

Background

Physical Activity Trends in the Somali Community

- Following the Civil War of Somalia in the early 90s, Minnesota received a large influx of Somali-identified people who eventually formed the largest Somali community in the country. The resettlement of the Somali community in Minnesota can be attributed to voluntary agencies (VOLAGs) that assisted in sponsorship and resettlement procedures for refugee camps in East Africa (Gleed, 2018).
- The Somali population, like other immigrant populations, were thought to be more healthy in their home country. Immigrant populations generally bear better cardiovascular profiles and lower rates of cancer than their native counterparts in industrialized societies (Gleed, 2018). However, with time spent in the United States, rates of obesity and cardiovascular-related illnesses become highest for immigrant populations (Cervantes et al, 2019).
- Characterization of the immigrant identity can generate stress due to cultural adjustments and linguistic barriers (Cervantes et al, 2019). As with all refugee populations, the health of the Somali diaspora has dissipated after their departure from the homeland.
- The health of the Somali people is particularly interesting to study because factors of their culture and religion impact ideas of physical activity and exercise for many.

Methods

Sample Population

- The inclusion criteria that was used to recruit participants were: those over the age of 18; Somali or Somali-American identified; Muslim-identified; and residents of the Twin Cities seven-county metro area.
- A total of eighteen participants were interviewed, ages ranging from 18-47, and an 8 to 10 ratio of males and females, respectively.
- These participants were recruited from different mosques, community centers, and college campuses that the research team had personal connections to. Additional participants were recruited using the convenience sampling method, through social media posts, and through flyers distributed across the several mosques and the University of Minnesota campus.

Study Design

- Semi-structured Interviews were conducted with the aim of better understanding how Somali individuals perceive physical activity.
- Additionally, interviews were used to comprehend how different factors such as modesty, religious identity, age, gender, and culture affect the exercise habits of Somali individuals.
- The interview script was carefully developed by the research team who are knowledgeable about the Somali community.

Data Analysis

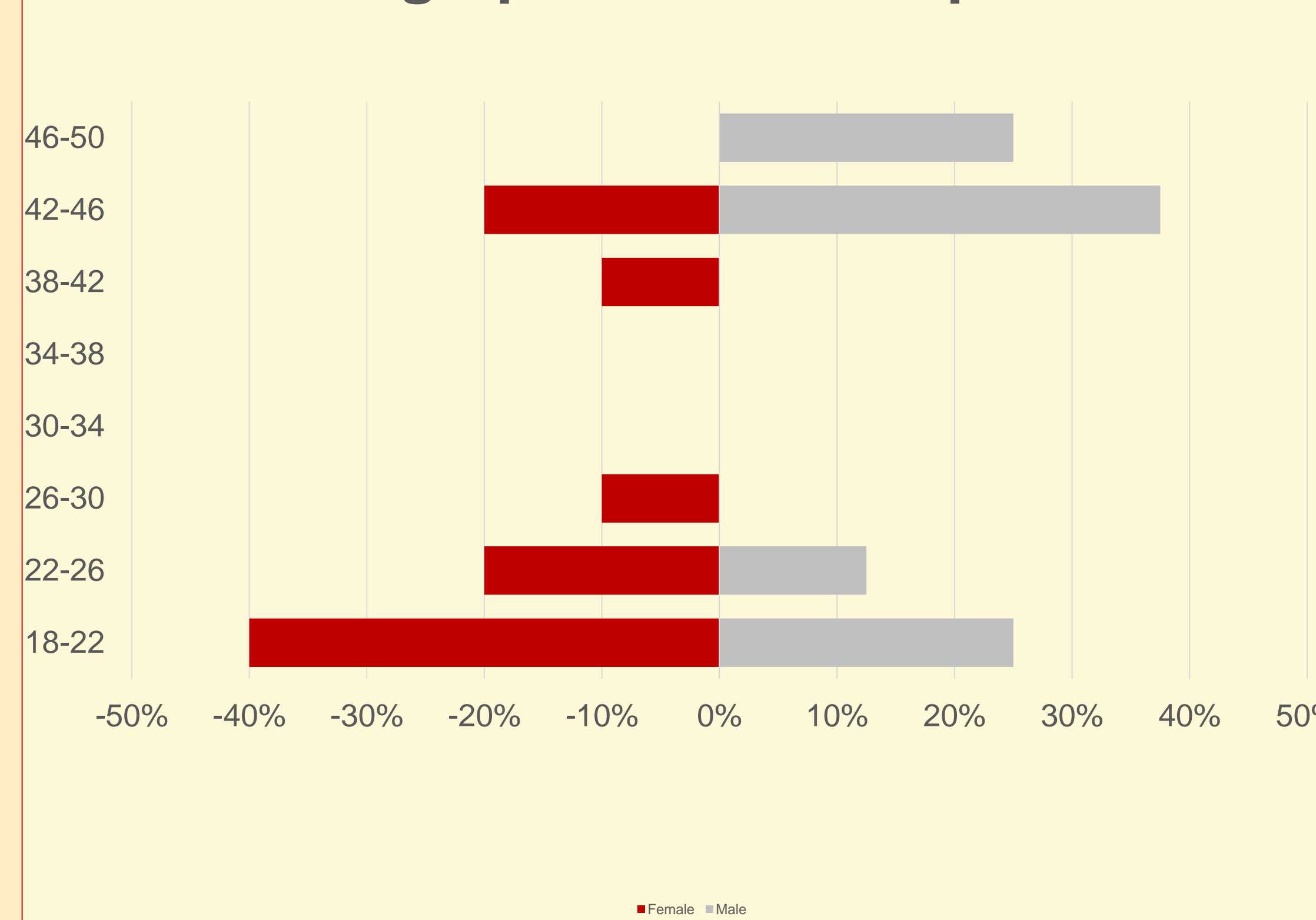
- Interviews were transcribed and coded using two independent researchers to reduce bias.
- The data were grouped into themes based on trends among the responses of participants, including some barriers and facilitators which were further categorized into sub-themes, as shown in the tables.

Results

Figure 1

| Theme: Facilitators | Summary | Quote |
|---|---|--|
| Positive impact on work | Some participants have indicated that they have felt a positive impact of exercising in their work. | "I also try to have some kind of exercise before I give my speech and whenever I don't do that, I don't feel well. But whenever I exercise before I deliver my speech, I actually feel more comfortable." [P1, 42 y/o male] |
| Social Support | Many participants have expressed that seeing family members or others in their social circles exercise encourages them to also exercise. | "When your friends are going to the gym every day, your kids, etc... you're going to say "Oh I need to go to the gym!" And everyone is just looking to be active and healthy" [P3, 45 y/o male] "If I see my family or friends exercising more, I would be way more motivated to exercise." [P5, 20 y/o female] |
| Positive effect on cognition | Many participants touched on the positive impact of exercise on mental health. | "There's an Arabic proverb that says "العقل السليم في الجسم السليم" that means that the right [mind] is found in the healthy body. So I believe that the more healthy you are, the more active and smart you become. That's what I believe and it encourages me a lot to do exercise." [P1, 42 y/o male] |
| Protection against health issues | Most participants expressed that their motivation to be physically active is to avoid diseases that could've been prevented by doing physical activity. | "\$400 medication vs \$10 exercise? The choice is very clear" [P17, male] |

Demographics of Participants



Implications for Health Promotion

- Seeing more women and girls in modest active wear.
- Lowering the cost of existing female-only gyms.
- Designating time for female-only gym use.
- Using community spaces as a potential place for female-only PA.
- Creating interventions that allow students to incorporate well-being with their studies.
- Creating on-campus initiatives that emphasize combining PA with studying.

Figure 2

| Theme: Barriers | Sub-themes | Summary | Quote |
|--|--|--|---|
| Modesty | Clothing Barriers | Many female participants have stated that wearing standard religious attire while doing PA in public gym facilities also seems to impact rates of physical activity. | "The gyms are both men and women and there's not like a women's section so you have to cover up, and when you do cover up, you can't work out that hard or too long because you get sweaty, obviously." [P7, 19 y/o female] "I am a religious person, I'm Muslim so when I try to go to the gyms there's no environment in which I can exercise however I want to. I have to wear a long dress and long stuff so there's no privacy at all." [P8, 40 y/o female] |
| | Inaccessibility of Female-only Gyms | Female participants have mentioned being uncomfortable when exercising in public facilities. | "If I did go to gyms, free-mixing between genders would be an issue. And that actually is a reason why I don't go to public gyms because it would make me wear revealing clothing and I'm not comfortable with that." [P2, 44 y/o female] |
| Competing priorities | Importance of providing for family | Several have said that the means of doing PA is accessible, but time seemed to be a barrier as it seems to clash with other commitments like school, work, supporting family members, etc. | "Exercise and doing stuff for your own self becomes like the last, last thing on your list" [due to being busy with familial responsibilities] [P13, 29 y/o female] "My community views physical activity positively, but their lifestyle—like feeding and taking care of their families occupies most of their time. And that is more important than anything else" [P16, 47 y/o male] |
| | Emphasis on school and work | Participants who are students have indicated that school and work occupies most of their time, leaving no time for PA. | "Between studying, going to school, working in the lab... it's like really hard to set a designated time for it, so it just kinda isn't in my priority. It just kinda gets shoved in the back of my mind." [P15, 20 y/o male] |
| | Importance of adapting to lifestyle changes | Participants have highlighted that they were more focused on adapting to changes in lifestyle, which ended up reducing rates of PA | "When I came here [to the US], I never used to think about exercise because I was more concerned about how to survive living here [in this new country]." [P12, 45 y/o female] |
| Cultural Differences Between Somalia and the U.S. | Lifestyle in Somalia vs U.S. | Some participants have indicated that Somalis have lived nomadic lifestyles in Somalia, which allowed them to be physically active. | "The Somali culture, they're naturally nomads. Just doing your daily activities is sufficient back home but I think here in America, you no longer have that same...you know, nobody is nomads here so the emphasis doesn't translate." [P15, 20 y/o male] |
| | Transportation differences between America and Somalia | Participants indicated that they felt that exercise wasn't needed because walking was their primary mode of transportation back in Somalia and Kenya. | "Here in the US, I drive my car every time but in my home country, I used to walk by foot most of the time. So, I didn't need to go the gym or somewhere else because I walk most of the time back home." [P1, 42 y/o male] "We didn't even need...you won't even see gyms there [East Africa] because life was all about walking" [P2, 44 y/o female] |
| Finances | Affordability of gym membership prices | For some participants, the prices of gym memberships seemed to be a common barrier for going to gyms. | "There is not much of a cultural difference, the determining factor is financial. When the gas prices went up, I would really sympathize with people who are living with a fixed income. Under those conditions, it is hard to put money towards something like a gym membership." [P17, 47 y/o male] |

References

- Cervantes, Richard C., et al. "Examining Difference in Immigration Stress, Acculturation Stress and Mental Health Outcomes in Six Hispanic/Latino Nativity and Regional Groups." *Journal of Immigrant and Minority Health*, vol. 21, no. 1, 2018, pp. 14–20., doi:10.1007/s10903-018-0714-9.
- Singh, G. K., & Siahpush, M. (2001). All-cause and cause-specific mortality of immigrants and native born in the United States. *American journal of public health*, 91(3), 392–399.