

Challenges to Food Access Among Lewiston's African Immigrants

by Michelle Vasquez Jacobus

Reza Jalali

INTRODUCTION

After many challenging discussions, Abdi and his sister, Zahra, finally reach an agreement: Abdi agrees to borrow a car and travel all the way downtown to purchase halal [religiously permitted] chicken at the Somali-owned store; Zahra, in turn, agrees to mix it with the significantly less expensive chicken they can purchase at the Save-A-Lot. Zahra is concerned: Mixing the chicken, she says, makes it all haram [religiously prohibited]. Abdi counters that, though under some interpretations this may be the case, if they eat only halal chicken, they can only afford to eat chicken once a month.

This scenario describes a situation not uncommon among Maine's African immigrant population in Lewiston. It is a story of insufficient resources, loss,

compromise, adjustment, and resiliency. This scenario exemplifies how food and access to food is determined by our culture, income, location, and familiarity; and how these accessibility factors determine what foods we eat, how we eat them, and how well our nutritional needs are met. It also illustrates elements of food access that go beyond biological and public health concerns, but touch on the essence of how we are connected to our family, our religion, our community, and our identity.

We have been conducting an ongoing community food assessment in Lewiston. In this article, we discuss what we have learned about the particular food needs and assets of this African immigrant population. We consider how these findings may transfer to a better understanding of the unique food needs of other African immigrant populations and the policy implications and ways for guiding community-building decisions.

BACKGROUND

As the picture of immigrants entering the U.S. over the past two decades has changed, research increasingly focuses on the unique needs and assets of the "new" immigrant population. Between 2001 and 2010, nearly 8,000 African immigrants relocated to Lewiston, mostly as secondary migrants (Nadeau 2010; Qamar Bashir, personal communication, 2010). Community leaders estimate that currently (2010) approximately 10 percent of Lewiston's population is comprised of African immigrants as compared with less than one percent people of color in 2000 (Martin 2010; Nadeau 2010). These "new Mainers" in Lewiston are for the most part from Somalia (approximately 80 percent) (Rector 2008), most live in families including two or more children (Qamar Bashir, personal communication, 2010), many live in public or low-income housing, and nearly all are adjusting to learning a new language and integrating to a population that is culturally and socially different

...food and access to food is determined by our culture, income, location, and familiarity.

from that of their home country (Ismail Ahmed, personal communication, 2009; Qamar Bashir, personal communication, 2010).

Although nearly every element of life is dramatically different in Maine, food is among the most profound differences for Somalis. Food is also a primary embodiment of religious and cultural practice. African immigrants are accustomed to eating different foods, fruits, vegetables, and spices in their diet than they are able to easily access in Lewiston. They are used to shopping differently for food, preparing food differently, and consuming food differently, all factors that must be considered in accessing food availability for Lewiston's immigrant population.

Food access includes factors such as affordability, opportunity, proximity, comfort, and cultural and religious guidelines. As defined by Hadley and Sellen (2006: 369), "food insecurity occurs whenever the availability of nutritionally adequate and *safe* foods or the ability to acquire them is limited" (emphasis added). The USDA reported that in 2009, 14.7 percent of U.S. households were food insecure (Nord et al. 2010) while in Maine it was 14.8 percent. Rates of food insecurity are particularly high for low-income and minority households (Nord et al. 2010).

Achieving a richer understanding of food insecurity among Lewiston's most vulnerable populations is a primary function of the Local Food for Lewiston (LFL) project, a community assessment of assets and challenges to food access in Lewiston, Maine. (For more in-depth descriptions of Lewiston's community food assessment, Local Food for Lewiston, see Harris et al. [2010], Vazquez Jacobus and Harris [2007], and Walter, this issue.) How and why Lewiston's immigrant population might be vulnerable to food insecurity and how to ameliorate this condition are important policy issues that need to be assessed in Maine.

QUALITATIVE ASSESSMENT OF FOOD ACCESS FOR AFRICAN IMMIGRANTS

To develop the picture of food access for African immigrants in Lewiston, in-depth interviews were conducted with nine community leaders including Somali social service providers and owners of halal stores from August 2009 through October 2010.

Although asked specific questions regarding food access, differences in consumption practices, and recommendations for ameliorating challenges, the interviews were held informally and inquiries were made in an open-ended fashion. These leaders were consulted specifically because of their various expertise and interests; they do not represent a cross section of the African population of Lewiston.¹ As parents, refugee resettlement workers, business owners, and neighborhood residents, their knowledge provides an inroad to the complex map of food accessibility among vulnerable new Americans.

Food Access, Expense, Proximity, and Familiarity

Research in a number of diverse cities indicates that immigrants and refugees have high levels of food insecurity (Hadley and Selen 2006) and nutrition-related health problems (Chilton et al. 2009; Kalil and Chen 2008; Patil, Hadley and Nahayo 2008). As is true of many new immigrant populations, most of Lewiston's African immigrants are low income (Nadeau 2010; Qamar Bashir, personal communication, 2010). It is estimated that more than 50 percent of the African immigrant population in Lewiston are unemployed (Nadeau 2010; Rector 2008), more than 75 percent live at or below poverty level (Nadeau 2010; Qamar Bashir, personal communication, 2010), and more than 90 percent of Lewiston's immigrant school children qualify for free or reduced lunch (Maine Department of Education 2010; Martin 2010).

A few years ago we found out that one of the infant formula products that many of us were buying included a pork product but we didn't understand this because it was written in its chemical name.... Many single moms will pay three times the price for THE SAME Nestle powdered milk written in Arabic than the one written in English because they feel safe that it is not haram.

Most of the African immigrants in Lewiston are Muslim and as such, are religiously prohibited from eating food that is not halal. Haram food includes primarily pork, but also includes meats that are not

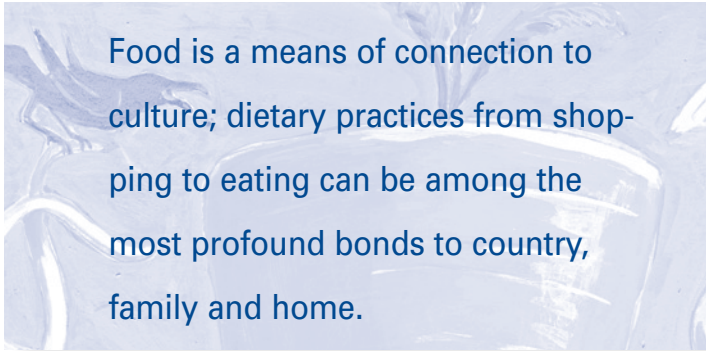
butchered according to the Islamic laws. Halal meat is not generally sold in stores in Lewiston. Because the halal process requires special personnel and because there are few sources of halal products, they are generally more expensive. In addition to halal meats, many African immigrants and many Muslims in Lewiston, are most comfortable buying specialty items that are prepared in a way to assure Muslim consumers that they are not haram. Thus rice, spices, dried fruits, and condiments must also be imported from specialty distributors abroad. Often these sources are in Muslim or Middle Eastern nations, and the import, security, and inspection process can be quite expensive. These items are often carried only at the halal specialty shops in Lewiston, are of limited availability, and can be relatively costly.

I would rather buy my food from the shop on Lisbon Street but the big stores are much less expensive. When I am buying for clients with very limited money I buy their staples at Walmart and then give them some money to buy their meat at the halal store where they can feel better. The environment in a store like Walmart makes us uncomfortable—with all the bright lights, it seems so sterile—and there is so much of everything. You can't even find what you want because there is so much! And it doesn't even smell like food! How can you have a food store that doesn't even smell like food?

An important influence on access is proximity to a food source. According to an August 29, 2010, article in *The Sun Journal* by Bonnie Washuk, all but two of Lewiston's African food stores are located downtown on lower Lisbon Street. Many recently arrived refugees live in the downtown Lewiston area, and refugee resettlement workers often try to place them there because of the proximity of stores and services that meet their cultural needs (Qamar Bashir, personal communication, 2010). Most of Lewiston's African immigrants, however, do not live within walking distance of the downtown. They live either in one of the large public-housing complexes at the outskirts of Lewiston, or in one of several property-management-owned buildings that are closer, but still not easily walkable, to down-

town (Hussein Ahmed, personal communication, 2010; Qamar Bashir, personal communication, 2010; Khadra Jama, personal communication, 2010).

Because so many residents live far from the African stores, their use of these stores is dependent on access to a vehicle or public transportation. The city of Lewiston has been taking measures to improve access to their public bus system, but the buses do not yet run to the more distant areas of the city and it has limited evening and weekend hours. Thus, for most of Lewiston's African residents who do not live downtown, accessing culturally familiar food requires use of a private vehicle.



Food is a means of connection to culture; dietary practices from shopping to eating can be among the most profound bonds to country, family and home.

Food and Culture: Differences in Dietary Practices

We are losing some of our culture here. I don't brag but I am the best chapatti maker in the community. But my 16-year-old daughter—she does not know how to make the chapatti.

Food is a means of connection to culture; dietary practices from shopping to eating can be among the most profound bonds to country, family and home. “The foods that people eat are critical in defining them and are an integral part of shaping ethnic identity [citations omitted] so that maintenance of food related cultural practices in situations of forced relocation beyond the homeland may play an important psychological role in continually confirming ties to ones culture and traditions” (Hadley and Sellen 2006: 373).

We used to walk everywhere—we had to buy food every day and it was our social time. It's so different here: no one walks anymore—we all take the car.

From food preparation to consumption, all of the immigrants with whom we spoke reported significant differences in dietary practices upon relocating to Lewiston. For many immigrants shopping in their home country involved physical activity as they daily walked from the baker, to the butcher, to the green grocer to gather their menu. In addition, food shopping and preparation were social opportunities involving sharing of recipes and skills, where pride was established and techniques demonstrated. Care was taken in the choosing of ingredients and value placed on how food was prepared. In addition, diets in the home country were different. Many Somalis were used to eating relatively more meat in Africa, different greens and tubers, and more and different grains and spices. In the U.S., inexpensive, heavily processed and prepared foods are readily available. For families on limited budgets, or with limited understanding or access to culturally familiar foods, these preprocessed foods are in many cases the only accessible option.

In most cases, the walking social trips to the shops are replaced by drives to the supermarket, and processed calorie-dense foods substitute for the carefully prepared stews simmered for hours. In addition, where a family is on a limited budget, receiving the support of food stamps or WIC, the more expensive halal meats or the trip to the cultural specialty shop may be beyond their reach (Hadley and Sellen 2006).

Socioemotional factors may also play a role in varying diets. Immigrants who have experienced famine or great deprivation, may readily opt for calorie-dense (even if low nutritive value) foods as a compensatory behavior to assure that neither they nor their children experience hunger (Rosas et al. 2009; Patil, Hadley and Nahayo 2008). There may also be issues of perspective and priority. A Somali social service worker with whom we spoke observed that not many of her clients seem to appreciate the potential severity of nutrition-related health concerns: "When you have lived in a refugee camp for years and worried about having enough food

to feed your family, things like high cholesterol or diabetes seem like minor worries."

POLICY IMPLICATIONS AND RECOMMENDATIONS

Access

Single moms will shop at the [halal] market. They can buy bananas and put it on a "tab." They can't do that at a big market and [the halal shop owner] will explain about the baby formula or translate the label. They don't have to worry about not speaking English or how they are dressed or that anyone will bother them. They even get help with getting the groceries home.

Improving access to culturally appropriate healthy food begins by working through the community's already substantial assets. A number of African stores are already in business in downtown Lewiston, and new ones are opening on a regular basis. African-owned businesses provide many functions to the community. These stores operate as social centers, cultural consultants, language translators, and centers of "safe" and comfortable food and products. For single parents and for newly arrived immigrants especially, these cultural businesses can be a lifeline of support.

Kosher food is safe for us to eat too. It is required that it be "slaughtered by a man of God" and kosher food is prepared this way so if we teach people to look for the kosher symbols, they can do that.

To meet the needs of Lewiston's immigrant population, and indeed all community members living downtown, efforts should be made to provide access to healthy fresh food in underserved areas. Many of the dietary challenges immigrants face center around adherence to halal practices for meat consumption. Currently, African storekeepers are faced with expensive procedures to import halal meat from as far as Australia. When they buy halal products "locally" from New Jersey or Boston, they find prices are much higher due to the lack of competition. Cooperative buying

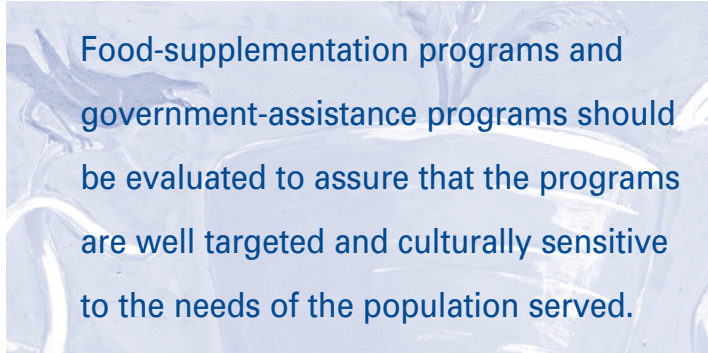
groups could be facilitated so that small businesses, including the African stores, have some buying power to negotiate with larger food distributors. These negotiations ought to try to include local farms as sources of this food so that the area's own organically and locally produced meat and produce can be sold through these stores. During the growing months, connections with organizations such as St. Mary's Nutrition Center/Lots to Gardens and other community farms may provide a source of locally grown produce that could be made available through local stores. There are many opportunities here for innovative business people to develop arrangements between local farms and African businesses to supply USDA-certified and halal meats to local stores. Perhaps local farmers can be offered incentives or subsidies to grow or raise culturally familiar produce such as tubers or greens along with goat or beef for halal butchering. Complementarily, community members might be afforded increased opportunities to cooperatively cultivate land or raise food for their own consumption.

Social Services

Researchers have demonstrated that government-assistance programs such as the Food Stamp Program alleviate food insecurity (Borjas 2004). Furthermore, in states where welfare benefits have been significantly limited, the social problems they were designed to ameliorate have become more acute (Borjas 2004). Thus, although programs such as Temporary Assistance to Needy Families (TANF) and Supplemental Nutrition Program for Women, Infants and Children (WIC), and the Food Stamp Program are helpful in preventing and ameliorating food insecurity, it is vital that Maine maintain its flexibility and continuation of food and health support programs, especially for the most vulnerable. In addition, although refugees are exempted from restrictions imposed on noncitizen immigrants, most of Lewiston's African immigrants are *secondary* migrants, so they are often caught in a confusing morass of regulations. It is estimated that a significant portion of Lewiston's eligible immigrants do not receive benefits (Hussein Ahmed, personal communication, 2010; Qamar Bashir, personal communication, 2010). Whether this is because of the "chilling effect" described by social scientists investigating the impact

of welfare reform (Kalil and Chen 2008) or other social or emotional factors, as long as needy members of the community do not receive the services they require, food insecurity will continue to be a challenge.

Many authors describe culturally specific barriers to provision of social services (Kalil and Chen 2008; Patil, Hadley and Nahayo 2008). Immigrant clientele find few African Department of Health and Human Services (DHHS) workers in Lewiston. Other complicating factors include clan politics, gender or age barriers, and confidentiality concerns. Even if they receive benefits, they may find their allotments quickly depleted by the higher price of halal and culturally familiar food, and existing food pantries and soup kitchens may not always carry food that is culturally "safe" for Muslim clientele.



Food-supplementation programs and government-assistance programs should be evaluated to assure that the programs are well targeted and culturally sensitive to the needs of the population served.

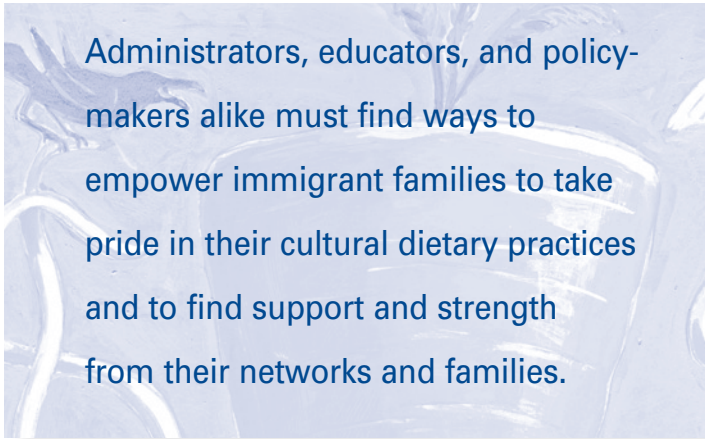
Food-supplementation programs and government-assistance programs should be evaluated to assure that the programs are well targeted and culturally sensitive to the needs of the population served. Service personnel, style, and delivery all need to be current with the changing needs of the population. For example, it may be necessary to provide greater allowances for provision of halal products and to review food lists to ascertain whether haram food additives are included among the products given to Muslim families. Where possible, consultants and social workers should be trained and hired from the African community. To enhance services generally, all service providers need be culturally informed and aware of the dietary and social requirements of their immigrant clients. Furthermore, these limitations in the provision of social services may compromise the potential diversity and cultural

inclusiveness of our state and may have a negative impact on Maine's growth and economic strength.

Supporting Indigenous Social and Cultural Capital

There are many assets in the Lewiston Auburn area who are trapped in their homes—great assets of selling, cooking, parenting—all with creative ideas and new business opportunities that simply don't get out. The key is for us to work together to figure out how to get them into the community.

We need to enhance the indigenous resources already a part of Maine's social capital and use them to expand access to healthy food for our communities. Lewiston is fortunate to have a rich network of community organizations and leaders with a long history of collaborative problem solving. Many of the envisioned solutions require only that these innovative leaders combine their strengths.



Administrators, educators, and policy-makers alike must find ways to empower immigrant families to take pride in their cultural dietary practices and to find support and strength from their networks and families.

Local Somali leaders and Lewiston city officials agree that one of the greatest challenges to new Mainers is a lack of jobs for which they are both qualified and well-suited (Nadeau 2010; Rector 2008; Said Mohamud, personal communication, 2010). By developing incentive programs for scholarships and career placement, we can encourage immigrants to take advantage of local higher education opportunities and to use their skills to work with the community.

Several states offer financial support for college in exchange for entering high-need fields such as health care, nutrition, and education. Such programs could be of great mutual benefit in Maine.

I was here for two years before I realized that collard greens are the greens that we are used to. And cilantro—we have that but I didn't know what you call it. I found that the Latino tubers and spices are closest to what we are used to—the plantains, mango, cilantro—we eat all that.

Recognizing the inherent expertise of Lewiston's immigrants, a network of cultural food consultants and social service advocates can be developed to enhance programs. Cultural food consultants could be in attendance at DHHS when immigrants are signing up for benefits, at local stores to provide shopping guidance, at soup kitchens and food pantries to inform provisioning, and at local schools to assist with culturally appropriate food choices and preparation. A contingent of cultural peer advocates could be organized to provide informal cultural and language translation services to immigrants as they navigate the food system or to accompany community members on shopping trips or to meetings with administrative personnel. These cultural experts could work with local business owners and social service agencies to issue a resource book that lists the culturally friendly businesses along with the services and products available. They could author a recipe book that not only includes familiar recipes from home, but substitutes affordable, available, and healthy options where appropriate and provides guidance about where these items can be found. Through programs such as Fresh Start Farms (community-supported agriculture employing African immigrant farmers as entrepreneurs) in nearby Lisbon, cultural brokers could connect local farmers with sources for their produce.

One of the most significant policy changes we recommend occurs at the most familiar level. Administrators, educators, and policymakers alike must find ways to empower immigrant families to take pride in their cultural dietary practices and to find support and strength from their networks and families. Informed parents can make wise and healthy food choices for their families. Schools and day care providers

can reinforce this by providing and celebrating diverse cultural options. Family chefs can be lauded as they demonstrate cultural recipes for school lunch programs and provide cooking classes at community centers. From advertising to parenting, there are numerous ways in which we can promote the continuation of healthy, culturally focused dietary practices.

Cultural renewal is critical to maintaining family ties and identity, but also to improving health. Just as there are risk factors that predispose us toward food insecurity, there are also factors that protect us from it (Burns 2004). Cultural practices that involve activity, care in selection of food, attention to ingredients, aesthetic presentation, and shared dining help people to avoid unhealthy eating habits. In addition, teaching food provision and preparation practices that sustain health and food is a culturally powerful way to promote healthy nutrition practices.

CONCLUSION

In a society where food insecurity and nutritional ill health are so highly associated with barriers to food access, we must recognize and encourage the factors that protect against unhealthy dietary practices. We can also overcome challenges to food access through our social networks, friends, neighbors, and family and with connections to heritage. We must be aware of and ready to resist the overarching influence of what we see in advertising and what is promoted, inadvertently at times, by our social institutions. This increased corporate and media influence enhances the allure of abundant, tasty processed foods that are not nutritionally optimal. Our appetites, however, can be reclaimed. Somali food, like Mexican and Chinese food, can be made with local ingredients, with care to decreasing saturated fats, and with attention to spice, ingredients, preparation, and presentation. Local chefs and cultural purveyors can be consulted for their expertise and lauded for their community engagement as they share their gifts.

The picture of food access for immigrants in Lewiston is the picture of general access to society for these new Mainers. Currently, this picture is compromised, but it offers many points of access for improvement—through children, through creativity, and through collaboration. 🐼

ACKNOWLEDGMENTS

This piece is a collaborative effort representing the knowledge and ideas of multiple cultural and community experts. Thus we owe not only our gratitude, but the work itself, to the invaluable contribution of the following, without whose expertise, perspective, and generosity it would not be possible: Hussein Ahmed, Ismail Ahmed, Qamar Bashir, Robert Baskett, David Harris, Khadra Jama, Said Mohamud, and Zam Zam Mohamud.

ENDNOTES

1. Where the information provided by our interviewees is based in their expertise or professional knowledge they are cited by name as a primary source of the information provided. However, where their quotes are anecdotal and based in their experience as Somalis, which is more generalizable to the experiences of relocated African refugees in Lewiston, the quotes are unattributed as intended to speak for a broader voice.

REFERENCES

- Borjas, George J. 2004. "Food Insecurity and Public Assistance." *Journal of Public Economics* 88: 1421–1443.
- Burns, Cate. 2004. "Effect of Migration on Food Habits of Somali Women Living as Refugees in Australia." *Ecology of Food and Nutrition* 43: 213–229.
- Chilton, Mariana, Maureen M. Black, Carol Berkowitz, Patrick H. Casey, John Cook, Diana Cutts, Ruth Rose Jacobs, Timothy Heeren, Stephanie Ettinger de Cuba, Sharon Coleman, Alan Meyers and Deborah A. Frank. 2009. "Food Insecurity and Risk of Poor Health among US-Born Children of Immigrants." *American Journal of Public Health* 99(3): 556–562.
- Hadley, Craig and Daniel Sellen. 2006. "Food Security and Child Hunger among Recently Resettled Liberian Refugees and Asylum Seekers: A Pilot Study." *Journal of Immigrant Health* 8: 369–375.

Harris, David, AbouEl-Makarim Aboueissa, Michelle Vazquez Jacobus, Jigna Dharod and Kirsten Walter, 2010. "Mapping Food Stores & People at Risk for Food Insecurity in Lewiston, Maine." *Journal of Extension* 48(6): 1–14. <http://www.joe.org/joe/2010december/rb3.php> [Accessed May 9, 2011]

Kalil, Ariel and Jen-Hao Chen. 2008. "Mothers' Citizenship Status and Household Food Insecurity among Low-Income Children of Immigrants." *New Directions for Child and Adolescent Development* 121:43–62.

Maine Department of Education, 2010. *School Lunch Monthly Reimbursements, Percent Free and Reduced School Lunch Report*. Augusta, Maine. https://portal.maine.gov/sfsr/sfsrdev.ed534.ed534_parameters [Accessed May 9, 2011]

Martin, Susan. 2010. Panel discussion held by Androscoggin Chamber of Commerce regarding Immigration in Lewiston, University of Southern Maine Lewiston-Auburn College, October 20.

Nadeau, Phillip. 2010. Panel discussion held by Androscoggin Chamber of Commerce on Immigration in Lewiston, University of Southern Maine Lewiston-Auburn College, October 20.

Nord, Mark, Alisha Coleman-Jensen, Margaret Andrews and Steven Carlson. 2010. *Household Food Security in the United States, 2009*. ERR-108, USDA, Economic Research Service. <http://www.ers.usda.gov/Publications/ERR108/ERR108.pdf> [Accessed May 15, 2011]

Patil, Crystal, Craig Hadley and Perpetue Djona Nahayo. 2008. "Unpacking Dietary Acculturation among New Americans: Results from Formative Research with African Refugees." *Journal of Immigrant Minority Health* 8(4): 369–375.

Rector, Amanda. 2008. *An Analysis of the Employment Patterns of Somali Immigrants to Lewiston from 2001 through 2006*. Center for Workforce Research and Information, Maine Department of Labor and Maine State Planning Office, Augusta. <http://www.maine.gov/labor/lmis/publications/pdf/LewistonMigrantReport.pdf> [Accessed May 9, 2011]

Rosas, Lisa G., Kim Harley, Lia C.H. Fernald, Sylvia Guendelman, Fabiola Mejia, Lynnette M. Neufeld and Brenda Eskenazi. 2009. "Dietary Associations of Household Food Insecurity among Children of Mexican Descent: Results of a Binational Study." *Journal of the American Dietetic Association* 109(12): 2001–2009.

Vazquez Jacobus, Michelle and David E. Harris. 2007. "Mapping Hunger in Maine: A Complex Collaboration." *Academic Exchange Quarterly* 11(4): 202–209.

Walter, Kirsten. 2011. "Local Food for Lewiston: Exploring the Role of Food Assessment as Part of Broader Work in Community-engaged Food Systems." *Maine Policy Review* 20(1):



Michelle Vazquez

Jacobus is an assistant professor at the University of Southern Maine's Lewiston Auburn College with a dual appointment in Social and Behavioral Sciences and Leadership and Organizational Studies.

Working from backgrounds in both social work and law, she focuses her work on community engagement/service learning and community capacity building, particularly through promoting diversity and multiculturalism.



Reza Jalali

Reza Jalali works at the University of Southern Maine in Multicultural Student Affairs. He also teaches at the Bangor Theological Seminary and is the Muslim chaplain at Bates College. Jalali was a

contributing writer to a number of publications and multimedia productions.