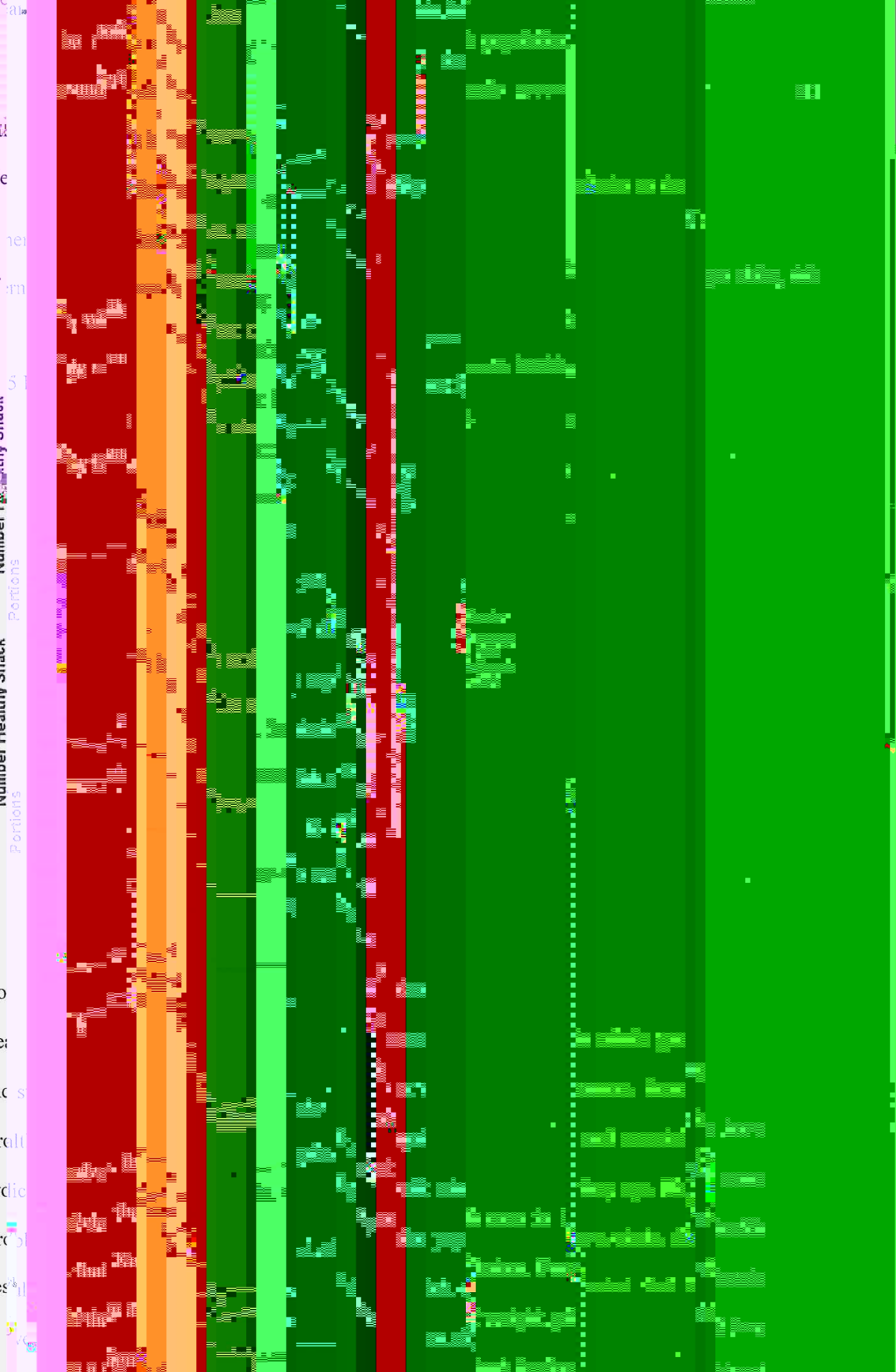
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Health Interviews

We interviewed three adults who were told had the health conditions of diabetes and/or hypertension. The first participant has both diabetes and hypertension (DH), the second has hypertension (H), and the third appears not to have hypertension, but a possible reflux disorder (R?).

Problem Identification and Symptoms

All three of the individuals said that they discovered their particular health problem(s) as a result of their migration to the United States. H was the first one to be told prior to traveling, DH and R? said they were told shortly after arriving in the U.S. DH considered his problem to be very serious. In contrast, H said she did not believe her problem was serious, although symptoms severity increased at times. R? reported feeling better since having surgery when she arrived in the U.S.; however, she is unable to eat spicy foods. DH said the doctor informed him that the problem was due to genetics. Both H and R? said that they were not sure of the cause of their health problems.

DH felt that his condition interferes with his eating habits, and that he must now watch the kinds of things he eats. His symptoms included: body aches, lightheadedness, joint pain, trouble staying asleep, frequently needing to use the restroom, tiring easily, palpitations, shortness of breath, and an increased appetite. For H, the problem is sometimes so severe she is unable to open her eyes, move, or even eat for 2-3 days. Her condition also gives her headaches, "burning eyes," and trouble with sleeping. R? focused on her stomach ailments.

Treatments

DH uses both turmeric and prescribed medications. He had as a child a good understanding of what foods he must monitor in order to maintain a healthy blood sugar level. But in his description of foods to avoid and special helpful foods he mentioned only foods related to blood sugar and diabetes (He did not focus on his Hypertension, with the exception of the medication he is prescribed by the doctor). For his diabetes, DH believes that rice soup, papaya (cooked with a broth of chicken bones and garlic) are a helpful treatment. In order to help regulate his blood sugar levels, DH makes a remedy consisting of papaya, moringa, and turmeric. DH also uses prescribed insulin injections, hypertension pills, cholesterol pills, and pain relief medication. He exercises lightly for five minutes five times a day so his health will improve. But he is careful not to over exert himself because otherwise he will get sick. Overall, DH believes that his home remedies are more effective than the prescribed medications.

He has high blood pressure. She did not avoid any foods, do exercise, or take prescribed or herbal medications. When she first came to the U.S. she took prescribed medications, but has since stopped. She eats what she referred to as "normal foods" including chicken, vegetables, and rice.

He avoids spicy foods and eats noodles, snacks (bread), or chicken pizza. She does not exercise because turmeric remedies. As a treatment, he takes her prescribed medications because she feels that they work best.

Food and Health

DH believes that his food choices affect his health; he felt that vegetables helped with his blood sugar levels. He also thought that what he ate would affect his diabetes and hypertension. If he

eats vegetables all week,
problems I also saw a connection
community eating in Burma
affects health, but did
R? claim that certain foods
cook in a pot among the
(about the time); how
it into a soup with rice.

wake up feeling well and with
between her diet and her health
(identified) was the cause of her
a relationship between food
affect her hypertension by making
patients. DE boils his food in
he also fries her food. R? fries

to feel better health
felt that a good
R? said that what she ate
health of her children.
nachart. Approaches to
kills it and boils her food
initially, and then makes

Hypertension and Diabetes Specific Questions

We were informed that a
consumption of specific
high intake of fruits and
diagnosed but continues
He eats 1-3 days a week
where participant R? eats
vegetables every day. DE
occasionally.

participants were diagnosed
a relation to their condition (fruits
vegetables). DE had completely
beef approximately once a month
and R? eats pork twice a week
consumes it once a year, and H
R? also include fruits in their diet

hypertension. We asked about
fish paste sauce) [both
part of his diet when he was
DE and R? did not eat beef at all.
DE eats fish paste 3 days a week,
DE consumes fish paste. All eat
while DE eats fruits

DE is the only participant
his diet affects his diabetes
usually 1-2 meals daily
hungry, or ate just
hungry. He does not
juice adds one teaspoon

diagnosed with diabetes. He was
said he only eats sweets (cookies
when asked if he thought he over
they have to, DE responded that
soda or "pre-made" juices, or
sugar.

question regarding how
sweets, etc. once a month. He
just enough to take the
just enough to take the
week. He squeezes lemon

Focus groups

The study included four focus groups in the male focus group and ten focus groups in the female focus group. Overall, the women and men lived in the United States, specifically the Tampa area, for 3.5 years. The men's focus group lived in the United States between two to four years.

When asked what a parent should do so his/her child can grow up strong and healthy, the men and women had different responses. The women's responses emphasized the importance of feeding for infants. When the children began school, they bring home foods based on what the schools provide and what they see the peers eating. This included pizza, hamburgers, and snacks (sweet, such as doughnuts). They were considered American and to be higher quality compared to their own traditional food. For example, one woman stated "American food will make you fat (fatter), Burmese food will keep you skinny." The men indicated that they preferred their children to not be too skinny, but they did not want them to be overweight. They felt that American food will help the children grow in physical status something they feel a Burmese diet cannot achieve. But, they were not sure why American food "make you overly fat," and they felt their children should be encouraged to eat fruits, vegetables, and rice. Although they did not recognize the relationship between health and food, women wanted their children to be "not too fat" not too skinny. They preferred a plump physique, associated with being well-fed. Given that some of the Burmese women demonstrated degrees of obesity and a very thin, it is understandable that the Burmese women want their children to be "fatter."

In addition, the men presented a more reserved perspective about the addition of American food to their children's diets, specifically expressing a taste for sweet foods like sodas and candies. The women emphasized fruits and vegetables. For example, one male participant stated, "I don't want my kid

to eat chocolate rice. The sweet, the is not good for health." The men
 wanted the children to be traditional. This is like fish sauce rice. bamboo shoots.
 For the young women, a vocal feed in babies formula. the fathers
 favored the more homemade Burmese dri co-water and hot
 Definitely, we are going to have more merit. I diet, the women do not want their
 children to be American. I expressed foods such as fat, fat, and cheeses. emphasized
 children to eat more. fattening, exciting. don't believe us, for three
 months." The women expressed the sentiment that children would drop weight. well,
 expressing their fear that children would drop weight. It was continuously highlighted by
 both focus groups that it was the good most diet to restrict from diet. The adults
 tended to have a negative view of it for a diet restriction. portion of their diet eating it. Both
 the male and female focus groups agreed that American foods because use a person to
 become a diet. The diet it was about American diet that caused weight the Burmese
 focused on diet. diet, healthy and attractive food. diet.
 The men had a different perspective on what causes people to become fat. For example, one
 participant explained that people are skinny because we eat the same food, but I eat
 skin, I eat more. Another participant said, "I eat fish paste and get fat and other
 people eat it and don't get fat. My wife and I eat the same thing and I get fat and she doesn't!
 Genetics! They said, "milk, cheese, cake, and fat make you fat." answer to the
 question was that genetics would make you fat. participant responded, "Zoe said, look at the African
 American. Why do they get fat? Does Burmese food make you fat?" they replied, "No, only I in
 10 Burmese are skinny. I don't get fat."

The final focus group activity was a free discussion about American foods to the young generations, pointing out that sweet and salty are very appealing to children, but children should be eating a variety of foods. One man noted that his two-year-old liked peanut butter, although he did not like other foods. I also wanted to see the children drink orange juice and eat an Americanized diet. The men could not find a rice-based food, only indicating a rice-less hamburger as an American food. "I eat a hamburger with lettuce and ketchup. To avoid work I buy a lunch box with vegetables." One man stated that he ate rice a day, so he felt it was very important to eat a basic Burmese diet which includes rice, fish, and vegetables. They said they would use rice in rural areas where rice could not be grown. In the urban areas, they were used to eating a variety of fruits and vegetables. The men also mentioned that they would like to see more research on the health benefits of different foods.

Participants in the focus group were asked what they would do if they had more money to spend. Men said they would spend money on clothes, furniture, and a house. In contrast, women spoke of food, specifically, pork, fish, and chicken. They also said that they would save money for the future. Both men and women said they would save money for their children's education. One woman said that she would save money for the uncertain economic future of this population.

Men and women agreed that they would spend more money on food, they would purchase additional Burmese foods such as meats, fruits, and vegetables, all foods that they considered to be delicious. The women noted flavorings, such as fish sauce, chili

paste, and although it is not the right kind of fish paste. Despite the fact that it is available in local markets, the women have been unable to buy it because they dislike the available varieties of fish paste. They resort to altering the sugar and salt content. They also use a key Burmese flavoring to satisfy their desire for fish paste. The women noted that available fish paste is still not quite right. We also saw that they would use money to purchase a larger variety of items, such as

When asked what they would purchase if they had less money, the women agreed that they would find ways to have money by purchasing items that were less expensive. They would have to buy fish, but if they had limited funds, they would agree that they would settle for chicken instead. In such circumstances, their goal would be to purchase less expensive food items rather than give up specific foods. Women focused on determining which items would provide the most food for their families. In contrast, men focused on what they could not live without: rice, fish, and salt. Men but they specifically noted that they would not give up

The Burmese refugees would never forgo rice in any situation. If they had a limited income, they preferred to reduce their intake of rice; if they had more money, they would incorporate more rice and vegetables into their rice-based diets. The women said that they would die without rice. When asked why rice is the main dish of all meals in Burma, a woman likened it to bread in America. As she said, rice is consumed in Burma in two forms: as a staple and as a side dish. She said that rice is the only thing you can eat properly and feel full and in contrast

they do not eat American snacks frequently.

Additionally, the Burmese identified chilies and bananas as important to the Burmese. Snacks are not a large part of Burmese culinary culture, but during their time in the Thai refugee camps, they enjoyed the Thai snacks provided. These snacks, however, are not comparable to the sweet and salty snacks here in America which tend not to fit their diet and are not a substitute for the staple rice. Burmese adults considered American snacks a children's food, that neither men nor the women were interested in eating regularly.

When asked if they had explored making new foods outside of traditional fare, the general interpretation of the term "new foods" was associated with American staples such as hamburgers. One woman said that she makes turkey sandwiches while another makes hot dogs with bread because her family enjoys eating them. The women were interested in learning to make American foods they enjoyed, if they could identify those foods. It seems that they do not know where to start. "We can't cook what our parents taught us," one man reported that his wife had tried to make French toast; another tried to recreate stir fried restaurant recipes. There seemed to be a general lack of enthusiasm for experimenting with making new foods at home. When the focus group discussed making new foods, participants indicated that not everyone in the home enjoyed the conditions, and most preferred traditional food. Women are the primary cooks in the households participating in this research, and the men seemed willing to try new foods if their wives wanted to cook them. However, their wives typically only cooked traditional Burmese food. One man commented that, "I am the only one who likes to eat new things, my family doesn't like it." Other participants in the male focus groups agreed with this sentiment. The men also said they were particularly interested in trying an American buffet restaurant.

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 Pl C a p e a r a r e a s i t s e x. l f l e s s i n c e i a m a n ' s d e s i r a b i l i t y
 P e r t y i s g i v e o b e c e r e d b o t h s o n e v a i d, "I w a s s k i n n y w h e n I
 s e s a l l e n a r r i e d i n t e m a n t

married. My husband and I had a bigger of time and I still likes it. The men felt that a would not want a man that looked or drank to get into alcohol. He said, "The men were a hardworking man with muscles, but who is considered to have a traditional feature marriage material. He said, "He was not. His savings even though it is a man's expression personally and we still think it is the most important results for attraction. I think these women still believe physical appearance is important and with the men, a woman felt that Burmese women would have very long hair to be a mate, pre-a woman to her and Men also agreed that a woman who looked like a great woman. I think a woman can be thin or too order to attract a mate.

In the future, the Burmese participants in this project need to continue to participate on the T Bay Gardens including the vegetable for both personal and commercial use. For their own consumption, the women would like to grow cauliflower, papaya, tomatoes, egg, broccoli, this variety of vegetables, cauliflower, and kale. They also like to grow pumpkins, chickpeas, eggs, and fish. Foods that are not accepted in their culture include tomatoes, cucumbers, which are not eaten, and fish. The women were concerned that the most important item to be grown would be for Burmese use. One woman noted that a man would not eat Burmese food with hot peppers because it would be too spicy for them. The women also said that Burmese food is not their food for their own use and not for other than Burmese. They would like to grow them." The participants received food for their garden. Most of the participants received all the food efforts in the garden to produce.

The men focused on growing green beans (long beans), onions, cauliflower, and eggplant. The women focused on growing green beans (long beans), onions, cauliflower, bok choy, and eggplant. The men also grew green beans (long beans), onions, cauliflower, bok choy, and eggplant. The women also grew green beans (long beans), onions, cauliflower, bok choy, and eggplant.

cucumbers, lettuce, arugula, leafy greens were the most common market products among other Burmese families. Rice, however, is an important food for Burmese and is challenging to grow outside of Myanmar. In addition, if this, they have a potential market for it both within the Burmese community as well as the highest Burmese community at large. They also have leafy greens with tonics, which are exciting products with cold and spicy flavors. They also often raise piglets, goats, and chickens. The need to balance stock and garden space is a challenge. The participants also mentioned good but not great soil. At the conclusion of each focus group, the participants were asked if they had any questions. The women wanted to know what the American participants had to make. The women had questions concerning how to approach marketing and producing in a garden.

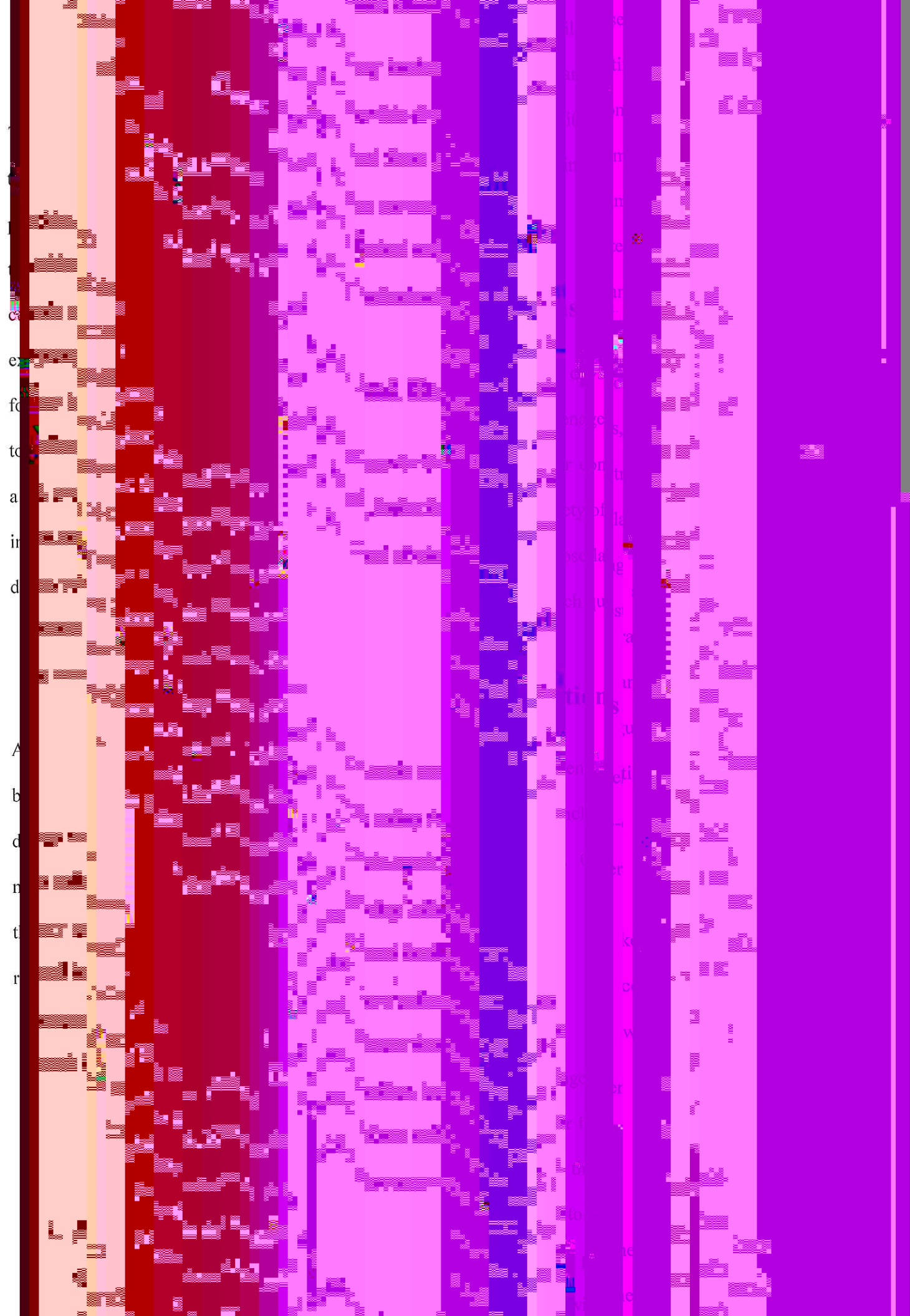
Garden Plant Interviews

Medicinal plants and food plants are often grown together as many Burmese gardeners have different uses. Most of the medicinal plants described by the American participants were used to treat a few specific illnesses such as high blood pressure, cholesterol, and asthma. For example, one participant described how one person has to eat much of the plant to cure specific plants will take care of the condition. The Burmese participants described the medicinal plants and their uses. There are no major differences between the Burmese and American medicinal plants, and families use these plants for both medicinal and culinary purposes. Some medicinal plants are also used as pesticides. Of the medicinal plants in the garden, the Burmese participants mentioned 13 are vegetables and 13 are fruits. The Burmese participants mentioned 13 medicinal plants and 13 medicinal plants. The Burmese participants mentioned 13 medicinal plants and 13 medicinal plants.

Summary

Presently there is a considerable concern among the Burmese community about body size. They live in a low-density housing complex and many of their African American neighbors are of a different height. In addition, some of the Burmese children are becoming overweight; one mother showed a photograph of her daughter in a refugee camp. The mother noted that the girl had been thin when she was in the camp, but when she was in the United States, she was overweight. For the Burmese, ideal body images favor a slightly "circular" or "plump" appearance and "regular" size. Adult Burmese men and women have clearly established a preference for a diet that includes a combination of traditional Burmese and American food. At the same time, a certain amount of weight gain is considered desirable by the women, particularly for those children who they consider short and thin. Many of the Burmese, notably the women who spent significant time in the refugee camps of Thailand, are significantly overweight due to growth from insufficient nutrition. Now, living in America, it is not surprising that they partially embrace the fattening effects of American food to achieve a body size that is considered ideal.

Exposure to American food and culture, however, has led to a shift in prestige food. While traditional Burmese food is preferred by adults, American food tends to be viewed by them as having higher prestige value. The American foods they identify as prestigious, such as hamburgers and soda, are, within the context of American culture, in fact considered relatively low prestige due to their accessibility and low cost. To the Burmese, this food is associated with American culture, and they are desired for its ability to make them feel included in the community.



the school setting, American
adult men and women of the
traditional diets, the overall
consumed at home.

Recommendation--

2. Junk food, healthy snack
food snacks, including
As age increases we see
eaten. The Kayah, particularly

Recommendation--

especially liquid calories--

3. Treatment of chronic illnesses

Recommendation--

appropriate.

4. Food and health: Other

a clear relationship between

Recommendation--

relationship between food and

items appear only as occasional
on how they valued American
consensus was that Burmese

men should be taught to manage
calories:
ed and
liquid calories: All Burmese
the pattern of consuming
junk food snacks consumed
the Kayah women in this
tion should focus on the im-

size.
and food
A mix of Burmese and
on of these Burmese plants

s, for
a clear relationship between
those with chronic illnesses
food and health.

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5. Bo ige The Burmese or too thir. Many a shor, and
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 candy, or y about potentia lran gain weights
 concerned about c
 □ re me endation--Stre disease, such as d al thy Americ in foo hat v ll not mak
 (too) fat. ra e consumption note consum tion c fruit
ss the consumption
of soda and sweet
 6. Ec av id: Adults note e fattening, particula y che e.
 □ ou me endation--Mos foods they consid ctose intolera t, so n ritior
education l b based around tl ions to chees
t of this populatio
is fact and the
 7. H ld needs: More, rst on the list of wha woul be
 do h additional house -income populatio ith many
 ur ec s. o different food
 acid funds. This is
 □ re me endation--Pro to have more ey for n for househol
needs. note the garden
note the garden
 8. Gr xp nditures for fo ld be spent on foods ad ditional to the
 Burm et more meat anc
 □ re me endation--The more vegetables. these
garden should

items.

9. Rice: Rice is the basis of the diet.

□ Recommendation--Do not discourage rice

consumption.

10. American food/snacks: These are not considered filling by the adults, nor appropriate for regular consumption.

□ Recommendation--Teach some spicy rice based dishes (ex. Cajun foods) that may be more palatable alternatives for Burmese adults.

11. New foods: there was an interest in trying new foods.

□ Recommendation--Foods that the Burmese are interested in eating should be identified, and healthy and appropriate ways of cooking these should be demonstrated.

12. Prestige: A number of American foods have come to represent high prestige-soda, pizza, and hamburgers.

□ Recommendation--Introduce the Burmese to other healthy American status foods, such as fish, smoothies, etc. Stress the prestige value of the organic food grown in the garden.

13. Future issues for the garden: The refugees are unsure of what items can be marketed outside the

Burmenese community and how to go about programs being so.

Recommendation -- Conduct training on these topics.

14. Health issues: While there is little data on chronic disease in this population, the prevalence of certain patterns of consumption are of concern.

Recommendation -- Record and analyze additional information on weekday consumption of adults and children, as well as focus group data on children's views about health and body image. Switches to American high calorie, low nutrient foods. Determine, as well as why increases in overconsumption related to a change in meals a day.

Conduct health screenings for all adults, including HbA1c and fasting cholesterol, and and weight screening for adults and children.

Recommendation -- Culturally appropriate health and nutrition education programs to increase...

1. Cultural focus: The healthy plate approach is not useful for a population which consumes dishes from many bowls. Additional diagrams which devote 1/5 of consumption to dairy products are useful. It should also be noted that the traditional meal pattern is meals a day. Programs should be adapted to cultural aspects of meal patterns.

2. Appropriate terms should be used in nutrition education - Words such as calories, iron, calcium, etc. are not familiar to this population.

- 3. An initial focus should be on the question posed by you fat? us: why does fat focus
- 4. Tips for eating better when eating out, healthy meals. ks.
- 5. Information on high protein healthy foods that are consumed by "the masses."

□ Recommendation-- promote pride in Burmese food and identity

- 1. Continue the annual festival--less emphasis on serving soda.

- 2. Consider Burmese meals for the public--one month, using guidelines, and raise the demonstrate the appeal of Burmese food to American community.

□ Recommendation-- the garden should focus on those foods necessary for health that are the most expensive: vegetables, fruits (and fruit products for "sweets"), and high quality proteins (such as fish, chicken, and eggs).

□ Recommendation-- the population should further introduce methods of food preservation, such as freezing and canning. The garden freezer where participants can store u-picked food.

Day _____
 → was this a normal day?
 Y N

Age _____

→ why?

Question 3--With whom did you eat
 1 Alone
 2 With _____

Key
 Question 2--Name of meal
 1 Breakfast
 2 Dinner

II. Dinner
 1 Juice
 6 Other

Household Supply		
Eaten here	Eaten out	Mr. Unknown

Q1 Time Q2 Name of meal Q3 With whom Q4 Food/Drink Amount

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Hypertension specific questions

- How often do you eat beef or pork?
 Every day
 4 - 6 days a week
 1 - 3 days a week
 Never

- How often do you eat fish products/fish sauce?
 Every day
 4 - 6 days a week
 1 - 3 days a week
 Never

-How often do you eat fruits and vegetables?
 Every day
 4 - 6 days a week
 1 - 3 days a week
 Never

Diabetes specific questions

- How often do you eat sweets (cookies, cakes, etc.)
 Every day
 4 - 6 days a week
 1 - 3 days a week
 Never

-How many times a day do you eat?
 3 or more times a day
 1 - 2 times a day

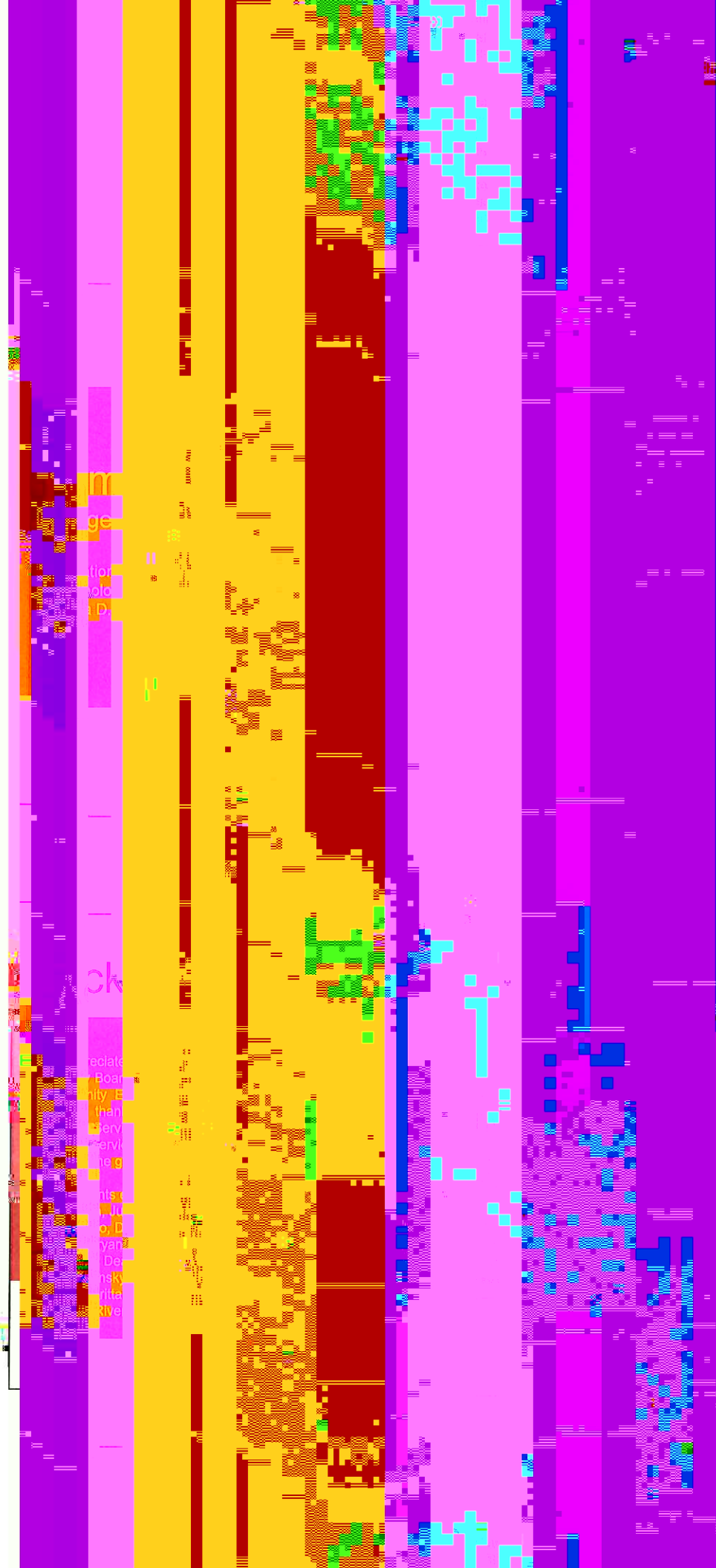
-Do you think you:
 overeat
 eat just enough like a normal person
 eat just because I have no other choice.

-How often do you consume soft drinks or juices?
 Every day
 4 - 6 days a week
 1 - 3 days a week
 Never

Appendix

1	Group	Group	In Ta	a?	
2	have y	d a m	her/h	children gr	up strong and healthy?
3	y	ily ha	woul	ou spend	r?
4	y	going	ey on	od, what v	uld you buy?
5	y	going	v on f	l, what w	d you buy?
6	h	woul	e of?	ss of?	
7	h	s woul	ren to	t more of	Less of?
8	h	ch pec	?		
9	h	s make	ls ma	children fi	Why does American food make you
10	W	ne chi	ood?		
11	H	Burme	men	ook?	
12	E	Burme	men	ook?	
13	V	you e	ork?		
14	Is	rtant t	ow o	do you e	rice?
15	W	er foo	at? V	?	
16	V	s the	e?		
17	D	r wife	food	Which?	ay?
18	A	other	d like	ur wife to	arn how to cook? Which? Why?
19	If	d a sp	what	uld you s	e them? Why?
20	If	d a sp	wha	ould you	ve for them? Why?
21	W	most	den	row for u	-Vegetables? Fruits? Eggs? Fish?
22	ci	?			
23	W	uld th			

Appendix 4 Plants in the Garden—Spring : 014



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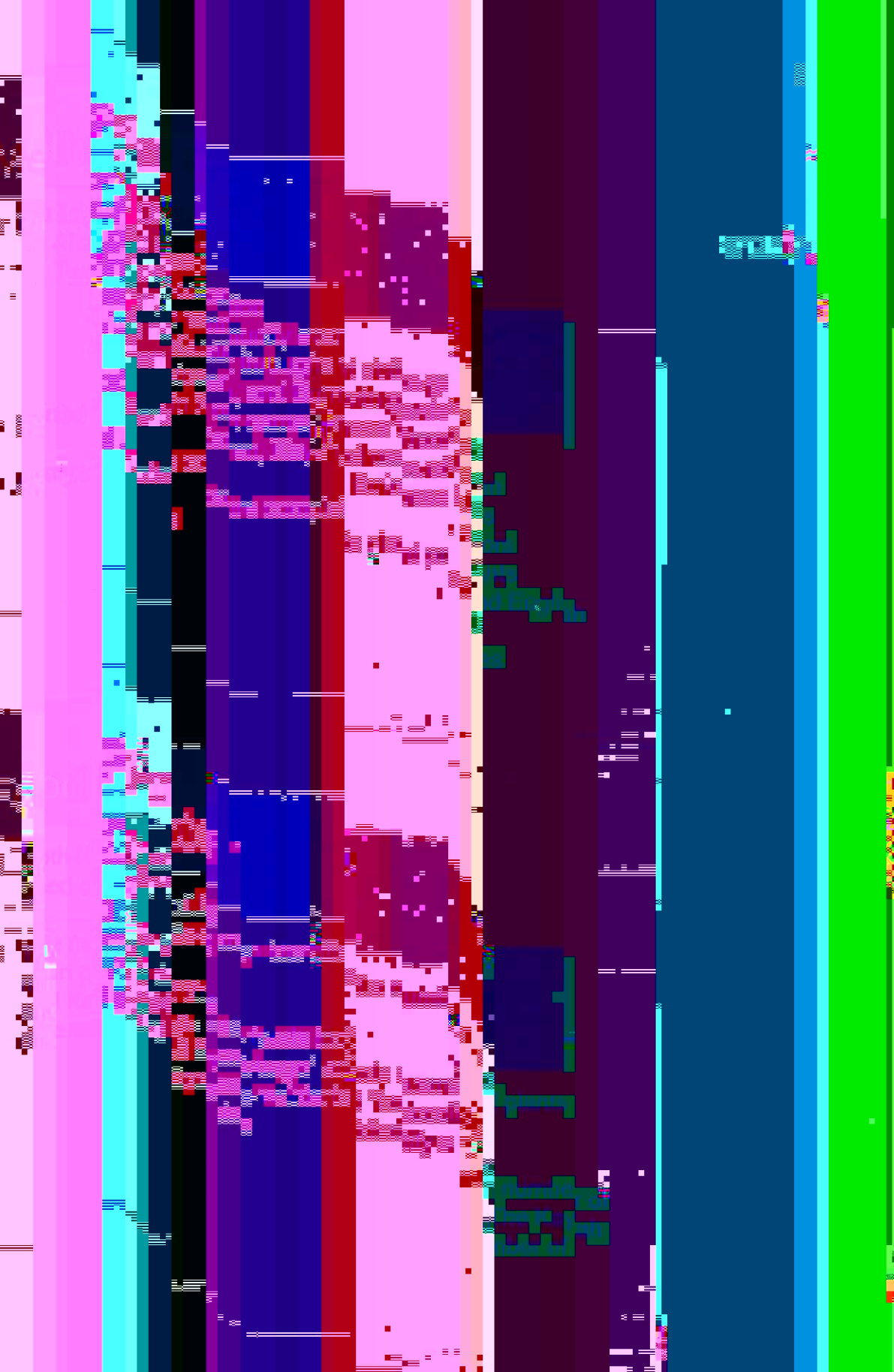
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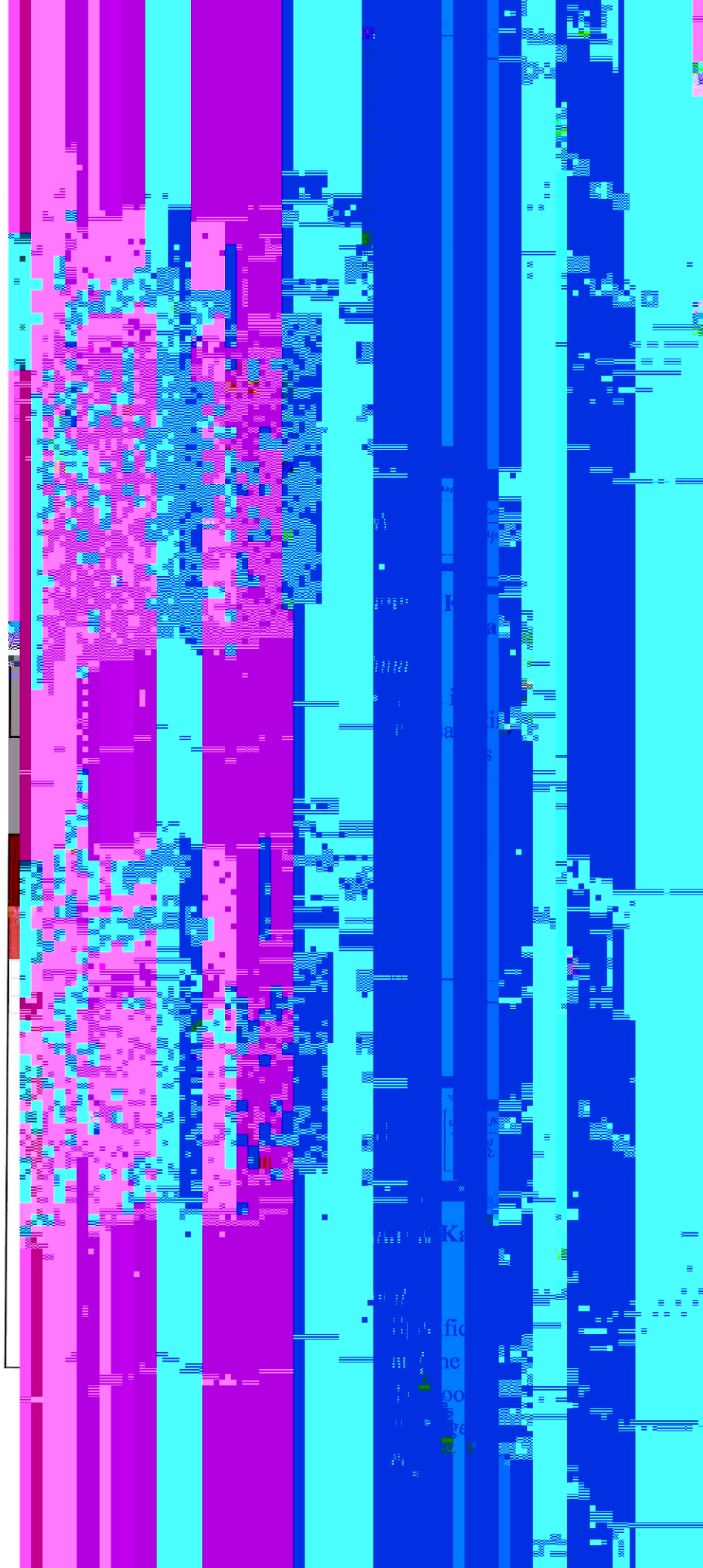
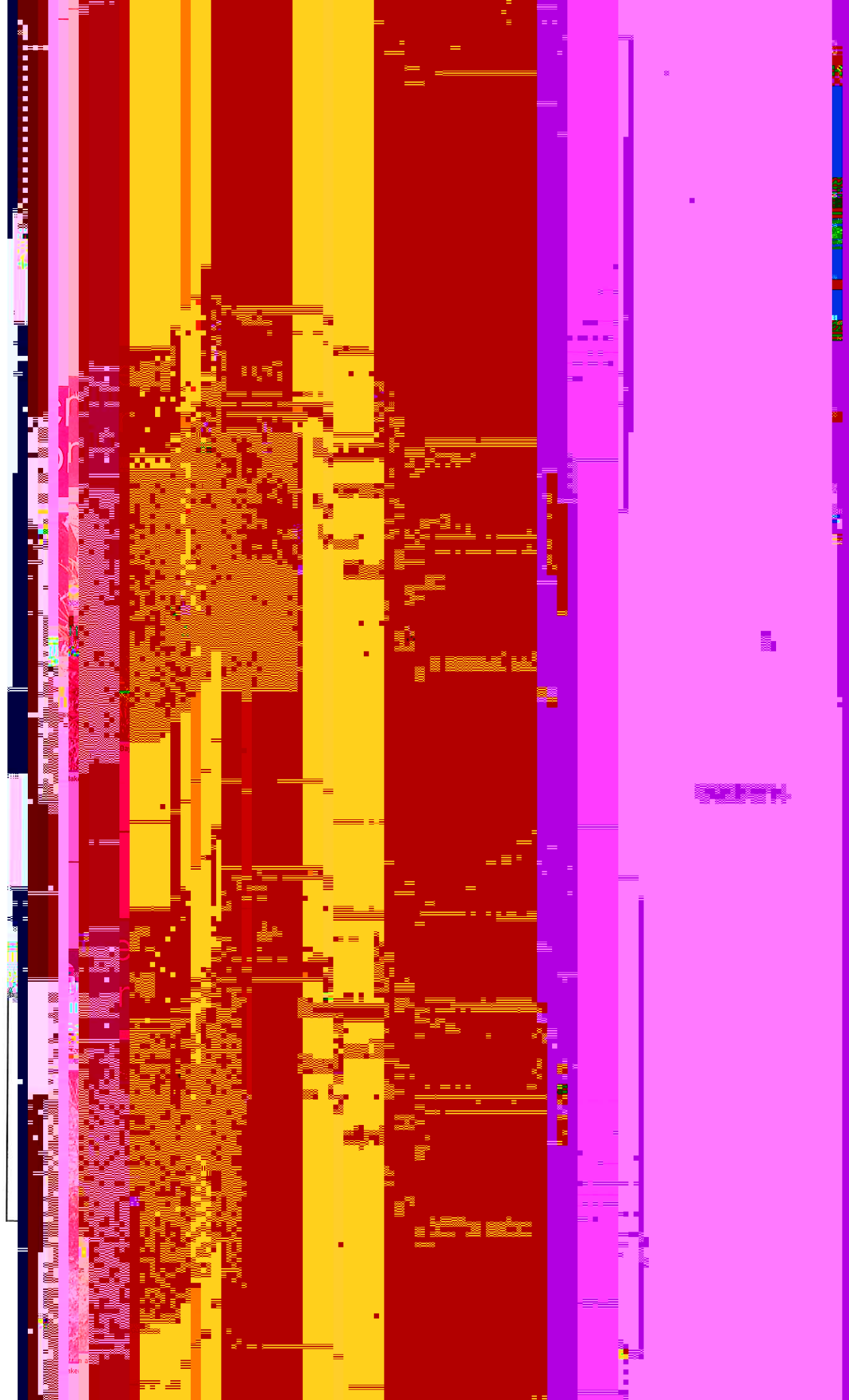
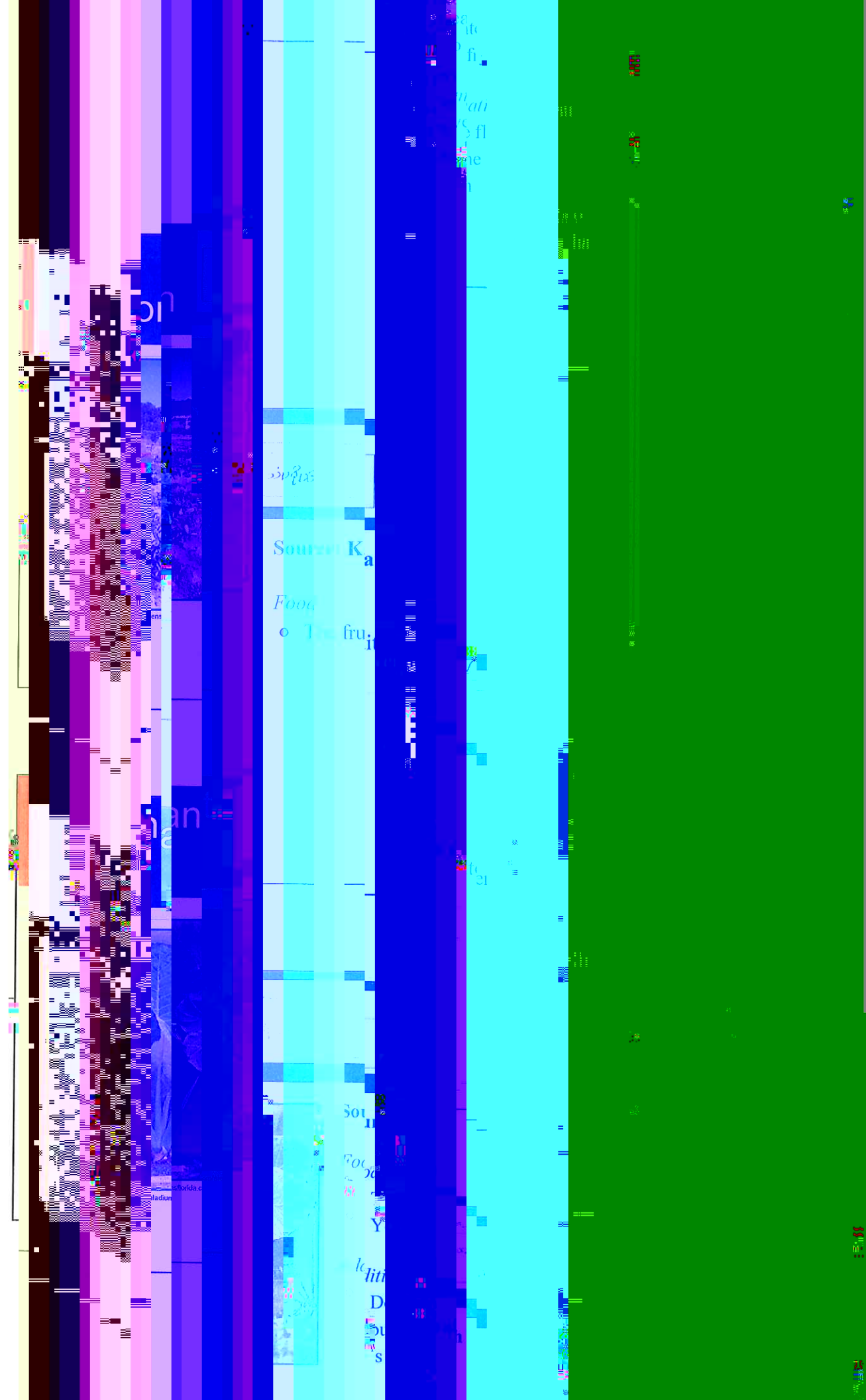


Figure 1

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Figure 1
The figure shows a cross-section of a mechanical part, likely a shaft or a similar component. The drawing is oriented vertically on the page. It features a central vertical axis with various layers and components, including a thick blue layer at the top, a yellow layer, a green layer, and a red layer. The drawing is highly detailed, showing internal structures and external features. The overall appearance is that of a technical drawing or schematic diagram, possibly a cross-section of a mechanical part. The drawing is oriented vertically on the page.





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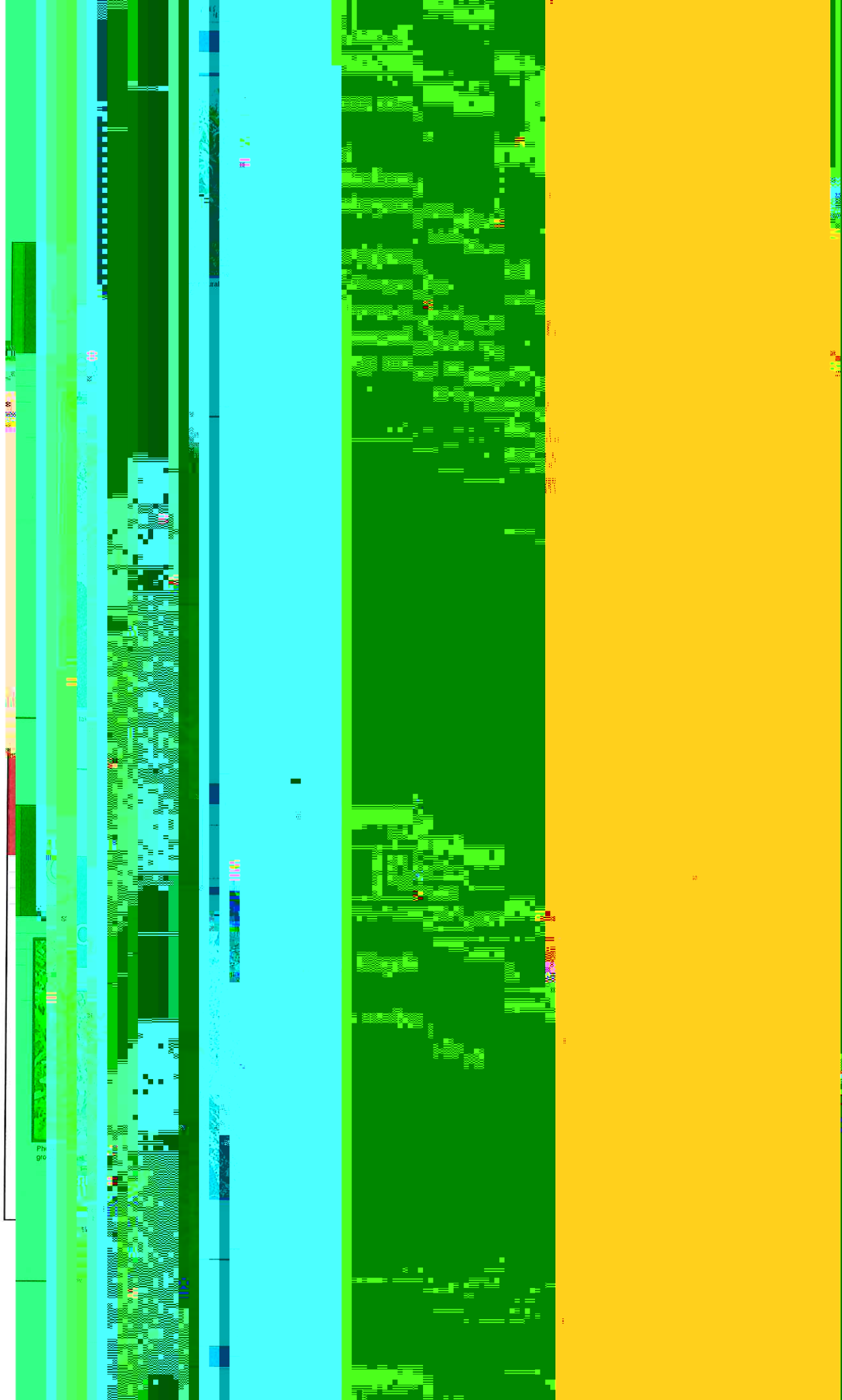
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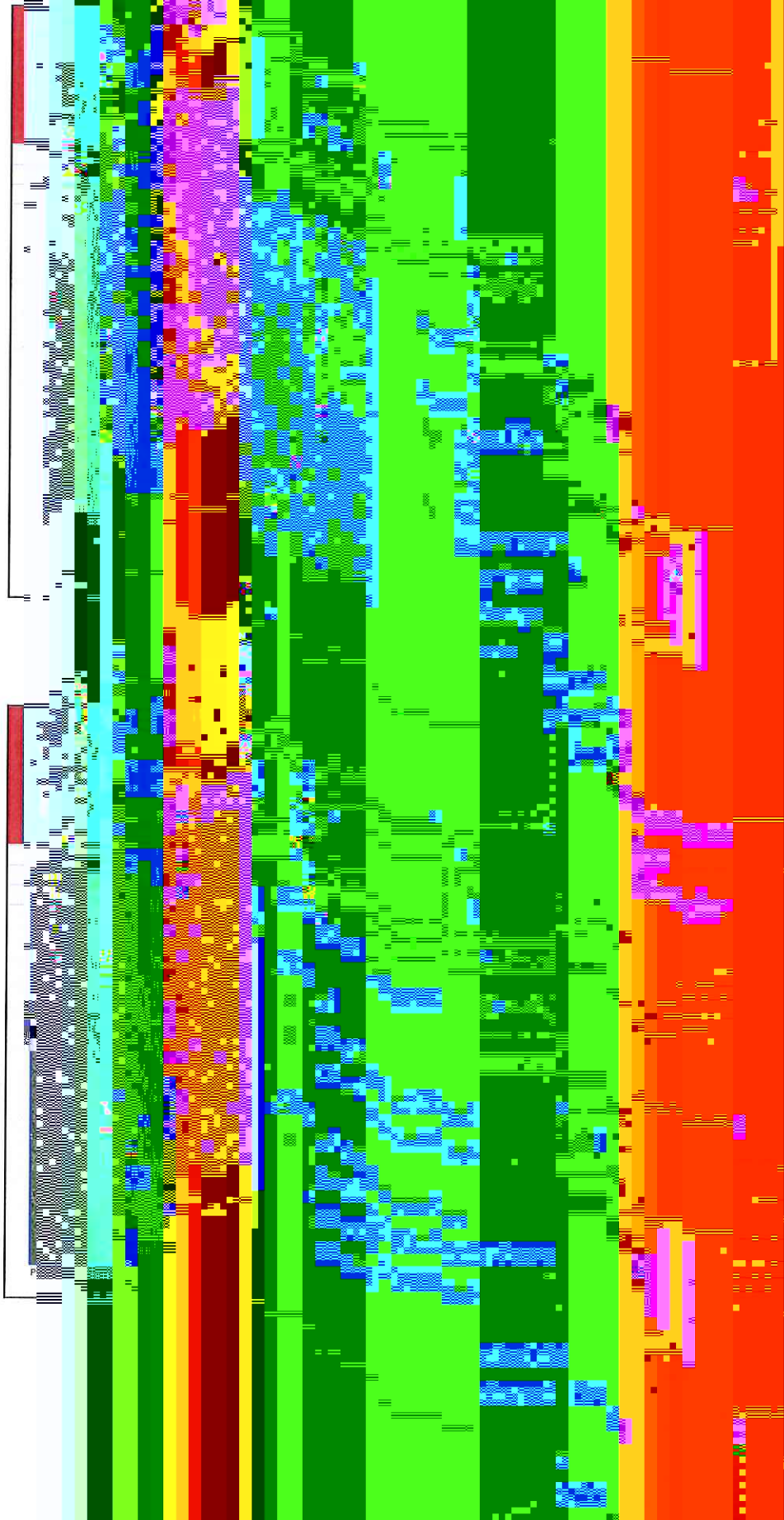
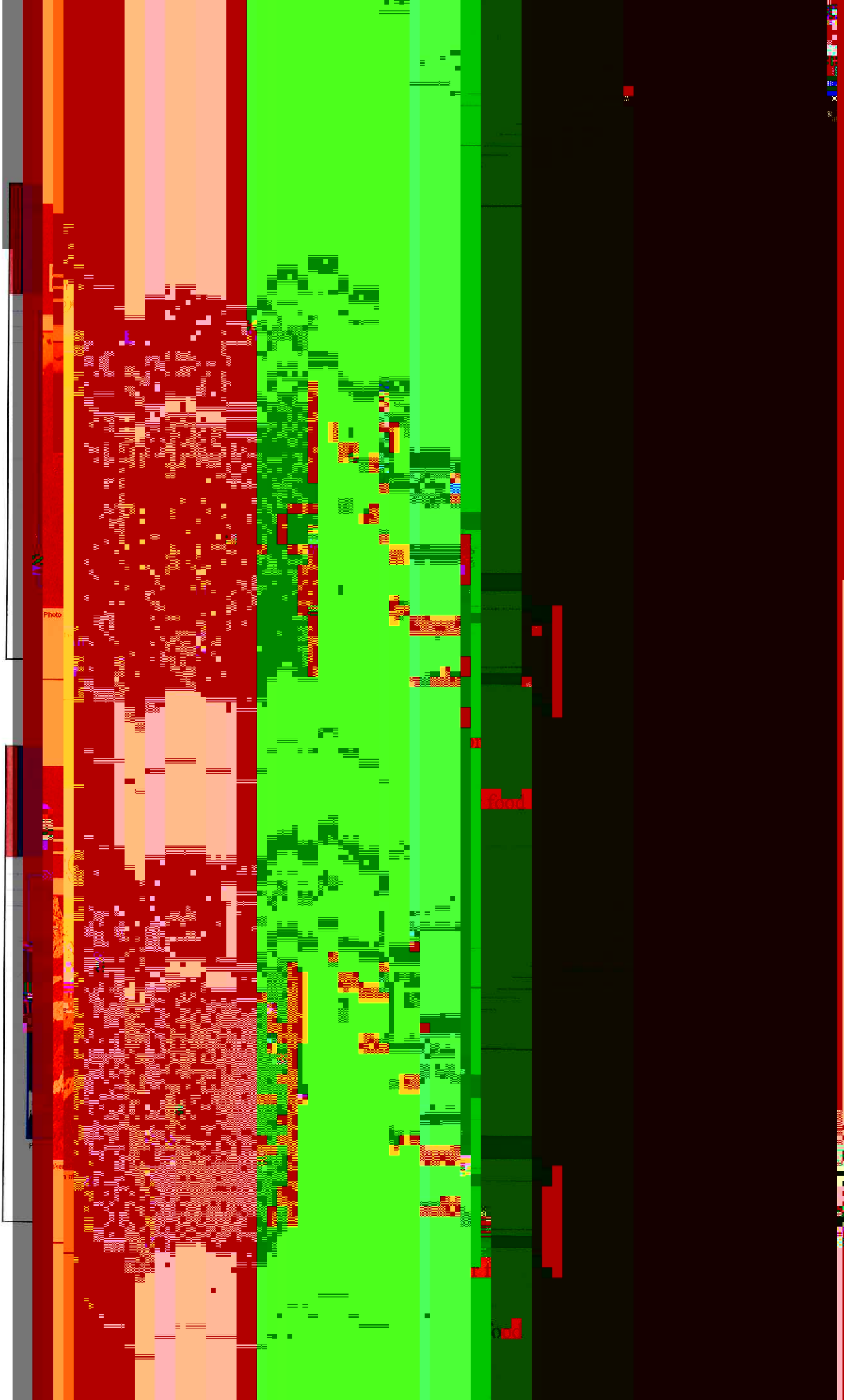
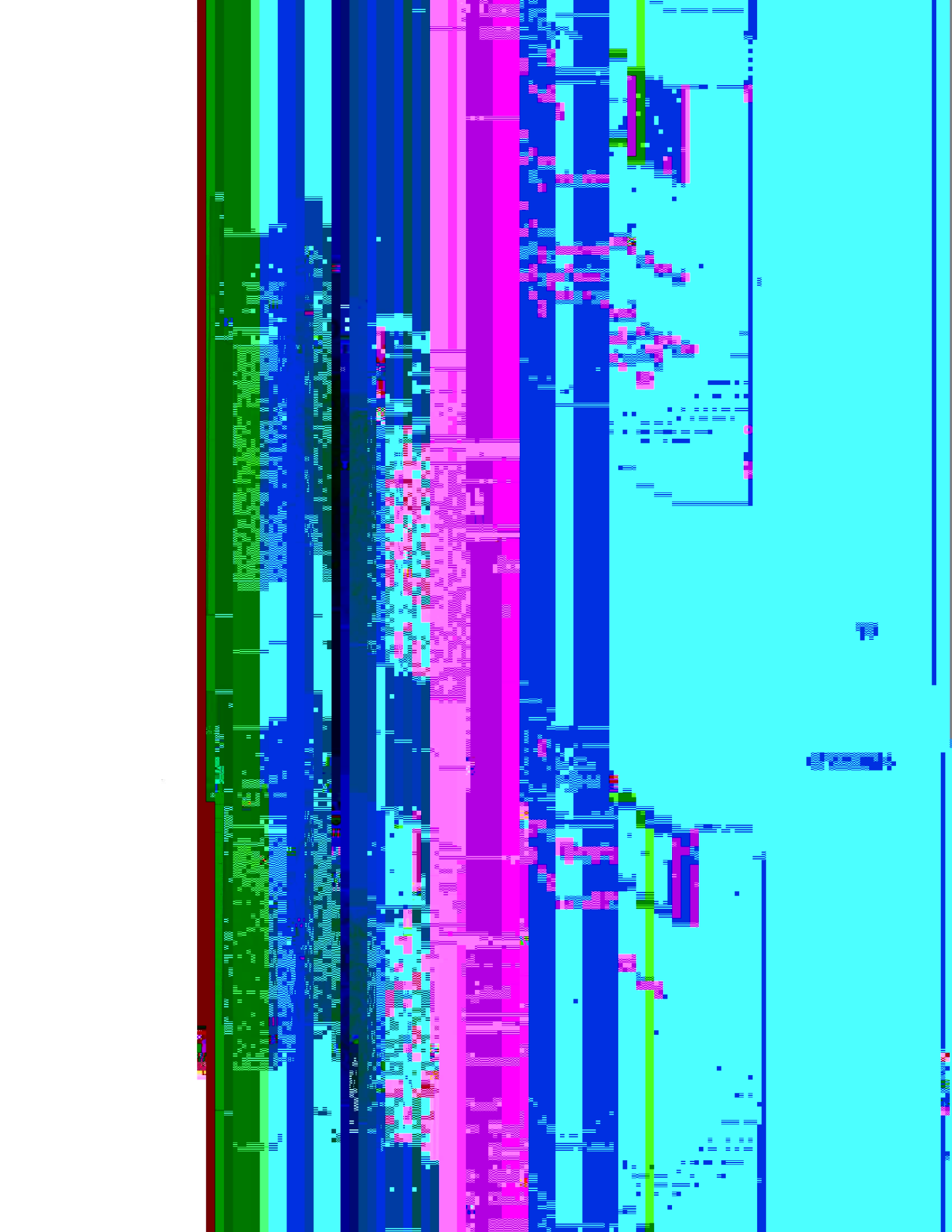
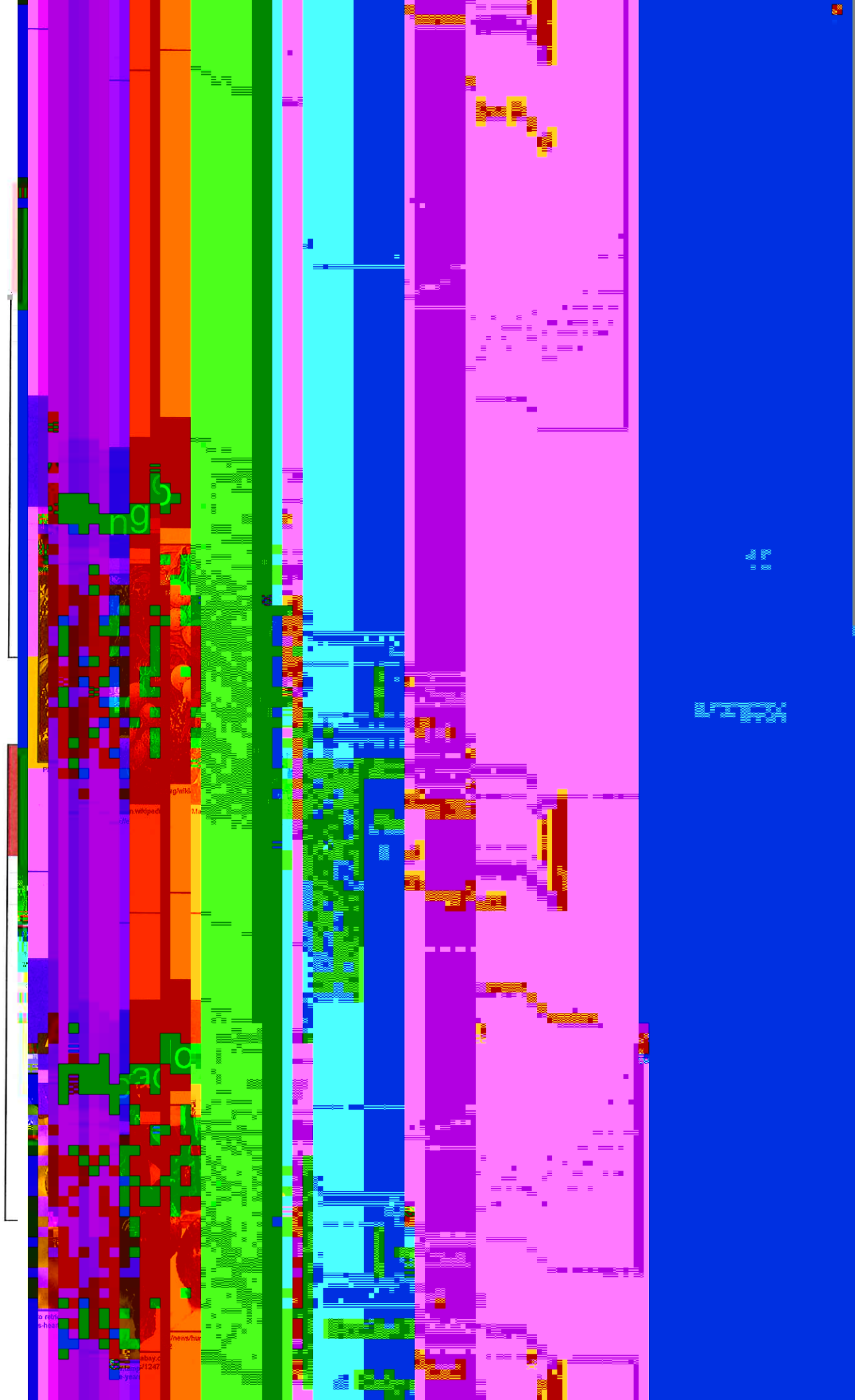
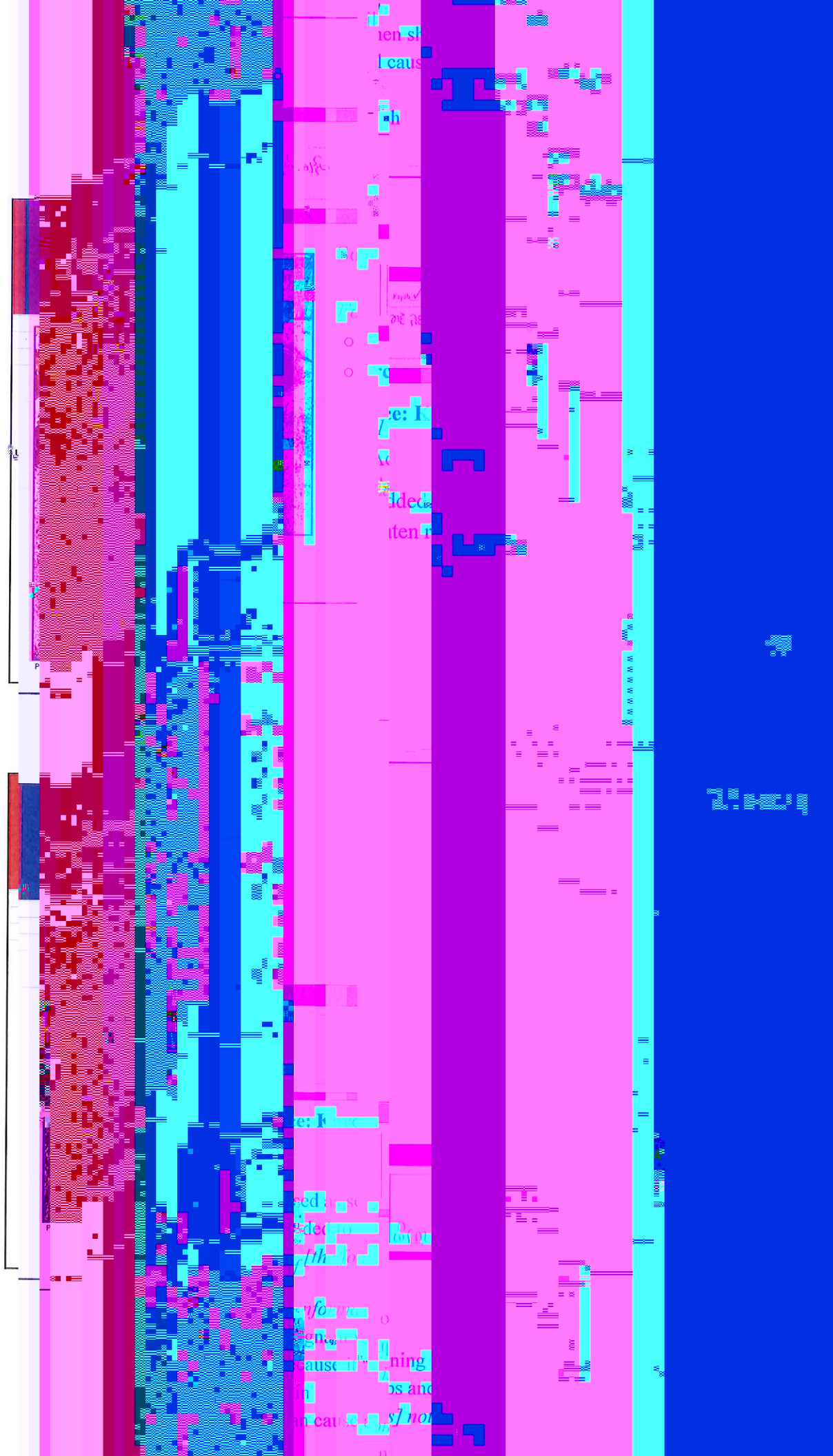


Figure 1: Cross-section of a multi-layered mechanical component.









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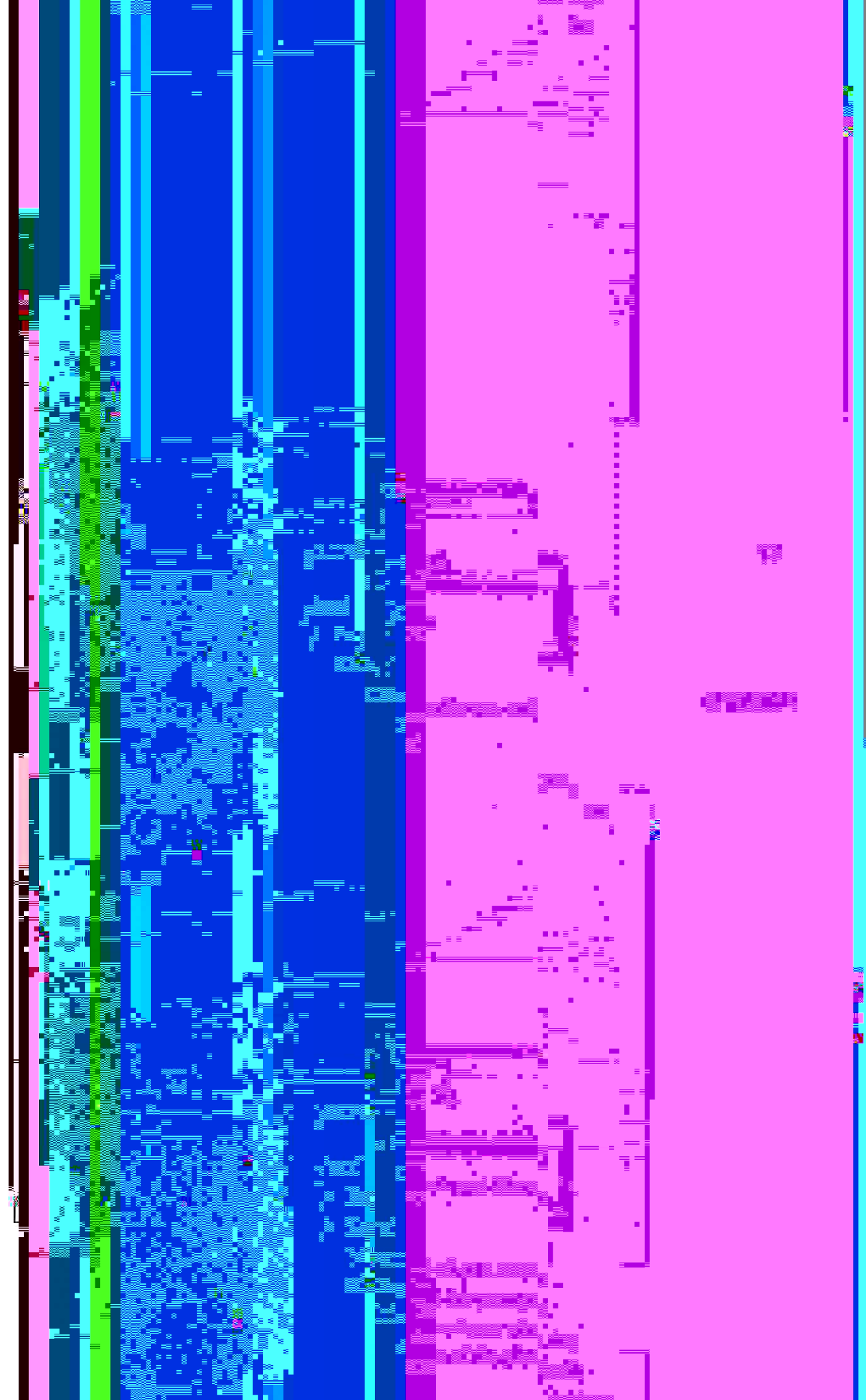
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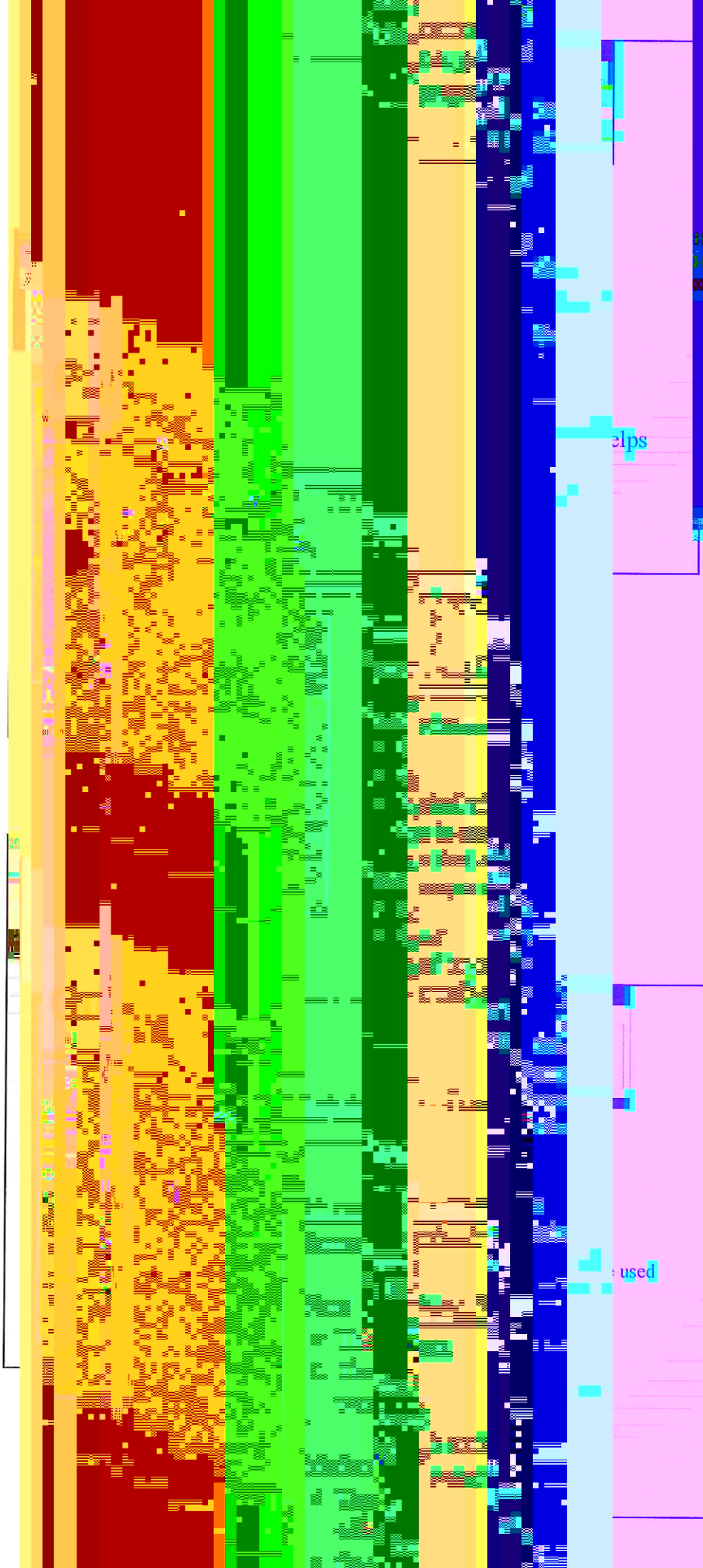
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Photo retrieved from growingguide

Food

- Medicinal properties
- Most common in Kayah blood
- The Blood of Karen

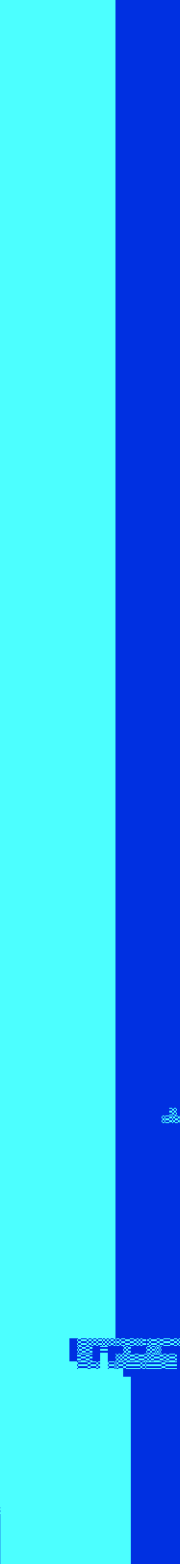
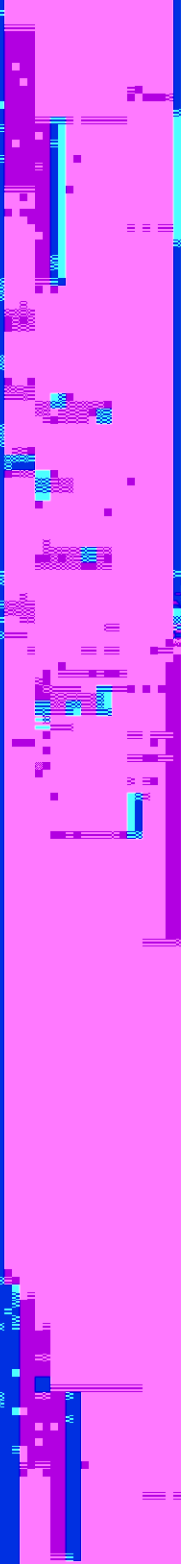
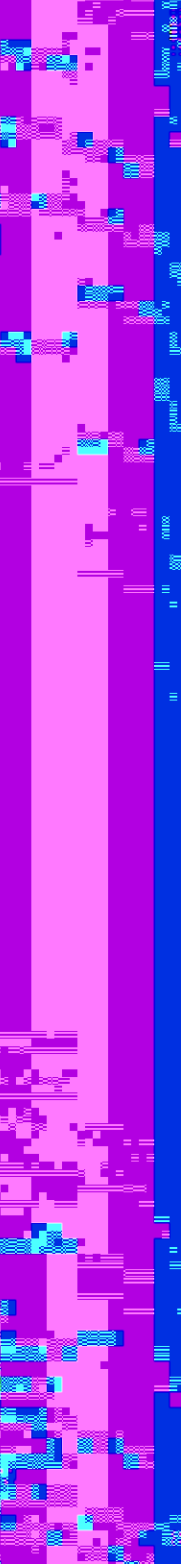
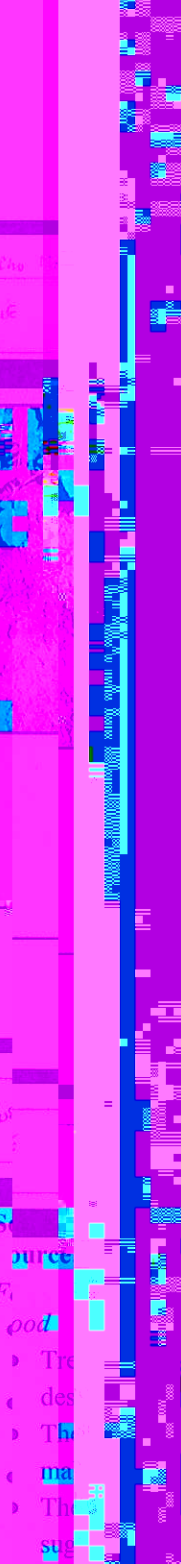
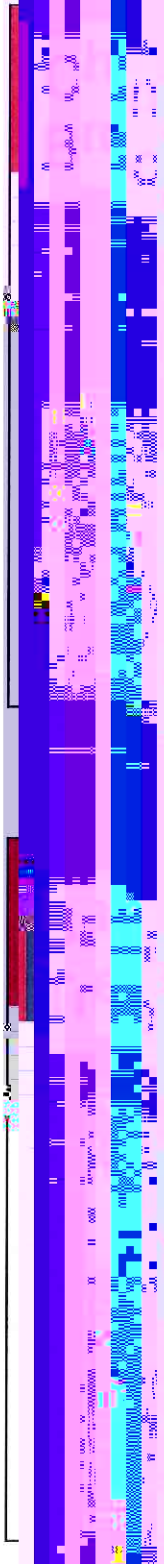


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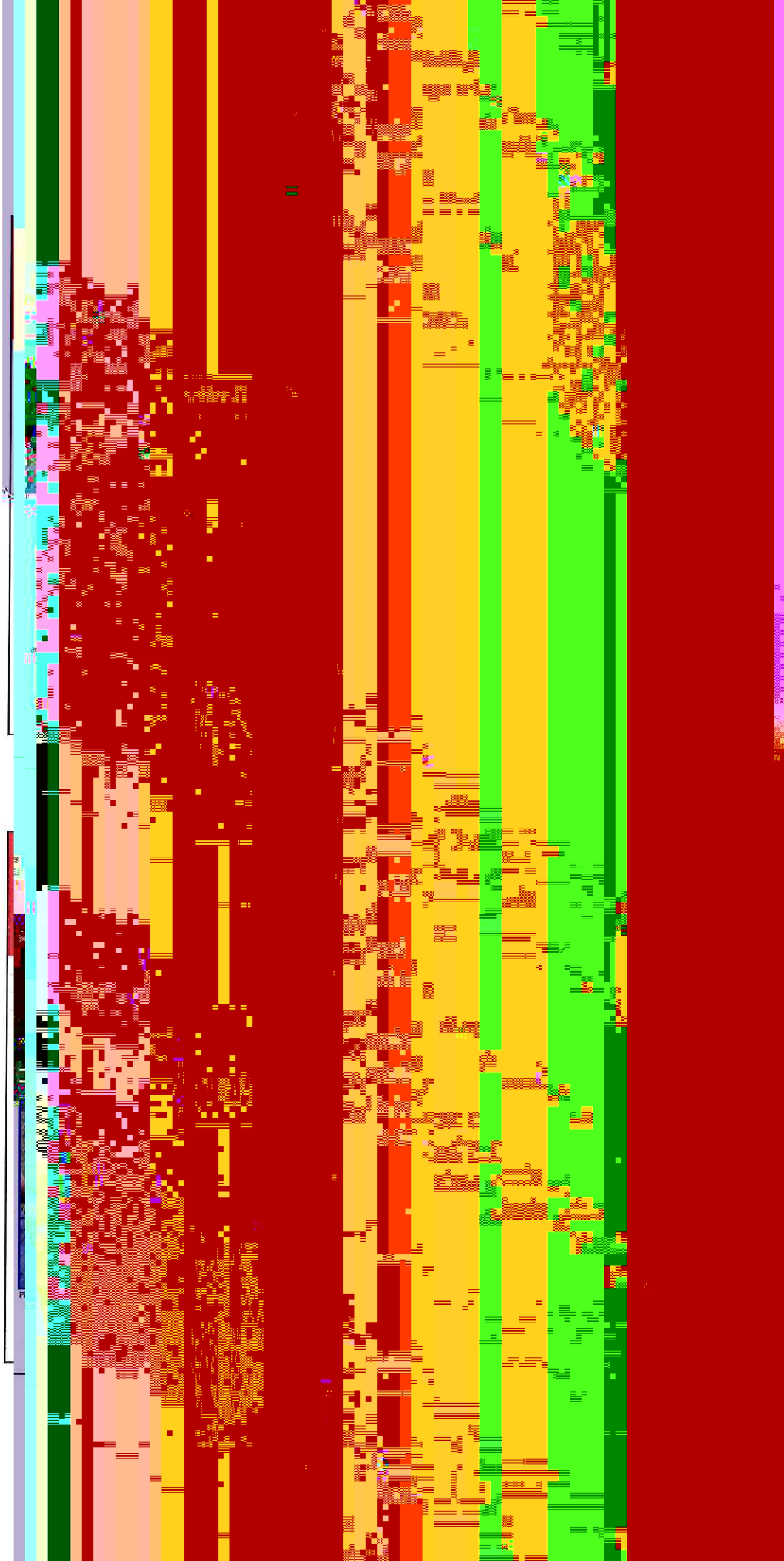
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