Interviewer: I want to say thank you very very much for agreeing to be a part og this study, basically, like the topic says, barriers and facilitators to the uptake of healthy eating messages by pregnant African immigrants living in the UK, I’m trying to find out how the healthy eating messages that have been offered in pregnancy can, erm how we relate to it you know

Response: yeah

Interviewer: and let’s see if the messages could be changed and if we relate well, we will know that we are relating to it well or if the messages could be

Response: ok

Interviewer: changed, if you feel that you need to speak some words like in pidgin or something, its fine. Otherwise we would just continue. So, this is the questionnaire I hope you have had a chance to read the participant information sheet that I sent earlier

Response: yeah I did

Interviewer: Basically, this questionnaire is for general and demographic questions and this is the interview guide for the main interview

Response: ok

Interviewer: I’m hoping that this interview would take between 1hr and 1Hr, 30 minutes

Response: Ok

Interviewer: So we will start with the questionnaire, I want to find out how old are you

Response: I’m 28 years

Interviewer: so, between 19 and 28 years, so what is the highest level of education you have completed. So, we have no formal education- so I never went to school, elementary/primary, secondary/high school diploma or equivalent, college degree, bachelor’s degree, masters degree and doctorate degree.

Response: Master’s degree

Interviewer: So, what is your martial status, married, divorced, civil partnership

Response: married

Interviewer: ok, what is the country of your birth

Response: Nigeria

Interviewer: so what is your nationality

Response: im a Nigerian

Interviewer: How long have you been resident in the United Kingdom, so we have less than a year, 1-5 years, 6-9 years, 10-14 years, 15 years and above

Response: 1 -5 years

Interviewer: Do you have any existing condition that requires dietary management, we have diabetes, hypertension, anaemia, coeliac disease, … any condition

Response: none

Interviewer: There’s a question here that talks about the height. Do you know your height?

Response: I don’t know it offhand, I have it on my record somewhere. But I don’t know it offhand.

Interviewer: so this one, when I send it to you, you will just check the record and then fill it and send it back

Response: ok yeah

Interview

Interviewer: My name is Aniebiet Ekong, a PhD student Bournemouth University. Welcome to the interview session proper. I’m trying to explore your understanding around healthy eating, you know. What do you understand about healthy eating. Now this interview is really voluntary. If you feel that you do not want to be a part of it at any point in this interview, you can just opt out. Its not going to affect anything

Response: okay

Interviewer: and I would be taking notes as the interview progresses so incase you see that im writing some notes, you shouldn’t really worry about it. Okay so erm. I want to understand, what is your understanding about healthy eating. When somebody says healthy eating, what do you understand about it.

Response: it think its basically eating, okay let me just say from my Nigerian perspective, eating what is balanced, eating a diet that is balanced. You know ermm diet that has almost all nutrients. And ermm that is good for your body. I think that is what healthy eating is and it varies from culture to culture because in Nigeria what is healthy eating there might not be healthy eating here. That’s just what I think.

Interviewer: so do you want to explore like when you said it varies from culture to culture. Do you want to explore the topic?

Response: the reason why I said that is because, when I first moved into the UK, I observed that they eat lots of bread, I mean what they call toasts, sandwich, different kinds of thing, but in Nigeria it wasn’t something of ehm, it wasn’t what that I used to consider healthy you know, ive like, I prefer to take maybe something like. Something liquid, something like ehm, you know this pap we take in Africa and stuff like that with maybe bean cake Something just. But here when I noticed that it was bad you know. You take ehm lots of flour then maybe they will put some veggies in it, they names it whatever they want to. I just feel…here too it is healthy, that’s not the way it is seen in Nigeria. So I just feel probably it is based on the food available in different regions. So, that's what I think.

Interviewer: Okay, so, since you became pregnant, did your eating habit change?

Response: yes, not erm not erm. It was voluntary. A decision made by myself, not because maybe the the pregnancy prompted a change in my taste bud or something. It was just a decision I made to make myself and my baby healthy. So ive just been thinking anytime I get pregnant im going to eat lots of cucumbers, carrots you know stuff like that. It was just a decision I made. It wasn’t because, infact I had, it was as if I didn’t really experience any drastic change you know in my appetite for food. It was the same but it was just a deliberate effort from my own side to say okay eat more of veggies, more of fruits you know to make your baby and you healthy. That was it for me.

Interviewer: that’s nice, that’s really interesting. So erm, if we go back to what you said earlier about culture. Could you like give me an example of the foods that you considered healthy. Like the Nigerian foods that you considered healthy.

Response: ok

Interviewer: we would talk in terms of meals because most of African foods are talked about in terms of meals. Would you tell me like some of the foods you consider healthy in Nigeria.

Response: okay, okay. You know for example now we have veggies that are different from the veggies they have here and you know the way they cook. You know the eat it raw here per say. Let me just say that but from Nigeria if you will eat veggies, you are likely to cook it. You know so mine was that way. Like I tried to eat vegetables cooked then there were some things that I ate that they don’t have here, that I have to go to African market for it. For example I love catfish pepper soup a lot. Maybe they don’t have it or I don’t really know where they sell it so I always go to the African market to get it because I felt it was good for me. And fish fish generally, I love fish so I eat it a lot, normally I don’t like meat so it wasn’t, I didn’t really eat meat while I was pregnant. So it was really eating African food, eating vegetables, eating our own solid, you know made of yam, made of starch, made of whatever it is cassava, different solid that we have so I ate more of that and less of English foods. Let me make it that way. It was only sometimes when I have cravings that I ate something like chips. Chips was something that I ate normally like on a normal day, I prefer to eat fried yam that to take fried potatoes but at a point I just noticed that I really wanted to eat chips and I go to KFC to go and buy it but there are few times.

Recommendations on fish eating in pregnancy, even after pregnancy.

Interviewer: are there other things in the pregnancy that caused you to change your eating habits. I know you have mentioned ehm.

Response: yes

Interviewer: are there other things that happened

Response: I don’t know I think in the second trimester when I went for a check-up and then the midwife said my baby had low iron. I don’t know if it was my baby or me. I asked for the food I could eat and she said I could take more of cereals, broccoli. Things like broccoli, cauliflower. And you know I hate such foods so I now had to google African foods that are high in iron because I really hate broccoli. Infact all the foods she listed I’m like why, don’t you have any.. and then cereal, I’m not a cereal person, I can’t remember the last time I had cereal so it was just a no no for me. The options she gave me. Then I googled and I found out some African foods that were high in iron. One of the things that I found out was milk. So I said yes, I can still take milk. I took the foods until the midwife said the level was normal and then I’ve resumed my normal way of eating.

Interviewer: so the national institute of health and care excellence, maternal and child nutrition guidelines states that women attending antenatal and health visitor appointments are given advice on how toe at healthily. Now I want you to have that in mind. I know you have mentioned one kind of healthy eating advice you were given when the midwife was talking about anaemia

Response: yeah

Interviewer: is there any other healthy eating advice you were being offered; you have been offered in pregnancy.

Response: yeah, maybe I should start from the food they said I should avoid, they advised that I do not eat any food that is not well cooked and again I should avoid foods with lots of flour. Maybe pastries, you know things like that. I think she mentioned that I should avoid them . them particularly she was like make sure any meat or fish that you eat is well cooked. So, I was very conscious of that. Because before I am a person that cooks very fast. I can cook my meat in 20 mins and start eating but when she said that I started cooking it for so long and then there was okay she also advised that I eat that I should eat foods from different. I mean foods with different kind of nutrients. You know just to help the baby grow better and so and again I’m the type of person that in my free time, times when I’m not doing Uni work or personal work. I google a lot about food, that is good for babies brain, baby’s nails, hair and you know ill just google for things that are very funny. At times, sometimes I do that just to while away time then I follow that. So I think it was more of me listening to them and also making my own personal research on what is good for the babies health and me.

Interviewer: so in what form did these advice take? Was it in form of pamphlet

Response: yes, yes, yes, yes. They gave me loads of papers. Different kinds of things they gave me to read about and then they also gave me some link you know. Some of the link were on the pamphlet. You will see it there so they will be like, oh you can check this up. And you can read more about what we said you should eat and again they told me some just face to face, you know, and some which I think that was it.

Interviewer: So I want to it's safe to assume that some of the aspects of this information that you were given you know was useful to you.

Response: Of course it was.

Interviewer: And it also caused you to make changes to eating practice.

Response: yeah it did

Interviewer: And but we are going back to, you know, the beginning you know there was something you said said, so i want to ask how relevant was this advice to you as per your culture. Was it relevant to your culture?#

Response: Okay for me personally. Its 50-50, because yes, I’m saying this because probably if I was born here or I was raised here, maybe of course I would be used to the food available here

Interviewer: so if you were an African that was born or raised here

Response: if I was an African that was born and raised here, I would be used to the food and I would know more about the nutrient value of the food. The major problem I had was that, not that I didn’t know some of their food that was good but the problem again was that I didn’t know how to cook them. Like I don’t have an understanding of… for example now they say I should eat broccoli, I don’t understand if I am just going to boil that and be eating it, you know. Lile how do I make this appealing for me to eat. That was the major problem I had. I now had to start searching for African food because now you know now let me give you an example, you know now theres a way if you wanna cook beans, sometimes in Africa you can decide to cook potatoes with beans, you can cook yam with beans, you can put plantain in beans. So now that is because I understand how African foods are combined but I don’t know how they are combined here. Im just trying to learn. So it was difficult trying to find out okay what can I cook with cauliflower, what can I cook with broccoli to make it …I didn’t have time for all that. I just decided to go with the one I know. You know so that was it .

Interviewer: so now lets take for instance they gave you options and asked do you want to have like a cooking class to help you know how to cook some of these foods, would you have considered a cooking class as an alternative.

Response: yeah maybe because personally I really really love to cook, probably if they had given e that option im sure I would have taken it. And you know I would have seen it as an opportunity to learn international dishes you know. But nothing like that. I think, they assume that ofcourse you should know how to cook broccoli. Ofcourse you should know what to do with cauliflower. I think that was also an assumption from their own part. So that was it.

Interviewer: so now I’m going to talk about social context. When I talk about social context, im talking about where you live, your environment. Do you think that the healthy eating advice is useful to your environment like where you live right now.

Edit and explain social context question.

Response: I don’t understand what you mean by that. Are you talking in relation to my neighbourhood?

Interviewer: yeah your environment. Being an African here, your income level, your social context, income level, education. Was it really relevant to you

Response: yeah to some extent it was. Like I said some of the foods they mentioned that I had no idea of what it was because of my level of education I was able to find out about it. You know I was able to know where to access resources to have information about them. So I think to some extent it was helpful and then to my…let me just say, personally I feel that they should have made their approach more …how will I say it…more flexible. To be able to address all kinds of culture for example. Now if a midwife is dealing with a Chinese woman here, I feel they should have a knowledge of the kind of food that is available, I mean that the Chinese woman can access here and can even cook and also all others. Maybe African or whatever you are. I feel they should have made it more flexible. And not be like only English food, either you eat broccoli, fibre, cereal, whatever or nothing. I feel they should have made it flexible. That’s just my own opinion though.

Interviewer: I understand that. So what do you consider important to you when you are choosing a meal, is it distance, is it time to cook the meal. Is it your culture. Is it your personal taste, availability of the food or finance.

Response: no its definitely not availability or finance

Interviewer: no no, just the availability of the food

Response: no I understand what you are trying to say. For me, it is just taste. I mean how good the food is. I am the type that I can go to London from this Bournemouth to go and get something that is good and I wont mind the amount even if I don’t have money. For me, its never about maybe the distance or the money to spend or where. Its about the taste, that very nice taste where I can get it. That’s mine

Interviewer: and it has to be something that is in your culture as well or is it

Response: No no. I am not that way. For me, it could be something that is other culture but that I really really like. It could be English food, it could be Indian. As long as I love the taste. That is it for me.

Interviewer: so you have picked taste and possibly personal preference

Response: yeah, yeah

Interviewer: were there other sources of nutrition advice you received in pregnancy? I know you have mentioned the social media.

Response: okay yeah, I think from my family back in Africa

Interviewer: okay

Response: yeah, I think I should have mentioned that. I think that when you have people around, they feel that they are not here with me, so you know they just keep sending me these food things on whatsapp and say you should eat it. I remember my friends mum advised me to eat these hazelnut seeds. Oh you should eat it. It is very good for baby’s brain. She said when she was pregnant with my friend she ate lots of it. That’s shes intelligent. It was funny though but then I actually did it, though I will go to African shop, buy the raw hazelnut, cook it at home and I ate it a lot. Because she said just be eating it, your baby will be very sound and I do that. And then my mum as well. She will say, I should avoid anything cold, because I love anything cold. She will say I should avoid it. For now don’t take anything cold. Take things that warm, warm food, warm liquid and I don’t really like hot food so I just try to balance it by making it warm. Anything I eat I make sure it is warm . and then my sister too, she wont stop telling me what to do, eat custard. You know they just give you different ideas from African perspective and I think its helpful because they’ve got the experience. That was it for me.

Interviewer: so you also mentioned the internet, google and other search engines. Did you find information there?

Response: of course loads, internet is where you can get information. Though it could be wrong at times, it could also be true because there are all types of information on the internet but I try to get information from sites that I know that are reliable. Sites that have been tested and trusted over time. Not just that I will just

Interviewer: like what kind of sites

Response: for example now, there are these sites that are backed by NHS, with the NHS logo or NAFDAC(Nigerian agency for food and drug administration). Things like that and you will know that’s the site. Not just random posts by someone.

Interviewer: out of all these sources that you have received nutrition advice, which one would you think would be the most trusted and relevant.

Response: I think for me, it would be something given at the hospital. Why I said that is for me, these are professionals giving it to you so they can assess that it is good, it is true, it has been proven scientifically and it is something that has worked for people. So I think that getting the information from professionals in the hospital via verbally or written or anyone they give you. I think for me I believe more in it.

Interviewer: you’ve seen the eatwell guide in pregnancy, you were given the eatwell guide. What do you think about the guide?

Response: it is quite straightforward, simple. I think they made an effort to make it so simple and straightforward in a way that anyone can understand, even if you are not as educated as others you know. Or whichever group you fall into, you can easily get it. It has some pictures in it to simplify it. Its quite good, its brief, its quite useful, you can also find links to get more information to know more. There are lots of things on it so it is good for me.

Interviewer: Does your belief affect the way you eat?

Response: I know for some people it does but for me I feel everything is made by God for us to eat. Okay maybe that is also a belief because I think that some people will not believe that. So personally I don’t have any problem with any food except if I don’t like it not because of my religion. No, its just me, I will eat anything.

Interviewer: okay. What do you think are the risks and consequences of unhealthy eating?

Response: Hmm, I think basically it could have an adverse effect on your health and even the babys health and I think as a mother you have got responsibility not for yourself alone but also for the baby. So at times you really feel like eating junk. You feel like just finishing a bowl of ice cream and topping it with juice. For me, the challenge I have is cravings. I am craving anything that has sugar a lot. I know its not good but then I was really craving it. So I tried to take orange juice, sometimes I feel like taking coke, I was just craving. I said no. I don’t want to take it because I know its not good when you take too much of these things but then it was until I went for a check up and the nurse said that your sugar… when she did my urine, she said wow, you have been having lots of sugar, so I had to really cut down on the sugar and stop taking things that had sugar but you know I know that taking things that has sugar, fat, fatty things you know are not good for you when you are pregnant. So ive really tried my best not to take them.

Interviewer: so do you know any diseases that are attached to unhealthy eating apart from obviously the risks to the bay and you. Do you know any disease that is attached to unhealthy eating.

Response: I think im not sure but I think hypertension and diabetes. I think they are connected with unhealthy eating. There are so many others but I think that’s the only 2 I know of.

Interviewer: so do you know about the risks of obesity, do you understand what obesity is

Response: ofcourse yeah

Interviewer: could you explain what you understand by obesity

Response: I think obesity is when you are overweight, I mean extremely overweight, because there is also overweight then after overweight is obesity. And I know of course being obese is not good for your health because even without you being pregnant obesity isn’t good because it affects a whole lot of organs in the body I think and not to talk of when you have a baby.

Should I ask questions on BMI and at what BMI does the person consider herself to be overweight or obese- could flag up issues regarding perceptions of body sizes and knowledge about overweight and obesity.

A: So there’s this thing that they say that women retain weight after pregnancy. So lets say in pregnancy you gain let’s say 10kg, there’s always a tendency to retain that weight after pregnancy. Do you think that has an effect, consequences, or risks. That weight retention after pregnancy.

Response: im not sure about that because in my own case, it is the other way round. Ive lost weight. So I don’t think I can answer that. Because for me I actually used to think that when you get pregnant you are going to become fat and probably you will never lose that weight but in my case ive lost weight. I can even feel it, my cloths are so big on me. It was as if the pregnancy took away the fat in me. So for me it is a different experience so I don’t know if that is true.

Interviewer: so what do you think are the barriers to eating healthy? In your opinion and what do you think encourages people to eat healthy, what do you think stops people from eating healthy.

Response: ok I will start from what makes people to eat healthy. I think it is when it is readily available. If you can easily get something that is healthy. I think you are more likely to eat it. And again if ermm if its not that expensive you know. If something is good and its too expensive you might just be like let me skip it. So I think that the money factor is there. But for me personally, what has made me not to eat some foods that were considered healthy was because of cultural familiarity or cultural acceptance by me sha. The foods that I am used to you know. Not being able to get it and then im forcing myself to look for something close. So for me it was like you know, it was a cultural thing for me, not really money because I wasn’t even working but then my husband was telling me, what do you want? Tell me, I will buy whatever you want. But still it was just that I didn’t get what I wanted. So I will be like don’t worry, they don’t have what I want, so it wasn’t really about money, it was about availability for me. Being able to find what I consider healthy and ermm at a point I mentioned money factor, here fish is expensive in the United Kingdom, I don’t know why, but for me, it was expensive, sometimes I could spend £30 in a week to buy fish so to me, its just too expensive. So at times too, it could be money factor and you will just be like okay, let me go for something cheaper. I think that’s it for me.

Interviewer: that’s really interesting, the interview has been interesting. Talking about the things that actually drive us to make food choices in pregnancy. I don’t know if there is any other thing you would want to say.

Response: nothing really but let me say something, you know we have some African beliefs, I cant call it a fact, I will call it myths because it is not scientifically proven but then they will call me from Africa and say … don’t eat this particular food, its not good for you and the baby but then when I search for it online. It is good, when I search for it on the internet, you see the nutrient benefit but in Africa there are some foods that are considered not good for you to eat during pregnancy. And personally out of fear, not because I don’t know that they are wrong. Sometimes I say, I think what you are saying is wrong but I’m just like let me be on the safe side and then I don’t eat those foods for example my sister in law has told me not to eat plantain, she says when you eat plantain, something comes on the baby’s head or something. She just came up with something. I was like where did you hear this from. She insisted it was true. She also mentioned, like in particular cultures in Africa or even in some families, there are some foods that are forbidden in pregnancy in the family. I used to eat it sometimes but they keep saying it and you would wonder if they are right, what if they are right and I would regret it. So there are some foods I stopped eating based on African myth, not because they are fact. Not because they are true, just because it is the belief

Interviewer: and this African myths, they really come up in pregnancy. So prior to pregnancy there was nothing like that right.

Response: exactly prior to pregnancy, there was nothing like that, no one ever called me and said don’t eat this or don’t eat that. No one but as soon as they knew I was pregnant, they just started coming up with their ideas and beliefs and what they think is right for you. You know, they just start coming up with different things.

Interviewer: and subconsciously, these things affected your thought process

Response: exactly yeah, it did. So even if I used to eat them before but they kept saying it so even when im eating it, I will be like am I doing the wrong thing? I don’t know, so I just said let me not eat it as least to know that I have done everything that should be done you know. So that is it.

Interviewer: so even when you browsed and saw that these foods were good in pregnancy

Response: yeah, but because they said it would cause problems for you then … there was one food they said that if I ate my baby will have ringworm. You know they just bring something up or they say he’s going to have decolourization of skin. They just say something and you don’t want that to happen to your baby even if you are not sure that they are saying what is true but you know at times I think our families, the people around us, they tend to influence what we see as good or bad. So that’s just what I think.

Interviewer: did you have friends here in the UK as well that were influencing your decisions

Response: yes of course