

Understanding Gambian Immigrant Perspectives on Home Diet and Integration in
Columbus, Ohio

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This thesis titled
Understanding Gambian Immigrant Perspectives on Home Diet and Integration in
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Abstract

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This thesis is a qualitative case study that focuses on Gambian immigrant mothers residing in the city of Columbus, Ohio. Ten participants were interviewed to assess their perspectives and experiences regarding Gambian diets in comparison to local American food with respect to perceptions, identity, and integration. The results of the study show that Gambian immigrant mothers in Columbus hold positive perceptions of Gambian food due to culture and identity. Additionally, the study finds that health and integration factored into the food and diet choices of participants. In conclusion, a major takeaway of the study is that Gambian immigrant mothers maintain a strong connection to their heritage through food and that this is handed down to future generations.

Dedication

I dedicate this scholarly work to my family, friends, and late mother. My late mother, Aji Amie Willan passed away on November 28, 2019 in The Gambia while I was undertaking studies at Ohio University. I pray for my mom to continue to rest in eternal peace.

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Chapter 1: Introduction

Background

Personal Reflection

The Gambia is endowed with the River Gambia, and fish is a major source of protein for its citizens. As a result, many Gambian dishes are prepared with fish. Comparatively, the Gambian diet is similar to diets in other West African countries that have rivers. The country's traditional dishes are deeply rooted in cultural values and are prepared using domestic ingredients such as rice, vegetables, fish, and meat. However, due to the massive demand for rice, vegetables, and flour, the country imports some of these items as well. Generally, food ingredients produced in The Gambia are fresh and organic. Meat is the second most important source of protein in Gambian dishes. Meat is produced from domesticated animals such as cattle, sheep, and goats, and these animals graze on grass fields. Additionally, chickens are raised locally, and they are readily accessible at local markets. These animals are not fed with any genetically modified food components or given medical injections for early maturity. Due to the availability of these fresh food ingredients, Gambian dishes are always flavorful.

Prior to my departure from The Gambia for my graduate education, I observed that most Gambian immigrants staying in either Europe or America bring back numerous Gambian food items and ingredients after visiting home. This piqued my interest, and when I asked them why they explained that it is cheaper to buy them at home compared to international markets in the West. Other explanations offered are that some Gambian ingredients are not available in Western markets or stores. In their opinion the only

practical way for them to eat Gambian food in America or Europe is to bring along some home ingredients upon their return.

Some individuals in The Gambia, including myself before travelling to the US, believed that food in America, especially fast food, is fatty and makes people gain weight. Moreover, some Gambians believe that American food is not as tasty and not as natural as traditional Gambian food such as Super Kanja (Okra soup), Yassa (fish or chicken stew), Benachin (fried rice served with fish or meat) or Domoda (peanut butter soup).

Culturally, one consideration that stands out to me as I reflect on the Gambian diet is that Gambians in general do not eat outside of the home, such as in restaurants or from street vendors. In fact, married couples only eat food prepared in the household. Such personal attitudes and experiences, as well as my observations of other immigrants, have shaped my attitudes and opinions about American food and have helped me to prepare myself as an international student before coming to the US.

Because of my preconceptions about American food I spend a significant amount of money buying fresh fish, smoked fish, and other ingredients to bring with me in order to prepare Gambian dishes while abroad. I found that these foods and ingredients from home helped to alleviate homesickness during my first months in Athens, Ohio because preparing and eating Gambian dishes made me feel more connected to home.

Conversely, whenever I prepare Gambian dishes with meat, chicken, and vegetables from American “big box” stores (such as Walmart and Kroger) they always taste different, no matter the amount of Gambian ingredients I use in the recipe. Such

personal experiences gave occasion for me to think more deeply about the relationships between food, identity, and integration as an immigrant in the US. For example, seen through the lens of culture, many Gambian dishes are associated with certain religious holidays, naming ceremonies, and rituals. For example, during Tobaski and naming ceremonies Gambian families typically prepare Benachin, a fried rice dish cooked with meat or fish.

With time, as I ran out of the Gambian ingredients I brought from home, I began substituting “American” ingredients. As I would soon find out, such an experience is part of the integration process to US society as it signifies the mixing of Gambian and American recipes and ingredients. Now, instead of cooking fresh fish as my main source of protein, I instead use meat and chicken when I prepare Gambian dishes. In 2016/2017, during my first pregnancy, switching these proteins aggravated issues associated with my pregnancy and I could not eat meat or chicken anymore.

Part of my coping strategy in dealing with these dietary challenges was to spend hours on YouTube searching for Senegambian cooking tips. Since most Gambians eat a lot of spicy food, such as Fish Pepper Soup, I miss it quite a bit, and I had to watch a Gambian woman cooking on YouTube to be satisfied. This routine habit helped alleviate my cravings for Gambian food. Nevertheless, I find that the lack of Gambian food and ingredients sometimes results in real sadness and it became habitual for me to complain about missing Gambian food. But miraculously, one day I was informed that there are some African stores in Columbus where one can purchase Gambian ingredients. As a result, I began driving to Columbus to purchase Gambian ingredients.

Subsequently, I now find it amazing when I cook a typical Gambian dish because it makes me feel happy and connected with my culture and identity as a Gambian residing in the US. As a result, I think of food as part of a long-standing cultural tradition that has become very important for my life. However, as an immigrant I tried to adapt to my new surroundings (America). Given my own personal experiences as a Gambian immigrant, I believe that food can often become an introduction to a new culture.

Purpose of the Study

The purpose of this qualitative case study is to understand the experiences of Gambian immigrant mothers as it relates to home diet and integration in the city of Columbus, Ohio. Therefore, the central focus of this study is to understand the experiences and perceptions of Gambian immigrant mothers regarding dietary attitudes, preferences, and integration in the city of Columbus, Ohio. This minority group is an understudied group and its voice is not well represented in the global body of knowledge. Moreover, the study seeks to empower these women by telling their stories and describing their lived experiences relating to home diet and integration in a foreign country.

Research Question

Central Research Question

1. What is the nature of Gambian women immigrant experiences with respect to home diet?

Sub-Research Questions

- A. What are their perspectives when it comes to home diet as compared to indigenous American food?

B. What are the identity and culture linkages to home diet among Gambian immigrants?

C. How do they access home diet and integrate home diet with domestic food?

Objectives of the Study

- 1: To understand the experiences of Gambian immigrant mothers with regard to dietary attitudes and choices living in the United States, particularly in the city of Columbus, Ohio.
- 2: To document the challenges faced by mothers with respect to home diet while living in the United States.
- 3: To capture and give voice to Gambian immigrant mothers living in the United States.
4. To understand how Gambian women immigrants residing in Columbus access home diet and integrate home food with domestic food.
5. To understand the relevance of religion, knowledge, and health as it pertains to home diet among Gambian women immigrants living in Columbus, Ohio.

Significance of the Study

The study is significant because it affords a minority immigrant group in the United States (Gambian mothers in Columbus, Ohio) the opportunity to narrate their experiences on home diet and integration while living in the United States in contrast to their home country as done by other studies (Abdi, 2019; Bloom, 2011; Lakika and Drimie, 2019; Meyara, 2017; & Mukhiar, 2015). Second, the study addresses a research gap in immigration studies regarding home diet as a global phenomenon that continues to affect the lives of millions of immigrants. Finally, the study is significant because it contributes to the body of knowledge that can be useful for future researchers since it

provides in depth knowledge on the complexities and ironies that characterize the discourse surrounding immigrants in the 21st century.

Overview of the Research Design

The research is a qualitative case study that focuses on Gambian immigrant mothers residing in the city of Columbus for a deeper understanding of their experiences on home diet, identity, and integration in the City of Columbus, Ohio. Ten participants participated in the study to reflect on their experiences regarding their home diet, American food, identity, and integration in the City of Columbus. Field research through interviews was used as the primary data collection method. The results of the study, discussions, and conclusions of the study are also reported in the study.

Limitations of the Study

As Pryce (2016) indicates, nearly all research entails limitations. First, the study could not guarantee representation of all ethnic groups and regions in the Gambia among the immigrants' communities living in the city of Columbus, Ohio (Winchester, 1996). Secondly, as noted by Pryce (2016) because the study centers on a sample size,

“the findings of the current study may not be generalizable” to the entire Gambian community or to other sub-Saharan African immigrant communities in the United States, even if most sub-Saharan African societies share a similar history of postcolonial history and have similar cultural norms and practices (Pryce, 2016, p. 483).

In a similar way, because this study focuses exclusively on immigrant Gambian mothers residing in the City of Columbus, the study's findings cannot be generalized among the African immigrant communities in the City of Columbus, Ohio.

Definition of Terms

Assimilation

According to de-Graft et al (2019), assimilation is the “adoption of receiving culture and rejection of heritage culture” (p. 23)

Acculturation

According to de-Craft et al (2019) “four acculturation categories have been identified: (1) assimilation (adoption of receiving culture and rejection of heritage culture); (2) separation (rejection of receiving culture and retention of heritage culture); (3) integration or biculturalism (adoption of receiving culture and retention of heritage culture); (4) and marginalization (rejection of both the heritage and receiving cultures)” (p.23)

Literature Review

Immigrants and Home Diet Perspectives

As the study is about Gambian immigrants’ experiences on home diet and indigenous food in Columbus, Ohio connects well with cultural geography since it is about the relationship between human societies and their environment (Price and Lewis, 1993). Similarly, the study is connected to cultural geography as alluded by Mitchell (1995), the author posits that the concept of cultural geography is a terrain of unexamined culture of people in order to developed their cultural understanding, differentiating it with other people, promoting representation of cultural narratives, and production of their way of life.

The subsequent sections of the literature review covers understanding low participation in health services, the diverse population, the role of parents, and the food culture of immigrants' communities. One of the ways to understand migrant experiences is by exploring perspectives on their lived experiences in the United States. As a result, the objectives of a series of studies, particularly one by Albrecht and Upadhyay (2018), were focused on:

Capturing and understanding three Somali mothers' perceptions of science would shed light on how science content and home connections would help Somali students to learn science in US schools; how Somali mothers saw science as empowering to Somali girls and their future lives; and what tensions and challenges did Somali mothers perceive between learning science and Somali culture and practices (p. 605).

A second study by Buseh, Kelber, Stevens, and Townsend (2017) cited Bates, Quinn, Killion, et al. (2011) and Schmotzer (2012) to explain that the "the ability of genetic researchers to assess and advance the growth in genetic science is purported to be hindered by low participation rates of ethnic minority populations in health services research" (p. 2). In addition, it is vital to study ethnically diverse populations or underrepresented groups where biographical information on them regarding food or essentials are very limited (Kelber, Stevens, and Townsend, 2017; Withall, et al., 2011). Furthermore, many studies conducted in Australia demonstrate the significant role that parenting and caring of underrepresented and underserved minority communities through food and provision of essentials have on their children's learning with regard to science,

mathematics, and literacy studies (Albrecht and Upadhyay, 2018; Axford, 2007; Hagiwara et al., 2007; Sylva et al., 2008; Van Voorhis, 2011).

Similarly, Garnweidner, Terragni, Pettersen, and Mosdol (2012) highlight what food means to immigrants. For example, when participants are explaining or talking about the origin of their food culture, they could say, “our food” or “we eat,” whereas they used “their food” or “they eat” when talking about the Norwegian food culture (p. 338). In terms of how they perceived host country food, participants in the study perceived the food of the host country as “tasteless and boring,” which was linked to the absence of spices in immigrants’ host countries (Garweidner et al., 2012, p.338). Nonetheless, Garweidner et al., (2012) discuss the perspectives of participants in the study surrounding the healthiness of food in their host country compared to the food in their home country. For example, some of the participants described the host country’s food culture as “healthy” and sometimes even “healthier” than their original food because it was less “heavy” and contained less oil and sugar. Conversely, some participants described the food of the host country as lacking in nutritional value. For example, they felt that boiling vegetables made them less nutritious and more watery. Instead, they preferred to fry vegetables to maintain their nutritional value and crispness (Gardweidner, et al., 2012, p. 338).

Home Diet: Identity and Cultural Representation

This section of the literature review examines migrant communities and food, food as a symbol of trust, food culture and language relationships, dietary representation, and food symbolism of knowledge. According to Ray (2017), there is growing attention

in one of the sub fields of food studies, “cultures of consumption,” where its shown that taste is a profoundly important aspect of food culture in urban immigrant communities (p. 42). Conversely, the author argued that the narratives of taste in some circles are problematic because “the discussion on good taste in sociology shows that it flows from the top to the bottom, along inclines of nation, class, race and ethnicity, tightening the vice of capital, cultural capital, and culinary capital” (p. 43). Additionally, Ray (2017) asserts that “most social theorists see it fit to exclude immigrant food producers from their analysis of the cultural politics of taste, because they cannot hear them in the gastronomic discourse they analyze” (p. 43). Clearly, these findings demonstrate that it is imperative to bear in mind that “sometimes aesthetic evaluations of food have nothing to do with the nature of the food or the skill involved in producing it.” (Ray, 2017, p. 44). A turning point in the discourse of immigrants had occurred “by the 1970s, [where] at the latest, immigrant entrepreneurs had turned their familiar foreignness into an object of taste” (Ray, 2017, p. 46). In line with this shift of narrative and limited representation, because “western culture, even high culture, was never a white, Anglo, monologue,” it becomes clear that “subordinated subjects such as slaves, women, and Ethnics could not be properly excluded, even from the second order pleasure of art” in regard to the “first order pleasures of food, shelter, and everyday decoration” (Ray, 2017, p. 45).

In a similar connection, House et al. (2014) discovered that trust in the food system among immigrants living in Australia depends on "unquestioning reliance or 'blind faith'" in their own food (p. 246). Consequently, this matter is even more complex when it comes to immigrants “because of the unfamiliarity with language and cultural

mores of the host community” (House et al., 2014, p. 246). In summation, the study found that changed eating habits are the result of external and internal factors affecting families and food availability (House et al., 2014). The internal factors related to eating habits include family members such as partners, children, or grandchildren who influence specific food habits of immigrants’ communities (House et al., 2014). On the other hand, the external factors shaping the eating habits of immigrants’ communities are influenced by “television (TV) cooking shows and the influence of Australian friends” (House et al., 2014).

Language also plays a central role in food choice among immigrants. Indeed, House et al (2014) mentioned that “a lack of more balanced information in user-friendly, culturally appropriate language means that poor food choices may result” (p. 249). In a similar narrative, Martinez (2013) asserts that “the modernization of food production and consumption represents transnational processes that modernize food acquisition, production, and consumption across Latin America and the US, but not necessarily at the same pace” (p.122). Thus, Martinez (2013) defines modernization of food as “the use of globally- or locally produced processed food to prepare meals or the consumption of food prepared outside of the home” (p. 123). This is significant because “family cooks utilized processed food to prepare their ‘ethnic dishes’ without being conscious of it” (Martinez, 2013, p. 123). Furthermore, Martinez (2013) explains that in Latin America, most of these families’ food is a combination of “homemade meals prepared with processed food and fresh ingredients, national dishes, and fast food” (p. 125). This makes it important to understand Latino immigrants’ “pre-immigration diets” and the need to assess them “if

we want to discern how dietary changes while living abroad affect health” (Martinez, 2013, p. 125).

Moreover, Blanchet (2017) revealed that the choice of home diet of immigrant mothers residing in Canada is hampered by a “lack of time [that] seemed to be a factor that encouraged eating Canadian foods instead of home country foods” (p. 841). This explains why “children undergo dietary acculturation faster than others” in immigrants’ families (Blanchet, 2017, p. 844). Thus, the study recommends that the “school food environment needs to be enhanced to foster healthy and inclusive eating habits for all children” (Blanchet, 2017, p. 844). Remarkably, the study argues that food served to children needs to be healthier as opposed to highly processed foods. Furthermore, the study discovered that the fast-food outlets that were frequently used by immigrants in Canada served only “10 foods drawn from African and Caribbean countries” (Blanchet, 2017, p. 842).

Finally, Walz et al. (2017) highlight the reflection of Liberian immigrants residing in the US on their “cultural perspectives and knowledge, attitudes, and practices surrounding bushmeat importation and consumption” (p. 2095). In fact, the study indicated that thousands of pounds of bushmeat are illegally imported into the United States annually, mostly from West Africa (p. 2095). One of the participants in the study attributed consumption of bushmeat to their culture:

So, it goes back to the cultural thing, like she said. The taste and that which you're used to. I mean it's how you're brought up, and all that stuff. It's just something

like you go away to school and you just miss your mom's cooking. So that's just what it (Walz et al., 2017, p.2096).

Integration: Home Diet and Health Considerations

Studies show food and health linkages of immigrants, food health risks, food and health behavior, and avoidance strategies of sickness from home diet as integration factors (House et al, 2014; Martinez, 2013). In the conclusion of a study conducted by Martinez (2013), it emphasized that “researchers may not be able to decide whether acculturation produces healthier or deleterious diets because some Latino immigrants intentionally abandon the consumption of salty snacks, carbonated beverages and fast food living in the US” (p. 125). As a result, one of the participants in the study was described as such: “Mariela’s adherence to a low-carbohydrate diet also transformed the commensal practice of *comiendo bien*” (p. 127). This observation signals that the “family’s pre-immigration experiences reveal that similar human, non-human, economic, and discursive elements are present in both San Francisco and Latin American localities that can shape dietary practices” (Martinez, 2013, p. 128).

Similarly, House et al. (2014) discovered that participants in their study perceived foods as risky especially as they have concerns for its freshness and consider it as “a foreign matter being in the food” (p. 248). Profoundly, House et al (2014) contend that a country’s choice of food also matters greatly when shopping for food items since many participants in the study regard it from its country of origin, “with particular attention paid to avoid products from China”. (p. 249). For example, one of the participants indicated that, “I will have a look, if there is food made from China, I will not buy it

because there is a lot of frightened about Chinese food.’ (Vietnamese participant, 22 years migration” (p. 249).

Furthermore, according to Dondero, Van Hook, Frisco and Martin (2018), many quantitative studies miss “the contextualized dynamics of the health assimilation process because they generally assess it across years or immigrant generations,” making a qualitative approach viable to address such as research need (p. 602). Similarly, many studies argued that the ways that families, schools, governmental institutions, and the food industry structure children’s food options puts immigrants’ experiences at varying pressures and influence what they eat or their eating habits (Nestle, 2013; Story et al., 2008 ; Dondero, Van Hook, Frisco and Martin, 2018). Remarkably, Dondero et al. (2018) found that the “Mexican children in immigrant households eat the majority (67%) of their food during home meals, followed by “other” (16%), school (15%), and restaurant meals (2%)” (p. 608). In conclusion, Dondero et al. (2018) asserted that “three important contributions, namely, social institutions are critically important for dietary assimilation; dietary assimilation is not a smooth, unidirectional process; and unhealthy eating does not necessarily accompany food acculturation” (p. 612). Furthermore, Dondero et al (2018) contend that “institutions shape this process, and formal nutritional regulation helps ensure that food acculturation is not always synonymous with unhealthy eating” and the immigrants are no exception to it (p. 614). Consequently, these authors argued that the “interplay between individual health behaviors, social institutions, and the daily, microlevel dynamics that undergird the larger arc toward health assimilation across generations” (Dondero et al., 2018, p. 614).

Moreover, in Walz et al. (2017), one of the participants explained how bushmeat is treated in order to avoid sickness or diseases:

“When you kill the bushmeat in Africa, before you even eat it, it goes over the fire, they dry the meat, and there it goes in the pot and we are cooking it in Africa—we are not cooking for five minutes. I don’t care how the virus or bacteria is, when you put it in the fire it will not survive for a minute. When we start talking about Ebola, well, Ebola did not come from eating bushmeat, but the Ebola virus might have been on the meat, but when you put it on the fire, I don’t think that the Ebola virus could survive.” (Walz et al., 2017, p. 2096).

Further, in addition to using spices and herbs in their home diet, Anderson et al (2019) revealed that Arabs, Somalis, and Swahili speakers use species and herbs “to treat colds and influenza and to treat other illnesses” (p. 243). Precisely, due to these benefits, a participant from Anderson et al (2019) indicated that “if I buy healthy foods for everybody the food finishes in 10 days but what I need is food for a month” (p. 243).

Immigrants Food Diet Challenges

Home Diet and Integration

One of the emerging dilemmas in this review relates to how immigrants access home food and health services in their newfound homes, the alteration of their eating habits, and the preservation of their home food. Notwithstanding the opportunities presented by the existence of structures, institutions, networks, and policies to advance African migration in the U.S., the migrants still face challenges of health and food as they relocate. Indeed, migrants encounter many obstacles in their newfound destinies;

according to Bloom (2011), “childcare is just one of many problems associated with a system of harvesting dependent upon migrant farm labor” (p. 324). Thus, healthcare access and provision among immigrants remains a primary concern.

Another profound challenge immigrant’s in the United States must resolve involves food. A major observation in the discourse shows that, irrespective of where immigrants are located, they struggle with the culture of their home diet. In a study that focuses on the Congolese living in South Africa, Lakika & Drimie (2019) posited that the “challenge facing people who migrate is that they seldom find their homeland traditional dishes and are compelled to adapt to the new environment and to new eating patterns” (p. 14374). This signifies that the environment plays a key role in people’s food choices, regardless of where they live. As noted by Lakika and Drimie (2019), “the Democratic Republic of Congo consists of thousands of square kilometers of evergreen lowland forest where most people are engaged in a subsistence economy through hunting, fishing, farming and breeding activities” (p. 14377).

Home Diet and Identity

Identity carries significant meaning in the home diet among immigrants. Lakika and Drimie (2019) states that due to “dietary health meanings for Asian Indians living in the United States mentioning that ‘community members’ dietary health meanings operate discursively through a dialectic tension between homogeneity and heterogeneity situated within culture, structure, and agency” (p. 14376). Therefore, diet, food and health services are influential factors in immigrants’ lives and identities. Furthermore, Lakika and Drimie (2019) claimed that “another important element of the Congolese landscape is

the presence of fruit trees. Specifically, the inhabitants of Kinshasa, the capital of Democratic Republic of Congo, benefit from ‘the fruit trees that bring shade in a city with warm climatic conditions and provide food and income’” (Lakika and Drimie, 2019, p. 14378).

Additionally, Parasecoli (2014) indicated that “the basic traits (sensory characteristics, edibility, familiarity, palatability)” immigrants may employ when trying new foods are never nurtured in isolation because of their various individual experiences and memories pertaining to food in their host countries (p. 419). Moreover, Parasecoli (2014) stated that many of these immigrants “especially those who are first generation, maintain close connections with their place of origin through relatives, friends, and remittances, participation in events and special occasions, and occasional trip” (p. 421). In conclusion, Parasecoli (2014) asserted that “the rediscovery, protection, and promotion of “traditional” foods and foodways, together with the construction of historical narratives around them, actively contribute to the creation of a sense of a shared experience among migrants” (p. 425).

In addition, Okafor, Carter-Pokras, and Min Zhan (2016) discovered that immigrants who reside in the U.S. and allow dietary acculturation are making unhealthy dietary changes that will affect them in the future. Ultimately, this is a challenge for immigrants with financial constraints for adopting dietary behaviors that ensures healthy life. In particular, the authors asserted that African immigrants, because of their low economic status structurally, are compelled to work multiple low-paying jobs and work

more than they did in their native country in the initial years of settling in the U.S.—implying that healthy choices of food may be affected.

Evidently, as it applies to some immigrant groups in the U.S., immigrant groups' identities are different than the host countries. Specifically, Mukhiar (2015) states that “being a sojourning Malay in the US would presumably cause an identity disparity since Malaysians, as citizens of a developing country, have a significantly different culture compared to Americans” (p. 46). As a justification of the study, Mukhiar argues that “it is important to examine Malay sojourners' perceived identity discrepancy and symbolic consumption as a way to negotiate their identity” (p. 46). This study outlines the potential to replicate and expand the research to the diverse immigrant communities in the United States in order to understand their unique experiences and coping mechanisms – an endeavor the present study seeks to undertake with respect to the Gambian community in Columbus, Ohio.

Religion and food have a significant association. Accordingly, Ezme (2017) claims that Islam dictates certain religious principles with respect to food. For instance, most Muslims, along with Jews, do not eat food prepared with or containing pork (p.743). Similarly, most conservative Muslims abstain from the consumption of alcohol and food involving the use of any kind of alcoholic beverage. Only 30% of families in the study noted using special foods for holidays and celebrations (p. 743). Generally, within “Muslim culture lamb, beef, and chicken are considered under red meat. Fish in several forms and varieties is a favorite delicacy with people” (p. 743). Moreover, in line with

Islamic culture, dining in restaurants is not common among Muslim immigrants (Ezme, 2017).

Finally, food choice is of importance to immigrants; according to Parasecoli (2014), home food choice represents their cultural norms and values. To explore this, the author invokes the following question:

Why are certain food objects, behaviors, norms, and values from their places of origin maintained, more or less transformed, to become important points of reference in the formation of a sense of community and belonging, while some disappear and others resurface only after periods of invisibility? (p. 415).

In response to this provocative thought, Parasecoli (2014) discovered that “food is as exclusive a human behavior as language’ (p. 415). In citing Lévi-Strauss (1978), Parasecoli (2014) claims that the paper “pointed out that cooking, it has never been sufficiently emphasized, is with language a truly universal form of human activity: if there is no society without a language, nor is there any which does not cook in some manner at least some of its food” (p.416). This research demonstrates that, as an element of cultural heritage, immigrants’ choices involving home food are of as much importance to them as the use of their native language.

Culture and Home Diet

Home diet carries cultural symbolism within immigrants’ communities. Mukhiar (2015) explained the existence of “various consumer culture studies using consumer culture theory” that focuses on the “ways consumers use consumption to build a sense of self, especially those who travel away from their homeland and are adjusting to a foreign

land” (p. 46). Furthermore, Mukhiar (2015) posits that “one of the methods used for identity stabilization is symbolic consumption, whereby the individuals would resort to alterations in their buying and consumption habits” (p. 46). This assertion implies that if immigrants are obtaining their usual home food, they may resort to searching and making the requisite connections to access this food.

Additionally, acculturation is another phenomenon that holistically affects immigrants living in the United States. According to de-Graft et al. (2019), there are four acculturation categories including: “(1) assimilation (adoption of receiving culture and rejection of heritage culture); (2) separation (rejection of receiving culture and retention of heritage culture); (3) integration or biculturalism (adoption of receiving culture and retention of heritage culture); (4) and marginalization (rejection of both the heritage and receiving cultures)” (p. 23). These categories of acculturation are significant aspects of immigrants’ experiences that require study, especially in the United States where there is an expansive representation of immigrants from across the globe, particularly of African countries such as the Gambia.

Some of the cultural narratives of immigrants’ experiences can be problematic, as Massey (2015) explains that some of the immigrant experience narratives are not grounded in reality, thus, the author hinted that “the social construction of the Latino Narrative had profound consequences for the Mexico-U.S. migration system” in their lived experiences (p. 9). In addition, Massey (2015) explains that the “militarization of the US border with Mexico that began in 1986 with the passage of IRCA, and especially with the launching of Operation Blockade and Operation Gatekeeper in 1993 and 1994”

has diverted the flows of undocumented migrants away from well-traveled routes in the urbanized areas of San Diego and El Paso. Thus, this author posits that immigrant communities must move into unpopulated desert territory between these two sectors with realities to cope with their livelihood.

Therefore, food culture and adaptation are significant transitional phenomena migrants encounter. With respect to these issues, Ezme (2017) discovered the extent to which Muslim families' food culture changed, or did not change, after they came to the USA. The study found that 70% of the families in the research did not have any problems maintaining their traditional/religious foods (p. 752). Similarly, Ezme (2017) discovered that in terms of how they cook at home, Muslims immigrants' culture in the home did not change, as in Islamic tradition women often cook at home and males provide the money (p.749). Moreover, food markets and transport play crucial roles in the lives and livelihoods of immigrant communities. Ezme (2017) discovered that all the families that participated in the study go to Muslim markets at least once a month. Also, the study noted that 43% of the families go at least twice a month, and 37% of the families go to Muslim markets every week (p.754). Additionally, the study found that "thirteen of thirty families in the research buy less than 21% of their food from Muslim markets (p.754). Lastly, Ezme (2017) discovered that "almost 30% of the families buy 30-50% of their foods from Muslim products and only three of thirty families buy more than 70% of their foods from the Muslim market" (p. 754). Regarding the role of transportation in accessing food, Ezme (2017) explains that "83% of the families in the research have their

own car. Only three of the families do not have a car because they do not have driver license, but they have a plan to get it and buy a car” (p. 755).

Furthermore, Parasecoli (2014) argues that communities of immigrants in the study somehow emerged around individuals that find themselves eating in specific places that offer foods they are familiar with and avoid any foods that are prepared from leftover foods and showcase as modern food served from some of the these host country restaurants. It becomes clear that immigrants prefer eating from restaurants serving immigrants’ home food and ingredients.

Taken together, this research indicates that diet acculturation is well grounded in immigrants’ discourse; according to Garnweidner, Terragni, Pettersen and Mosdol (2012), “based on the participants’ narratives, three possible patterns of dietary acculturation were conceptualized: strict continuity, flexible continuity, and limited continuity of the original food culture” (p. 338). The first phase of strict continuity pertains to when participants preserve their original food culture at every eating event irrespective of time of day, day of the week, or special occasions, as the following statement from a participant exemplifies: “I do not eat Norwegian food. I always eat Egyptian food (Egyptian 1)” (p. 338).

Added to that, Garnweidner, Terragni, Pettersen and Mosdol (2012) write that, “the second pattern, adhered less strictly to their original food culture while simultaneously adopting some of the host country’s food culture (p.338). For instance, in the words of one participant: “It varies, we can also prepare Norwegian food, if I prepare Pakistani food for several days, then it’s time to vary (Pakistani 3)” (p. 338). The third

pattern, limited continuity, implies adoption of the host country's food culture and maintenance of their original traditions only for special meals served on special occasions. In this context, participants continue their original food culture at religious festivals and social gatherings, as the following quotation illustrates: "At Ramadan, only, we prepare our food from our home country (Iraqi 1)" (p.338).

In their findings, Garnweidner, Terragni, Pettersen and Mosdol (2012) make an important discovery by stating in findings of the study that "immigrants valued preserving aspects of their original food habits" (p. 339). Therefore, nutrition communication may be more effective when it considers aspects of cultural sensitivity. Based on a concept analysis study, Foronda (2008) defines cultural sensitivity as "employing one's knowledge, consideration, understanding, respect, and tailoring after realizing awareness of self and others and encountering a diverse group or individual" (p. 340).

Finally, Okafor, Carter-Pokras and Min Zhan (2017) contributed to the understanding of acculturation and home diet by investigating "the potential association between dietary acculturation and current SRH among African immigrant adults and to describe changes in consumption of selected foods and beverages pre- and postmigration" (p. 227). The study found that "immigrants generally experienced moderate dietary change since arrival in the US" (p. 229).

Coping Mechanisms: Food, Identity and Culture

Immigrants often employ identity, cultural and food coping strategies to address some of the challenges they face in the United States. One of these strategies is identity

through association, as exemplified in the spirit of Pan Africanism, according to Osirim (2018). Pan Africanism facilitates the formation of associations that are in the common interest of Africans. For example, some “associations are focused on women’s issues, while others address issues of the community as a whole,” including food needs of immigrants (p. 783). Indeed, this research identified fascinating success stories along these lines that are worth noting:

Facilitating family access to health and social services, with a special focus on women, children, and the youth; promoting economic development; working with the School District of Philadelphia in alerting them to some of the traumatic experiences of African immigrant and refugee children, e.g. Sudanese refugees and providing referrals to free or reduced fee legal services for immigration issues (Osirim, 2018, p. 783).

Regarding cultural coping strategies, Massey (2015) posited that between 1942 and 1965, Mexican immigrants in the US maintained their cultural behaviors, including eating their own native food, as a coping mechanism for the challenges of being away from their country. However, Massey (2015, p. 7) also indicates that from the beginning of the 1980s through the 1990s, the stable pattern of migration behavior shifted culturally. To expand upon this idea, the author explains that Mexican immigrants’ rates of return start to reduce drastically as their settlement rates begin to increase. Further, these immigrants began flowing to new destination areas than the traditional routes and men stayed away longer. This led to their women and children increasingly joining them in their new settlements. In short, the author concluded that “between 1986 and 2006

Mexican migration shifted from a circular flow of male workers going to a few states into a rapidly growing settled population of families in 50 states” (Massey, 2015, p. 7).

Lastly, with respect to home food as a coping mechanism, it has been observed that cultural sensitivities are associated with home food. Okafor, Carter-Pokras and Min Zhan (2016) claim that “professionals working with African immigrants at the individual and community levels can help educate them about healthy food choices and modifications to their traditional African diet” (p. 233). In addition, the authors recommend increasing cultural competence among these trainers as they tackle home diet issues with immigrant communities.

Gaps in the Scholarship

As implied by Yeboah (2018), investigations of the experiences of African migrants is needed to add to scholarship that is predominately focused on the experiences of those in the Eastern seaboard destinations living in a vast array of Midwestern states; the present study seeks to address this gap. Moreover, Areepattamannil, Freeman and Klinger (2018) indicate “that there is scant qualitative research exploring the perceptions of adolescents about the factors influencing their engagement and performance in school” (p.384). Similarly, the study opens a window of opportunity to study issues faced by immigrant adults, especially mothers. The present lack of research in these areas demonstrates the need for scholarship focused on Gambian immigrant migrants residing in Columbus, Ohio.

Methodology

Research Design

The research design of this study is a case study that seeks to understand Gambian immigrant mothers' experiences as they relate to home diet and integration in the city of Columbus, Ohio. The research design of the case study recognizes the fact that "qualitative methods capture meanings and interpretations, and thus can complement participatory geospatial methods to address spatial, social, perceptual, and other elements of person–place transactions" (Hand, Huot, Rudman and Wijekoon, 2017, p. 48). In a similar manner, Hay (2016) and Frey (1996) note that qualitative research methods in Geography have gained momentum since the 1980s, making it a well relied upon and established technique. Consequently, this takeaway informed the very purpose of this research as indicated above to understand Gambian immigrant mothers' perspectives, experiences and challenges, as well as coping mechanisms and opportunities as it relates to home diet and integration in the City of Columbus Ohio. Hand, Huot, Rudman and Wijekoon (2017) also cite Lager, Van Hoven and Huigen (2013) in explaining that "they were able to gain a deeper understanding of the participants' experiences, through being together in the neighborhood and using the experiences of the neighborhood as interview probes" (p.55). Hay (2016) and Frey (1996) argue that qualitative research facilitates elucidating peoples' human environment and their experiences of livelihood. Therefore, this study design allows for an in-depth understanding of ten Gambian immigrant mothers' experiences in Columbus, Ohio, which makes employing qualitative methods justifiable, wherein the experiences of participants can be captured and utilized.

I utilized information on customer contacts in the custody of a Gambian store owner in the city of Columbus, Ohio for the recruitment of participants. Through this contact, a significant number of the participants responded positively to participate in the study. Therefore, this technique was very effective in the recruitment of participants in the study. Thus, the research design denotes Teixeira (2018), who cited Lightfoot et al. (2014) to imply that “participatory community planning and asset mapping are two techniques that are often used in community development work but are less frequently used as research tools, despite having great promise” (p.13). In addition, Creswell (2013), Hay (2016) and Frey (1996) mentioned that in qualitative research method, the research design begins with assumptions and the utilization of a methodological guide that facilitates the interpretation of the results with a view of informing the research study. Lastly, as stated by Hay (2016), this case study is also a participatory research method because the participants reflect on their environment that is being researched with regards to home diet and indigenous food in the city of Columbus.

Settings

The study entails field research in the city of Columbus, Ohio. The study relied on a gatekeeper to identify potential participants in the study (Creswell, 2013, Frey, 1996; Hay, 2016). Interviews were used as a data medium, or instrument, to collect the data from all ten participants (Creswell, 2013; Frey, 1996; Hay, 2016). In addition, the venue and timing of the interview sessions were negotiated with the participants based on their choice and availability. The setting of the study accommodated the possibility to record the interview sessions with a recording device in its entirety. All the interview recordings

of the ten participants were saved and subsequently transcribed and reproduced in written text format (Creswell, 2013; Frey, 1996). The transcription of all the interview sessions was undertaken in a study room of the Alden Library of the Ohio University. This venue was chosen to avoid any interruption of the process of transcribing the interview sessions. All ten recorded interviews were subsequently transcribed successfully.

Participants

Ten participants were interviewed in the study. All the participants are Gambian immigrant mothers residing in the City of Columbus, Ohio. In order to maintain participant anonymity and protect their identity, the participants in the study were designated as A, B, C, D, E, F, G, H, I and J. The table below highlights the participants' profiles.

Table 1*Participant profiles*

NAME	AGE	EDUCATION LEVEL	INCOME PER YEAR (\$)	YEAR IMMIGRATED	# OF KIDS
A	52	High School Graduate	35, 000	2012	3
B	39	Doctoral candidate	18, 000	2008	2
C	39	High School Graduate	25, 000	2008	5
D	32	Nursing degree	54, 000	During her infant	1
E	37	High School Graduate	20, 000 to 35, 000	2015	2
F		High School Graduate	Dependent	2017	3
G	47	Associate degree	75, 000	1994	2
H	38	Associate degree	35, 000	2012	2
I	40	Bachelor's degree	45,000	2002	3
J	33	Bachelor's degree	50, 000	2006	3

The above table shows that the age distribution of the participants ranges from 52 years to 33 years. In terms of education attainment, the highest educational attainment of the participant indicates an even distribution of five-degree holders and five high school graduates. Remarkably, nine participants in the study earned income through employment while only one participant is a dependent. In the domain of year immigrated to the US, all

the participants immigrated as adults apart from one who came as an infant. Lastly, all the participants have children ranging from five to one.

Trinch (2001) and Hall (2011) indicated that participants in a qualitative study can be recruited using a community of gatekeepers or informants. Using a similar premise, the choice of Gambian mothers as participants or informants of the study is derived from Sutherland, et al. (2008) and Turunen et al. (2005). Albrecht and Upadhyay (2018) argued that “numerous studies on children’s health education show that generally mothers play a significant role in their children’s health education by teaching them healthy family practices and modeling healthy lifestyle choices” (p. 606). In addition, Upadhyay (2007) and Hagiwara et al. (2007) claimed that “science teachers who understand that refugee parents and students need to connect school science to familiar things are likely to be more successful in assisting refugee students as they transition into the US educational system” (p. 609). In Pryce (2016), the author cited Senjo and Dhungana (2009) to state that a “purposeful sampling becomes important when a subset of a population highly resembles the greater population from which it is drawn (p.474). Thus, the sampling methods to recruit the participant should be purposeful sampling and snowballing sampling, which depends on the recruitment of other participants through referral by the gatekeeper (Creswell, 2013, Hall, 2011, Frey, 1996 & Hay, 2016). Pryce (2016) explains that purposeful sampling is appropriate for a study with a small sample size; therefore, it is important to note that “caution is required before generalizing the findings to the Ghanaian immigrant population or to other sub-Saharan African immigrant communities in the United States” (p. 474). Furthermore, Frey (1996) and Hay

(2016) concluded that the size of the group does not matter much in qualitative research since it is not trying to generalize and achieve representation.

In line with the reasoning of the previous literature, the ten participants used in the present study qualified as a small sample; thus, the findings were not meant to generalize to the broader population. The biographical data collected from the ten Gambian mothers profiled in this study included their marital status, the number of children they had, and their level of education. Additionally, the participants' duration of stay in the US was also captured during the interview sessions. Moreover, the participants' profiles in terms of age bracket, educational background, and income level are described in the methods section of the present study. The educational background information collected from the participants is guided by the following set of descriptors: no diploma, high school diploma, undergraduate degree, and graduate degree.

Instruments

This study used interviewing as its data collection technique. In accordance with Creswell (2013), Frey (1996) and Hay (2016), the study utilized a semi-structured interview, which enabled the researcher to probe and seek clarification on any of the participants' responses. Hay (2016) asserted that interviews are an "excellent method of gaining access to information about events, opinions and experiences" (p. 150). Thus, interviewing was the most suitable data collection technique for the study. Furthermore, Hay (2016) and Frey (1996) argued that interviewing is a justifiable method for a qualitative study because it leads to the accumulation of information that other methods, such as observation, often miss. This facilitates the understanding of complex behavior

and motivations, highlights diversity of meaning, opinion, and experiences, and shows respect for and empowers the people who provide the data (p.150).

Thus, this study seeks to use interviewing as a methodology to fill a gap in the literature regarding the home diets, identities and integration experiences of Gambian immigrants, thus contributing to the larger body of knowledge on immigrants' discourse. Ultimately, a semi-structured interview protocol was developed to serve as a guide for the interview process of the study for all the participants (Creswell, 2013, Frey, 1996 & Hay (2016). Details regarding the interview protocol are available in Appendix 1.

Data Collection

The researcher interviewed ten Gambian immigrant mothers residing in Columbus, Ohio about their experiences, challenges, coping mechanisms, and potential opportunities as they related to home diet, identity, and integration in Columbus. During each individual interview, participants were recorded with a recording device, which eliminated the potentially distracting necessity of notetaking by the researcher during the interview. Thus, the interview protocol enabled the researcher to actively partake in the interview process with participants. Simultaneously, this also enabled the interviewer to pay close attention to the responses of the participants in case a probe or clarification was needed (Birks, Chapman and Francis, 2008 & Frey, 1996). Notwithstanding, the data collection process also entails taking notes and memos, which Pryce (2016) claimed "helped in my recalling participants' incisive and atypical comments." In line with Creswell (2013) and Frey (1996), the researcher collected the primary data with the

objective of addressing the individual research questions of this study. Concurrently, the data collection process also involved probing the data through memoing. Birks, Chapman, and Francis (2008) argued that memoing while collecting data is beneficial to the researcher since it facilitates the making of conceptual leaps from the raw data to the research phenomenon. Additionally, Birks, Chapman, and Francis (2008) claimed that it provides a “mechanism for the articulation of assumptions and subjective perspectives” of a study to enable the “development of the study design” (p. 69).

Therefore, this inquiry, as postulated by Creswell (2013) and Birks, Chapman, and Francis (2008), will create meaning from individuals’ or groups of participants’ responses with the intention of attributing it to a social or human problem. Specifically, qualitative research methods are designed in a manner that will give voice to the participants with the goal of understanding their experiences, behaviors, and perceptions with reference to the topic of inquiry (Frey, 1996). Following Creswell (2013), the research paradigm used for this study is constructivism, which considers the participants as the experts who can illuminate multiple realities of the research issue (home diet) being investigated. Additionally, the study utilized a deductive approach; hence, its emphasis is also on descriptions and interpretations of the research findings, analyses, and conclusions.

Data Analysis

In this study, interview sessions were recorded and transcribed verbatim. In line with Creswell (2013) and Birks, Chapman, and Francis (2008), the overall process of data analysis started with the transcription of all interview session recordings. Next, the

transcribed texts were organized by reading through the data and writing memos (Creswell, 2013; Birks, Chapman, and Francis, 2008). After this, a coding process for the data was used that entailed dividing the text into information segments and then assigning codes to those individual segments (Creswell, 2013; Frey, 1996). Finally, the data analysis involved grouping and reducing codes by developing and relating themes. However, to overcome the potential challenges of this study, the researcher employed Creswell's (2013) recommendation to conduct in order to gain initial experience, identify potential challenges, and gain insights to improve the data collection instruments. In addition, research shows in a qualitative approach, data can be coded and analyzed using techniques, such as open coding, axial coding, and selective coding. These processes entail creating and integrating categories of the results into themes in order to report them in the result and the discussion sections of the qualitative study (Strauss and Corbin, 1990; Albrecht and Upadhyay, 2018). Finally, Albrecht and Upadhyay (2018) explained that constant review of the results allows researchers to discover and explain patterns and variations from the initial step of open coding and development of themes while doing the data analysis.

Ethical Considerations

To ensure the protection of all participants, the researcher attained approval from the Institutional Review Board at Ohio University prior to data collection. The first ethical consideration of the study was the protection of the privacy of the participants (Frey, 1996; Pryce, 2016). Similarly to the privacy protection method implemented by Pryce (2016), the participants were assigned acronyms, such as Participant A, B, C, D, E,

F, G, H, I and J, in order to protect their identities during their participation in the study. In compliance with the requirements of the IRB, a consent form was prepared that explained the purpose of the study, sought the unconditional permission of the participants to participate in the study, and communicated their right to opt out of the study at any time and for any reason. All participants were recruited using a recruitment letter explaining the purpose of the study and its scientific significance. The recruitment letter also specified that there is no individual benefit to the participants.

In order to ensure the external validity of the study, the instrument used, and the purpose of the research, interviewing sites and process were defined in detail to enable the research method to be carried out effectively (Pryce, 2016; Frey, 1996). In addition, as recommended by Pryce (2016), the study's research design was implemented during the entire process of the study. Therefore, the data obtained, the findings reached, and concluding suggestions are limited to the nature of this research. Consequently, the methodology was designed and undertaken holistically so that the research process yields its objectives.

Similarly, with respect to the internal reliability and validity considerations of this study, the present research was independently conducted with no outside funding and thus was not subject to any external influences or biases (Winchester, 1996; Price, 2016). Additionally, the study employed peer review and member checking from colleagues in the Geography department and called upon participants to review some of the methodological procedures and accuracy of the interviews in order to avoid oversights in the direct description of the study's findings. Moreover, the researcher

conducted the data analyses of the present study in accordance with the methodological design of Pryce (2016). Finally, as promoted by Artvinli (2017), the study's data sources were identified, and detailed explanations were provided as to how they were obtained, the data collection tool used, and data analysis processes implemented.

Chapter 2: Home Diet Versus American Diet (Perception)

Introduction

Chapter Two of this study centers on home and American diet perceptions among the Gambian immigrant mothers residing in the city of Columbus, Ohio. Chapter Two of the study is guided by research question stated below:

What are their perspectives when it comes to home diet as compared to indigenous American food?

The transcribed interviews were analyzed and coded, and Chapter Two highlights the theme Gambian immigrant mothers' perspectives on home diet versus the American diet.

Results

The results summarized below are based on the themes that emerged from the recorded transcript interviews of all ten participants in the study.

Themes

Collectively, the themes that emerged from the above research question related to perceptions of the Gambian home diet in comparison to indigenous diet in Columbus, the most commonly used Gambian diet, and the preservation techniques used by Gambian immigrants in preparing the Gambian food diet. Based on participant responses, identified themes are presented below.

Perceptions of Comparisons Between Home and Indigenous Diets

All the participants in the study reflected on their perceptions regarding the home diet and indigenous food in the city of Columbus, and, overwhelmingly, participants favored home diet above indigenous food in Columbus.

For example, Participant A's perceptions of home diet and indigenous diet in Columbus were shaped by her love for the home diet, the frequency with which she cooks it, and the higher costs associated with food sold in Columbus restaurants. Additionally, with respect to home diet preference, Participant A explained that home diet food lasts longer as it can be used for almost a week. Ultimately, she asserted that,

“I always eat Gambian food and cook Gambian food every day. Having a family and buying food from restaurants is expensive. Therefore, I prefer cooking my home food at home for my family. I cooked a lot of food during the weekend and this can take us for the whole week. Gambia food is more economical because if you cook it can serve you days, while American food especially the one you buy from restaurants can serve for two eating or less” (Participant A Transcript).

Participant B reflected on her perceptions of the home diet by affirming the she prefers home diet due its freshness, healthiness, and its natural ingredients. As a result, Participant B indicated that,

“Gambian food, especially the ingredients we use for cooking, they are always fresh, healthy, and natural. Therefore, as an immigrant in the US you find it difficult to get exactly to these attributes as they way are in the Gambia. For example, in the Gambia we do not freeze meat. Every day you get fresh meat from the market. Meats in the

Gambia are tastier because the animals graze on grass unlike the meat sold in Columbus, they freeze their meat and, in my opinion, the animals are not raised naturally. In the Gambia, fresh produce is naturally grown and there are no GMO, but here most of the produces are GMO. So, is different even though we cook Gambian food here, the taste back home and here is always different” (Participant B Transcript).

Participant B provided an example to elaborate on why home diet tastes better than indigenous food. She stated that,

“When I came newly to the US to joined my husband and as a student in 2008, the first week, I went for an orientation ceremony at the university, after the orientation and going around and talking to fellow students, they ask us to go to the dining hall for a lunch. When I reach the dining hall, the food really looks so good and was a lot of food, well prepared, all the decoration makes me have a watery mouth. So, I remembered I went straight for the chicken and took a good chunk together with some of my new colleagues as we just met during the orientation ceremony. So, after we took all the food stuff, we went to the table and as soon I started eating chicken, I could not believe it, I was so upset; I was mad and ask, ‘Who does this? Who puts sugar in chicken?’ As I was saying it in my mind, so, one lady from Ghana just said it out loud, ‘Why do they put sugar or honey in chicken? This is so bad. So, on that day, I did not eat with all that food looking so good, because I cannot eat it due to the sugar. Also, when they (American) prepare grill, they put barbecue sauce in it, which I cannot eat it because of the sugar. In short, I am not used to sugar used as ingredients while preparing meat” (Participant B Transcript).

Participant C also explained her perspective regarding home diet and indigenous food in Columbus and stated that she favored home diet due to her culture, taste and the high cost of ingredients sold in the city. As such, she remarked,

“As an immigrant and a mum so you must try by cooking your own home dishes so that your kids can know their cultural background. So, we try our best. So I prefer Gambia dishes because you know you remember like you came from Africa, the Gambia, you grow up and you eat the food so there is no way that you can forget the food and the culture. So been here is a challenge because we miss our food even though we cook them, but we cannot have here the same way back home” (Participant C Transcript).

Consequently, due to her cultural background, Participant C further elaborated on her perception and need to cook home diet as follows:

“We are trying here you know where we come from, our food, culture and everything is different from here. So, but we try. So, sometimes when we want to eat our cultural foods, things like meat and chicken, these ingredients are easy to get it here. But fish is expensive here and sometimes you do not get exactly what you want, so you cook, and you realized that the food is not the same as in Gambia. the taste is different, if you looked at back home, we cook fresh food and it taste so good. I can remember back home you have variety of dishes that you can prepare, such as okra soup, peanut butter soup, jollof rice, with fresh fish from the sea, fresh meats, and chicken” (Participant C Transcript).

Despite Participant C's favorable attitudes toward the home diet, she mentioned that she faced the challenge of substituting home diet ingredients with domestic ingredients. She explained that,

“But here if you want to cook okra soup you cannot find okra sometimes, or you cannot get the smoke bongo fish that goes with it at the end you cook it but the taste is different” (Participant C Transcript).

Similarly to Participant A, B and C who favored home diet, Participant D claimed that she regarded home diet as superior to the indigenous diet in Columbus. Her responses indicated a preference for home diet due to deliciousness and taste. But she also revealed that disadvantages are associated with preparing home diet, as it requires more time to prepare. Regarding these questions, she stated that,

“The reason why I like Gambian dishes is that they are very delicious and taste good. I came to the US during my infancy age. I always remember my mom cooking Gambia dishes in different kinds and are always delicious. Gambian food is always spicy and well prepared. Because, we put lot of spices in our food that make it so flavorful. My mom also shown me how to prepare Gambian food. I love Gambian food, the only problem is that it takes long time to prepare them as compared to preparing American dishes, such as Burger or pizza, which can be prepared in 30 minutes or less. For American food, I also love it if I am the one who prepares it. You know, I do not eat outside because you don't know how the food is prepared and the ingredients they add into the food” (Participant D Transcript).

Comparably, Participant E held similar views about the home diet and the indigenous food in Columbus, claiming that the two diets were inseparable due to the mixing of ingredients of both food types. Her response regarding this question is featured below:

“Where I come from, the lifestyle is different especially than here including the food we eat. You know, we came from West Africa and America is 100% different from there. But we are managing here, and life goes on. Our way of life, our food and dressing are all different. Here when cooking Gambian food, home diet ingredients are 80% different so that rest of the ingredients used are indigenous ingredients. But we thank God that we have the Africa market store, whatever they do not have, we will buy them from Walmart, Aldi, and Kroger. Therefore, you can get whatever is available from the African stores and rest from the indigenous stores. For example, in Walmart and Kroger, you can get some cooking oil and vegetables, but when it comes to the real African ingredients, most especially palm oil, that come from West Africa, you can only get it from the African stores. Like we have the Gambian stores, the Senegalese stores, and the Ghanaian store you can get almost all the ingredients you want. So, in my opinion, the process of cooking home diet in Columbus is basically mixing home and indigenous diets ingredients” (Participant E Transcript).

On the other hand, Participant E reflected on her perception regarding indigenous food as follows:

“To me American food, I can say most of them are not healthy as compared to Gambian food. You know I cannot call it junk food because is somebody’s food and I

must respect that. But food from fast foods such as McDonalds, Burger King, Wendy's and so forth serve fries, meat, bread that are not very healthy. When I compare it with Gambian food, I would say nothing on those food portions are as healthy as Gambian diet. So, for Gambian food are served in small amount, which I think is good for digestion and avoiding obesity. For instance, plate of small rice served with potato leave soup without palm oil is healthy. Potato leave soup without palm oil is good because it does (not?) have cholesterol. And right now, many people have high cholesterol level causing all sorts of sicknesses for them. Ultimately, if you cook your own food, you know the amount ingredients you put in it" (Participant E Transcript).

Concurrently, Participant F, in expressing her perceptions regarding Gambian home diet and domestic food, made it clear that she favors home diet because her routine activity is cooking home diet. Regardless of her positive perception, she also acknowledged that there are challenges associated with cooking home diet. She explained,

"So, despite coming to the US, I am still cooking Africa food because it's my hobby. Cooking Gambian food is what I do all the time. Sometimes, I also cook American food. However, cooking Gambian food is a challenge because the ingredients are not fresh as in the Gambia. Then, I will say I still cook and eat Gambian food almost all the time but I also some occasions prepare American food as well" (Participant F Transcript)

In a similar pattern of viewpoints regarding perceptions of food, Participant G made it clear that she favors home diet over indigenous food due to health considerations,

“Well, first and foremost I will say my perception about food is I prefer Gambian food than American food, because it’s healthier for me. Because the beauty about Gambian food is that you prepare it for yourself and you know exactly the amount of ingredients you put in your food. Not only knowing what you put there but also when cooking our food, you can boil it, steam, or bake for the period you want it. For American food is mostly pizza or burger with cheese (fat) and some vegetables. These are some examples of indigenous food mostly prepared in restaurant and frozen in stores or outlets for sale” (Participant G Transcript).

Further expounding on her rationale for why home diet ingredients make the Gambian food healthier than American food, she posited that,

“Here for example if you buy pizza is not health if you look at it, but Gambian food like Caldou (steamed fish), you can cook it by adding a bit lime, salt, and a bit of oil, with sorrel leave, so, you can select the healthy vegetables for Gambian home diet. For the pizza you buy, you cannot control the amount of ingredients they put in them. But, for our Gambian food you know the amount of ingredients you put in based on healthy vegetables choices one makes, that why I prefer Gambian food as a result way we prepare our food” (Participant G Transcript).

Expanding on this theme, Participant G explained that Gambian cooking methods, contrary to popular belief, do not result in the loss of nutritional value. In her view, she explained that,

“most people believed that African food takes long time to cook their food and believes that they lose some of its ingredients in the process but I believe that nothing is lost because all the nutrients remains in the food served” (Participant G Transcript).

Additionally, emphasizing the importance of perception, Participant G indicates that,

“Our cooking is beautiful because when we cook our Gambian food it takes long time because everything is step by step. I don’t believe that we over cook or under cook. For example, when we are cooking, we know what time put each of the ingredients and how long it will take to cook it. I believe the way we cook is just right. I also believe that it depend on the amount of food you cook. If you are cooking a small portion, it took a little time to prepare it. Therefore, for me I only cook during the weekend so I can cook lot of food because I prefer eating the Gambian food than the American food” (Participant G Transcript).

Regarding her perception of home diet, Participant H asserted that,

“home diet is preferable to me because I understand the ingredients and species combination, some of the indigenous diets are little similar to my home diet” (Participant H Transcript).

While explaining her preference for Gambian food over indigenous food, Participant I indicated that,

“My perception about Gambian food and US, Gambian food have lots of spices, flavors, freshness and make the food with so much love and care. For the spices, Gambians put lot of spices in their dishes. For example, when cooking spicy pepper soup,

okra soup, potato leave soup without species these foods will not be lovely as it should be. I said its flavorful because we mix lots of seasoning and is always well done prepared. The freshness is also part of it, vegetables, meat, fish we have in the Gambia are all freshly acquired. In general, Gambians food ingredients are natural. They are not preserved or modified. These ingredients are grown naturally” (Participant I Transcript).

In contrast to “American indigenous food, Hmm, the way I perceive American food is different. I believe that American food for most of the time are not fresh because they freeze their food a lot. Most of their food have preservatives. The other thing is that American food are not spicy as compared to Gambian food. Also, I do know that most of the food here in America are not healthy such as Pizza” (Participant I Transcript).

The last participant in the study, Participant J describe her perception towards home diet favorably to her awful experience with indigenous food upon her arrival in US as follows,

“Well, I will tell you a story about my first experience in the US, when I came to US, my first night, I was taken to a restaurant to eat dinner, in my mind all the time is that I want to eat pizza. So, the moment we reach the restaurant, my friend, Roheya ask what do you want to order? I immediately, responded pizza, and she replied pizza! then I whispered in her ears that I have never eaten pizza, so I want to try it, So you know in the Gambia not many people eat in restaurants eat not of think of buying a pizza, so, she ordered the pizza I got my first bite, second and third bite, I was literally full. This is because the pizza was not spicy enough and you know as Gambians, we like spicy food.

since that day, I make up my mind that Gambian food is the best as far as I am concern” (Participant J Transcript).

In addition, Participant J favored home diet more than indigenous food because the food is richer in ingredients. Thus, she highlighted,

“I perceive that Gambian food are very rich in ingredients, spices and takes a special technique to cook them. For American food, in my opinion, it does not rich ingredients, no spices and is easy to cook” (Participant J Transcript).

Specifically, when discussing her reasons why Gambian dishes require a special technique to cook, Participant J said,

“You know cooking Gambian food is not easy tasks, is not something that you watch on Youtube and TV and just cook it. It takes time, energy, and lots of practices to cook Gambian dishes. Back home, we are always training how to cook, so you will not be surprised when your own family call you to cook for them. When it comes to American foods, the situation is different because I can make any American food simply by watching Youtube. I can vividly tell you I cook Chicken Alfredo, Burger, Pizza, Taco or Broccoli Cheese Soup. So, it literally takes no technique to cook them” (Participant J Transcript).

Finally, Participant J claimed that she favored home diet more than indigenous food because of the following reasons:

“The other reason I have is that American food, most of the ingredients have preservatives, freeze food, GMO and a whole lot of it. Can you imagine, just look at their meat, it does not taste anything compared meat raised in the Gambia. Meat from the

Gambia are not tasteless, because these animals are feed in natural grazing land but here (Columbus), they are mostly raised with a lot of genetic produce” (Participant J Transcript).

Justifications for Commonly Consumed Gambian Home Diets

Almost all the participants in the study disclosed some of their frequently consumed home diets and their justifications for relying on them. Specifically, Participant A revealed that her family’s home diet was commonly consumed because it consists of foods her family knows and because of the positive feelings her family associates with them. She highlighted that,

“We cook more Gambia food because that’s what we know, and that’s what we eat and become happy. My favorites are cook peanut butter soup, okra soup, fry rice (Benachin) and chicken yassa and vegetable oil stew with meat or sometime with fish or chicken” (Participant A Transcript).

In the case of Participant B, she also made known her most consumed home diet and attributed her choices to the easiness of preparation, healthiness, and affordability. She asserted that,

“The favorite Gambia food I cook for most of the time is peanut butter soup. So there three reasons why we cook the peanut butter. Peanut butter is an authentic Gambian food and its ingredients are easily available in Columbus. So, when you have the peanut butter and the other ingredients that goes with it is easily done. I cook the peanut butter every time until now it becomes monotonous, but I still cook it because my kids and husband love it. The second Gambia food I cook is benachin (jollof rice),

similarly, the ingredients for benachin are also available in Columbus abundantly, healthy, and cheap as well. Finally, I cook these foods because they are healthier, cheaper and easy to cook” (Participant B Transcript).

In a related manner, Participant C disclosed her home diet food choices and cooking improvisation techniques. She indicated that,

“My favorite is super kanja, so, the technique I use when cooking super kanja (okra soup) is that I add shrimp in it in Columbus. But back home, shrimps are very expensive to buy, so many people do not use it. They normally use meat and other sea food, such as smoke catfish. Nonetheless, some people back home still buy shrimps in order to cook the okra soup. However, if you compare the prices of shrimps here and in the Gambia, in the US shrimps are less expensive as in the Gambia. So, sometimes the ingredients I need to cook Gambian dishes we do not have it here. But I try to put other ingredients just to make it delicious. For example, there are seasoning ingredients that are available in US are not obtainable in the Gambia, therefore one can substitutes ingredients and cook Gambian food and make it so delicious” (Participant C Transcript).

On her commonly consumed Gambian diet, Participant D also revealed the most commonly prepared and consumed dishes of her home diet. Specifically, she mentioned that,

“I like all the yummy Gambian dishes, practically all Gambian foods. My topmost favorite is the jollof rice served with meat or fish, I love both serving options of Benachin. I also love Dibi or Afra (grilled lamb meat), it’s very nice, Dibi it is a special way of grilling meat that is very different from American way of grilling meat. The meat

is seasoned with ground black pepper, onion, mustard, and garlic. Other Gambian foods I love are okra soup and sweet potato leave soup, I cook them always” (Participant D Transcript).

Additionally, Participant E identified her favorite Gambian home diet meals and attributed her choices to the ability to integrate them with domestic ingredients sold in Columbus:

“For me, my favorite Gambian dishes are okra soup or sweet potato leaf soup or the cassava leaves or spinach soup. For me to make these foods cheaper, I sometimes go to the African Stores where we have sweet potato or cassava leaf to cook. But, most of the time you do not have these ingredients in the American stores. But the good thing is one can go to the Asian store, which are very international and predominantly sell natural ingredients. These Asian Stores sell everything coming from Africa, Europe, and Asia. So, if you are cooking the okra Soup, one can get dried okra from the Asian. Now, if I am cooking cassava leaf soup, I will substitute the cassava leaves with domestic ingredients such as spinach sold in Walmart, Kroger, or Aldi. For the okra soup, I like to put the smoke bongo fish or the smoke catfish, but hence the smoke bongo fish we do not have it here. Instead, I go to indigenous stores and buy smoke mackerel or the smoke turkey to prepare the okra soup. So, for the peanut butter soup, I think you can get peanut butter from all these stores but again I think our peanut butter is special because it is prepared from fresh peanuts harvested in farmlands. Also, the American peanut butter has sugar on it, which in my view is not healthy because no one should mix peanut butter and sugar at the same time. But, overall, peanut butter is available in all domestic stores, for example,

Walmart, Kroger, or Aldi and are far cheaper than the original peanut butter from the Gambia” (Participant E Transcript).

Moreover, Participant F disclosed that she cooked certain dishes of the Gambian diet more often because they are her family’s favorite:

“I normally cook Gambian food greatly in my house because they are my family’s favorites. My favorite Gambian dish that I cook a lot is Super Kanja, I also cook Benachin, Bullett (meatball), nada (peanut butter soup), vegetable and palm oil stew” (Participant F Transcript).

Participant G, when answering the researcher’s question about her commonly prepared home diet dishes, explained that she modified the preparation of these meals for health reasons:

“The common Gambia food I cook is okra soup. Although, it is not the common Gambian okra soup, the one I cook is without the palm oil. I cook it with all the ingredients from the Gambia except the palm oil for almost every week. A common Gambian diet that I also eat with findi (millet couscous) or yam powder. I combined the okra soup and the findi as a complete meal. I cook it in that way because I want to reduce the amount of oil I eat. Also, palm oil is not good for high blood pressure and I also want to reduce the amount of rice intake per day, that is why I eat it with the yam powder or the millet. I do also cook peanut butter soup, Benachin and others” (Participant G Transcript).

By contrast, Participant G explained that she prepared domestic food occasionally:

“Yes, I cook domestic food only when I miss them time to time, I prepare lasagna, spaghetti, chicken alfredo and chicken taco or beef taco. I only cook them when I crave for it” (Participant G Transcript).

Participant H stated that “my favorable Gambian food is Domoda (peanut butter soup)” and explained that she enjoyed it because it is her “favorite diet and very healthy and easily prepared” (Participant H Transcript).

In addition to describing her home diet, Participant H also expounded on the health benefits of eating from home. Thus, she explained that,

“the benefits of eating home diet are that preparing food from home can be associated with range of potential benefits, such as consuming fewer calories and smaller portions and eating less fat, salt and sugar” (Participant H Transcript).

Regarding her commonly cooked Gambian diet, Participant I stated that,

“I normally cook peanut butter soup, okra soup, sweet potato leaf, fried rice with meat, sometimes with fish or chicken, the fried rice locally known as, Benachin. I do also cook meat or chicken stew served with rice. You know these are the typical Gambian dishes whichever ethnic group from you come from, one will be familiar with these dishes because everyone prepares them at home. I cook them because they are healthy, you know the ingredients you put in the dishes and the amount needed. Another reason why I prefer Gambian dishes is that they are economical. As a result, I do feed my family of five with these foods all the time. For me cooking or buy small meals everyday like pizza, or burger would not help me because of my family size. In fact, I cook Gambian

dishes using big cooking pot that can serve for days or a week, that is much better for me because of my family size” (Participant I Transcript).

Participant J revealed her commonly cooked home diet by indicating the following:

“I normally cook okra soup; my husbands and kids love it. Peanut butter soup is another dish I cook because is easy, healthy, and not expensive to cook. Benachin as well, which is own version of fried rice with meat, chicken, or fish I cook a lot. The fried rice can be cook in different styles either red, which has tomato paste or white and that is without tomato paste. My other choices I cook are sweet potato leaf soup, yassa, and all other Gambian dishes” (Participant J Transcript).

With respect to the consumption of American food, Participant J also expounded on her choices:

“I do not buy from outside; one reason is that I am a Muslim and things like wine and pork I do not eat them. So, to protect myself from eating them is to avoid eating in restaurant because they always use alcohol or wine in their cooking. However, I do cook American food from time to time, most especially, when I miss them. Although, not every time, it is just once a while” (Participant J Transcript).

Commonly Consumed Foods of Children

Regarding the food choices of their children, two participants (B and C) revealed their children’s preferences for home diet versus indigenous food in Columbus.

Participant B disclosed the favorite foods of her children, with one favoring home diet and the other indigenous food.

“I introduce Gambian food first to my kids, so they do enjoy Gambian food a lot, especially my first born, my daughter she likes Gambian food. However, for my son, he prefers American food than Gambia food for the most of time. I really think he does so because he started preschool earlier than my daughter making him familiar with American food. While my daughter, she had been with me at home for a longer time before starting preschool and I fed her with Gambian food. So, now she is used to Gambian food, even if I recommend getting a hamburger or cheeseburger or pizza, she always says ‘No! No!’ Instead, she would say, ‘I want to eat Domoda (peanut butter soup) Plasas (sweet potato leaf soup) or super Kanja (okra soup).’ But for my son, he always saying, ‘Yes, get me a burger or pizza.’ I would say he loves American food. I guess when he goes to school, the school authorities serve him American food and that is why he tends to like it more compared Gambian food” (Participant B Transcript).

Furthermore, on her reasons for avoiding American food choices for her children, Participant B indicated that,

“It really affordable for me and my family because when I cook Gambia food, I buy the ingredients and cook the meal so that it can serves us for a long time. I do this choice because I want to avoid going out buying American foods, which is a little bit expensive, even though I can afford it. I just want to avoid wasting my money where I can save it. So, this reason reinforced my previous point why I cook peanut butter stew. Peanut butter stew is not that expensive, not only I am considering the cost, but it is healthier. I would say overall, cost is an integral part of my consideration for peanut butter soup. Because if want to buy pizza, we will eat it just for a day, but if I cook sweet

potato leaf soup or the peanut butter stew will take us for a very long time” (Participant B Transcript).

Similarly, Participant C described her children commonly consuming indigenous food, but explained that they are instructed to avoid pork. As such, Participant C revealed that,

“Yes, they do eat other foods such as burger, pizza, hot dog, chicken nugget. But you know in our culture and religion belief systems, we are not supposed to eat pork. So, I always tell my kids not to eat anything that have pork. I always tell them at school you can eat anything they give except pork. I could remember when my kids came from school and they told me they give them pepperoni pizza. Immediately, asked them whether they eat, and they say, ‘No because you said we cannot eat pork.’ So that mean they follow my instruction which is good yeah” (Participant C Transcript).

Knowledge Preservation for Home Diet preparation

A third theme that emerged within this chapter is knowledge preservation for preparing home diet. Therefore, the participants in the study revealed their strategies for preserving their knowledge regarding home diet preparation.

Participant A indicated she preserves her cooking knowledge by using the same techniques she memorized while growing up in the Gambia to cook home diet. She posited that,

“Yes, the same way I was cooking in Gambia is the same way am cooking here. And I am also showing my kids especially the way to cook Gambia food” (Participant A Transcript).

Similarly, Participant B commented on how she preserves knowledge on home diet. The participant identified strategies such as memorization and recounting of her cooking techniques in Gambia in the quotation below:

“Home diet preparation of course, you know your ingredients, you know the stuff you are using, and you prepare it yourself and its very healthier. Especially when you are cooking for your family you do it with pleasure and love. You want your family to eat healthy and enjoy the food. So, it takes time to prepare it exactly the way we do it back home. So, unlike in the restaurants, where food is processed quickly and served. This tells that for our is good food, we know how to prepare it so well. Therefore, even in the Gambia; we are used to preparing our own food and avoid eating street food. Food served in the street, we do not know how it’s prepared, and my family avoid eating outside. So, knowledge of preparing home diet is important to know and keep it. This preservation can serve as a way for many to learn on these techniques for preserving knowledge on Gambian food” (Participant B Transcript).

Additionally, Participant B posited that the frequency with which she prepares Gambian food helps preserve her knowledge on cooking. She mentioned that,

“Therefore, there is no luxury of time in the US to be cooking everyday as compared to the Gambia, where I cook every day in a big pot because of my extended families. In the Gambia, people eat the food they cook for daily consumption. Therefore, every day, Gambians cook fresh food simply because the market is just there, the ingredients are readily available and its fun” (Participant B Transcript).

In line with this, Participant C also disclosed that repetitive cooking of Gambian home diet is her way of preserving her knowledge. As such, she responded that,

“I preserve the knowledge of home diet cooking here in Columbus by continuously cooking them. I cooked the same way I was cooking in Gambia. But sometimes, I do not have the same ingredients here, but we use different ingredients to make it taste good” (Participant C Transcript).

Participant E provided her justification for employing preservation techniques for preparing Gambian food, which was primarily due to her health considerations:

“Because indigenous food most of the time are very healthy, I know they are good for my health as a person with a health condition. People like me we have special health condition, which prevents me from eating certain food and ingredients. So, when it comes to the diet, we must very careful. We should know what we are eating and what we should not be eating. For Gambian food, such as jollof rice, I cook it in a special way with a bit of olive oil instead of vegetable oil. Although olive oil is expensive but is healthier than all these oils we have around. I know it because I use olive oil 100% for my cooking. Also, I know the amount of sodium I need to put in my cooking. For seasoning, I prefer using the plant base seasoning because are good for my health. So, I use plant base seasoning than the ones we have in the African stores such as the maggi and jumbo. Because of this knowledge, I act differently than many Gambians use local seasoning such as Maggi, Adja, Jumbo and Doli. For me like I said, I must be mindful of what I add to my food and eat based on my doctor’s advised. Consequently, I use plant base seasoning which is healthy and does not have sodium and potassium that much. So,

I have knowledge on cooking Gambian food due to my health condition which I am fully aware of” (Participant E Transcript).

Participant F also communicated that she preserved her knowledge on preparing Gambian food through repetitive cooking:

“I preserve my knowledge on cooking Gambian food since I keep doing it all the time. I also believe once my children grow up, they will know my cooking style. They are very young now but immediately they get older a bit; I will start teaching them how to cook Gambian food” (Participant F Transcript).

Participant J also noted that she preserved her home diet cooking knowledge by transferring these techniques to her children, showing them how to cook Gambian food:

“Well, I preserve, the knowledge of home diet preparation by cooking Gambian dishes in my house. As I indicated before, I always cook Gambian food, I also preserve the knowledge by using Gambian ingredients in preparing Gambian food. I am also preserving it through teaching and showing my kids how to prepare Gambian dishes” (Participant J Transcript).

Limitations of Home Diet Cooking

Conversely, another theme that emerged in the interviews was that there are challenges of home diet cooking. When reflecting on the time it takes to prepare home diet, Participant B offered that:

“It is true that I always talk about the long time it takes prepare home diet, so it may take me hours to prepare Gambian food that I love and the care about. When we cook our food, we boil it longer and our frying also takes longer. Therefore, as part our

knowledge on Gambian food preparation, we wait for specific time to add certain ingredient and the sequence they follow. Essentially, we just put all the ingredients once and cook it. So, for American food, it is very quick to prepare, I can just say literally in five minutes. I am not just saying you can just put it in a microwave, and it becomes readymade food that works like food heated in a microwave. For example, if you want to make pancake in the US, the process is so fast is just like you have the readymade flour. Unlike in the Gambia, if you want to make a pancake it takes a while, because one must start from scratch. Yes, is time consuming so it takes lot of time and knowledge. That is why most people here from Gambia, if you ask them, they do not cook in small pots, they always used big pot, so they freeze it. That is why, we cannot cook certain food in small quantities as it takes long hours to prepare. Because here in US, I do not have the time, I am always busy with my kids' schooling and my own work. So yes, I cook two to three different dishes in a large pot, so that I can freeze it and heat it every day until is finished. In fact, we cook for lunch and dinner separately. Normally, lunch we cook in abundant while dinner we prepare it daily especially when I am in the mood” (Participant B Transcript).

Furthermore, Participant B highlighted a concern regarding cooking home diet as follows,

“But here the stuff is mostly expensive because they are imported. Therefore, if you want to cook like in Gambia you cannot because is expensive. So, you want to avoid that” (Participant B Transcript).

Discussion

Perception of Home Diet and Indigenous Food

Regarding the study's findings, the first theme makes it apparent that the attitudes of Gambian immigrant mothers living in Columbus relating to home diet are positive. In contrast, they have less favorable attitudes towards domestic food, especially the food served in restaurants and fast food establishments. The reasons that emerged for their preferences of home diet are outlined below.

First and foremost, the food perception theme adds to the evidence that, in most cases, immigrants prefer home diet to the indigenous food of where they reside (Garnweider, et al., 2012; Ray, 2017; House et al, 2014; Martinez, 2013; Waltz et al., 2017). Several participants in the study (A, B, C, E, F, G, H, and I) overwhelmingly expressed a preference for home diet over indigenous food for numerous reasons. In particular, Participant A and F attributed their preference for home diet to their positive feelings toward home diet, their frequency of cooking it, their ability to preserve the food for a longer time, and to their perception of its preparation as an enjoyable hobby. These views concur with Martinez's (2013) assertion that the home experiences of immigrants in San Francisco and Latin America shaped their dietary preferences. Similarly, Participant B and G favored home diet to indigenous food because they claimed that home diet is healthier, cheaper, better tasting, not mixed with sugar, fresh and represents their culture. In conformity with House et al. (2014), Participant B's views seem to support the research finding that immigrants perceive the home diet as fresher than food typically ordered from China because they are kept for a very long time. Participant C

also favors home diet because, to her, the home diet tastes delicious and provides her with positive feelings, encouraging her to prepare and eat it. Again, this assertion fits into the narratives by Albrecht and Upadhyay (2018) that Somali immigrants' perception in the US matters because it reveals mothers' perception as part of the tensions they encounter based on their lived experiences in the US.

In terms of perceptions of home diet and indigenous food, the identified themes concur with previous research that shows that home diet is preferred by immigrants over their host country's food (Garnweidner et al., 2012). Garnweider, Pettersen and Mosdol (2012) highlighted that in Norway, immigrants from other countries described their home food as "our food" and their host country's food as "tasteless." The present research supports these findings. For instance, Participant B indicated that, during her orientation ceremony at her university as a foreign student, she found the chicken served to be tasteless. These narratives indicate why some Gambian immigrants prefer home diet to indigenous food sold in restaurants and fast food establishments in Columbus.

Less Common Perspectives

When examining exceptions to the primary themes, Participants B, E and F held views that significantly differed from the rest of the participants in some respect. Participant B's comments about the difficulty of substituting her home diet ingredients with domestic ingredients to maintain the natural form of her food, while not commonly reiterated by other participants, are well in line with Latrika and Drimie (2019). This narrative emphasizes the importance of authenticity as far as food among immigrants is concerned. Participant E's perception was that both home diet and indigenous food are

inseparable because of the mixing of ingredients while she cooks. As alluded to by Dondero et al. (2018), dietary assimilation seems to occur among immigrants due to social institutions. In particular, mixing of ingredients when preparing food is common among Mexican immigrants. Therefore, it can be deduced that immigrants are limited in their abilities to strictly maintain their home diet because they are bound to integrate domestic ingredients when cooking their food. Additionally, Participant F is also critical of home diet ingredients despite favoring it to indigenous food because, in her view, the traditional Gambian ingredients imported to the US are not fresh. This was also the perspective of Chinese immigrants in the study by House et al (2014).

Financial and Health Considerations

According to themes ascertained from the interviews, financial and health considerations are significant factors that influence the perception of Gambian immigrant mothers residing in Columbus. Additionally, love for food and cooking home food as a hobby were also cited as important considerations for immigrants in their newfound home.

The second most important reason for Gambian immigrants favoring home food above domestic food that emerged from theme one was linked to health considerations. Participant B posited that most of the indigenous food served in restaurants and fast food establishments is genetically modified, which makes it less healthy than Gambian home-grown ingredients. In a similar manner, Participant C asserted that home food ingredients are fresher because most domestic foods are preserved and stored for lengthy periods. Therefore, it becomes clear that Gambian immigrants in Columbus are mindful of their

health, which is evidenced by the food choices they make for their families. Indeed, many studies support the findings above (Martinez, 2013; House et al., 2014; Van Hook, Frisco and Martin, 2018). Martinez (2013) explained that most Latino immigrants in the US forego eating salty snacks, carbonated beverages, and fast foods in the US due to the health risks associated with these foods. In a related manner, House et al (2014) claimed that immigrants consider the consumption of some fast foods as risky due to the food's questionable state of freshness and its origins. Interestingly, one participant in the study explains that she is critical of food from China and therefore tries to avoid buying it. Furthermore, Van Hook, Frisco, and Martin (2018) underscored that immigrant children's consumption of food is influenced by the food industry's influence on eating habits.

Overall, using the themes of perception towards home diet and indigenous food, one can deduce that Gambian mothers' rationale for overwhelmingly preferring home diets fits into the discourse of immigrants' favorable perspective toward home diet over domestic food. The reasons that emerged to support these perceptions were linked to health considerations and love of domestic food among the Gambian immigrant mothers in Columbus, as well as among a diverse representation of immigrants across the globe as observed in United States, Canada, and Norway. The pictures below show the commonly cooked home food among the Gambian immigrants that participated in the study.

Figure 1

Super Kanja



Source: [How to cook okra stew/soupou kandja - YouTube](#)

Figure 2

Domoda or Peanut Butter Soup



Source: [Youtube Mame Fofana](#)

Figure 3

Fish Benachin



Source: www.mygambiankitchen.com

Figure 4*Beef Benachin*

Source: <https://www.tvcontinental.tv/2017/01/23/learn-make-gambia-beef-benachin/?responsive=true>

Commonly Consumed Gambian Home Diet and Justification

The second sub-theme of the findings identifies the commonly consumed home diet among Gambian immigrant mothers in Columbus. This adds new knowledge to the discourse regarding the commonly consumed food of immigrants, particularly among the Gambian immigrant community in Columbus, Ohio. In addition, this theme is significant because it provides information about some of the specific food that influences immigrants' perception of home diet versus indigenous food sold in restaurants and fast food establishments. Furthermore, the ingredients required to prepare certain dishes are also provided. One of the most famous home diet dishes mentioned among the

participants of the study was called Super Kanja. This dish is prepared with ingredients such as okra, palm oil and dried fish and meat. Participants A, B, C and E all identified this dish as their most favorite. Considering the ingredients used to prepare this meal, it can be argued that it is a healthy meal. In addition to its potential health benefits, this dish is easily digested because of the okra used when preparing it. In particular, Participant C explained why her family commonly cooked and consumed Gambian home dishes by stating,

“I like Super Kanja (okra soup) and Plasas (sweet potato leaves). These are my favorite Gambia dishes. So other Gambian dishes I like are meat stew, jollof rice, peanut butter stew and others that are easy to cook” (Participant C Transcript). Typically, Gambian mothers in Columbus prepare it in a large pot so that it can be frozen and consumed for several days.

The second most cooked home diet dish among Gambian immigrant mothers participating in this study was peanut butter soup. For example, Participant B described peanut butter soup as an authentic Gambian food. As a Gambian, I can personally relate to this assertion because much of the Gambia is famous for cultivating groundnuts or peanuts. As such, peanut butter is readily available to almost every Gambian household. Therefore, it was no surprise to realize that Gambian immigrants still immensely enjoy one of their favorite dishes. Participant A, B and C all mentioned it as one of their commonly prepared Gambian foods.

Finally, the third most common home diet dish cited by Gambian immigrants in this study is known as Benachin, which is fried rice served with fish or meat and several

vegetables. This food is a famous dish in Senegambia. Indeed, it is the dish served during religious festivities and other celebrated occasions, such as naming, marriage, and funeral ceremonies among the various ethnic groups within the country.

The narratives above signify a broadening of the discourse on food among immigrants around the globe. The commonly prepared Gambian food by Gambian mothers in Columbus are the same as the commonly prepared and well-known Gambian dishes. These findings contribute additional knowledge to the discourse regarding immigrant home diet and indigenous food. Additionally, these findings highlight that the favored foods of Gambian immigrant mothers that participated in the study have not changed much during their stays in Columbus. As a Gambian international student and a mother, I recognize that these Gambian foods are culturally grounded in Gambian societies because their ingredients are locally raised and grown in the Gambia. Moreover, these varieties of food, such as Super Kanja, are healthy because they are easily digestible and rich in vegetables. This demonstrates that health is an important factor influencing why these Gambians in Columbus, irrespective of being away from home, still cook these favorite dishes.

These commonly consumed Gambian foods complement other studies on immigrants regarding their choices of home diet (Garnweidner et al., 2012; House et al., 2014). Specifically, this study's findings highlight a commonality of choices on the top three most favorable home diet dishes: Super Kanja, Domoda, and Benachin. As explained by Yeboah (2008), the contextualization of immigrant studies' findings is

important and revealing, and, in this case, it shows that Gambian immigrant mothers in Columbus, Ohio still live the lives of a typical Gambian with respect to diet.

Preservation of Knowledge of Home Diet

The third theme that emerged from this research question relates to the preservation of knowledge techniques among Gambian immigrant mothers. A vast array of techniques used to preserve knowledge, such as memorization, repetitive cooking, and teaching children to cook home diets, were identified. This is in alignment with research by Buseh et al. (2017), in which the authors invoke the importance of knowledge within immigrants' experiences.

Specifically, Participant A preserved the knowledge of cooking home diet for her family for posterity by showing her children the way to cook Gambian food. She posited that, "I am always showing my kids especially the way to cook Gambian food" (Participant B Transcript). In a similar way, Participant B revealed her strategies of preserving knowledge of preparing Gambian food by memorizing the techniques of preparing the food. She emphasized that when cooking Gambian food, she does it with pleasure, love, and enjoyment. Therefore, it becomes clear that, for Participant B, preserving knowledge of cooking techniques entailed memorization, but also that an enjoyment of the process was of paramount significance. Additionally, Participant C disclosed that her method of preserving knowledge of home diet preparation was through continuously cooking Gambian food. According to Participant C, this process includes cooking knowledge, but also requires knowing how to substitute domestic ingredients for Gambian ingredients in home diet dishes. Furthermore, Participant E mentioned that her

knowledge preservation tactics included an awareness of her health conditions so that she can be careful with the food she is preparing. For example, when cooking Benachin, which is usually cooked with vegetable oil, she mentioned substituting olive oil, which is healthier. She acknowledged that while this is a more expensive approach, the health benefits are worth the extra cost. Furthermore, Participant E noted that she avoids palm oil in her cooking because she believes its abundance of calories is not healthy. In terms of seasoning home foods, Participant E hinted that participants amended their traditional methods of preparing domestic foods to accommodate healthier food ingredients. As such, it can be argued that participants of the study were sensitive to considerations about their health and wellbeing while living Columbus.

Similarly, through the lens of food knowledge, home diet and health considerations among Latinos and African immigrant communities are noted in other studies (Martinez, 2013 & House et al., 2014). For instance, Martinez (2013) explained that Latino immigrants in the US are conscious of unhealthy domestic food and avoid it. Similarly, House et al. (2014) explained that some African communities in the US consider some indigenous food as too risky to their health and wellbeing. Some of the participants in this study hinted that these foods were, in their view, not fresh. In fact, while buying domestic ingredients, they described tending to look for the country of origin for the ingredients, some of them avoid buying food from China (House et al., 2014). In summation, knowledge of preservation of cooking home diet is a significant component of immigrants' endeavors when it comes to home diet preservation. Therefore, it is important to engage with immigrants so that techniques and knowledge

sharing for preservation of home diet are disseminated or captured in immigrant discourses, particularly with respect to Gambian mothers, whose voices are underrepresented in the discourse. Additionally, these findings showcase that immigrants teach their children how to cook home diet through routine training.

However, most participants' perspectives appear to be ethnocentric as they expressed preference for home diet as opposed to indigenous food. Their responses indicate that they derive their conceptions of indigenous food from fast food and restaurants instead of from food prepared in American households in Columbus. Thus, it is not clear how much they know about how indigenous meals are prepared in American homes. Based on my personal experience, a vast majority of my American friends in fact prefer healthy meals in their homes.

Chapter 3: Identity

Introduction

The significance of identity through home diet emerged as one of the most important themes of the study, which is detailed in Chapter Three. The results sections of this study are guided by the following research question:

What are the identity and culture linkages to home diet among Gambian immigrants?

Results

Home Diet and Identity

Participants in the study reflected on their identity through the lens of home diet while residing in Columbus.

While responding to one of the research questions of the study, Participant A underscored that she always seeks ingredients in African stores that sell ingredients she can relate to as a Gambian immigrant. As such, Participant A indicated,

“For example, when I go to the African stores, I will check for ingredients that are from the Gambia. For example, if I want to buy sorrel leaf to cook peanut butter soup, I will check the label packaging from the Gambia. But, if I don’t have the sorrel leaf from the Gambia, I will always replace it with spinach that I can get from stores like Walmart, Kroger, despite my preference for Gambian ingredients” (Participant A Transcript).

Further, despite the identity meaning associated with food as indicated above by Participant A, she also explained that she, as a resident of the US, buys some indigenous food as well. Thus, she posited that,

“For my children, they honestly like Gambia food, but sometime when we are out which shows we are part of the community, I buy them food mostly from McDonald’s, Wendy’s and others. Sometimes when I am happy and energetic, I buy the ingredients from the local stores and prepare burger or pizza or spaghetti for my family as well. I do all these just because, as a resident, whether I know it or not, my identity has changed - not strictly Gambian or US per say. I also prepare the local food because I do not trust buying from restaurant as I do not know how they cooked it and what stuff they add into the cooking, since there are certain foods I and my family do not eat any food that has wine and pork and drink alcohol. Thus, I prefer cooking these American foods for my family as a resident of Columbus who is sensitive to prohibited ingredients that due to identity as a Gambian Muslim” (Participant A Transcript).

Despite buying indigenous food, Participant A mentioned that Gambian food is what she knows and that her family cooks it every day. In some instances, without eating Gambian food she is never satisfied when compared to consuming home diet. In particular, Participant A said that,

“Yes, because no matter what ever food I eat it seem like I am not satisfied the same way if I eat Gambia food” (Participant A Transcript).

Furthermore, connecting her identity and home diet, Participant B affirmed that,

“So, my home diet definitely makes me grounded to my Gambian identity and culture, it makes me feel not forgetting my identity and culture of who I am. Again, I see people that eat American food and they like it, that is okay for me but for myself it contributes to my Gambia identity. When am eating I feel like okay not just because of

the taste alone but it always reminds me back home, the Gambia. Additionally, it reminds me of my childhood and a lot of other things. So, it keeps me grounded to my identity and culture and it always make me think of Gambia in a special way. So, another thing I will add to this is that again it contributes to my Gambian identity since it reminded me of very dear ceremonies, such as naming ceremonies of cousins and the very special home diet that were served” (Participant B Transcript).

Simultaneously, Participant B also recognized her new identity partly consisting of the US identity and its food culture. Thus, she highlighted that,

“Here in The US during Thanksgiving festivity, I observed the occasion in a different manner. I prepare turkey as a common American food for the occasion, but I use Gambia ingredients and recipes or dishes as well during Thanksgiving. As done by Americans, I also invite friends and fellow Gambians to grace the festivity, so as a Gambian in Columbus, it does not prevent me from participating in US festivities. So, I track the festivity time or season and keep in mind of those to invite. The Gambian food I prepare appeals to the Gambian because it reminds them back home. Nonetheless, I still make turkey, but I do not do it the same way the Americans seasons their turkeys. Exactly, I use the Gambia way of seasoning chicken for the turkey. Also, cooking turkey, I have an American friend who taught me how to prepare it because in the Gambia, we do not have Turkeys and is not served in our traditional meals” (Participant B Transcript).

The association of home diet and identity was profound among the participants in the study. Participant C, in her response, explained the relationship between her identity

and home diet as it denotes where she and her family originated. Specifically, she stated that,

“As a parent we try to do our best to make sure we cook our cultural food so that our families can know where we come from. So, these Gambian foods represent what we know, no matter how long we stay in the US because one day we will go back. I also want my kids to know our foods because if you do not cook your home diet, your children might not know how to do it and if they go back, they will not be able to eat it. In fact, the kids may ask questions such as, “What is this?” and would not be able to eat it. So, continuous eating of Gambian food by my family prevents my kids from having the problem when we go to Gambia. Because they already know Gambian home and will make it easy for them to eat all the Gambian dishes. Now it becomes a common habit that my kid asked for typical Gambian food of their choice anytime I plan to cook. Such choices range from peanut butter soup/sour, okra soup and so on, this because I cook Gambian food for them. But I think some parents here in Columbus forget where they are come from and this will hurt them because their children will not know where their parents come from and heritage food. I know my kids were born here and we live here, but I try to do my best to teaching them who we are, where we came from, and what we eat by cooking my Gambian home diet” (Participant C Transcript).

Participant D also noted that home diet characterizes her identity as a Gambian immigrant staying in the US. While responding to this question she claimed that, “My home food is part of me, it makes me a Gambian wherever I go. I love cooking it and it makes me complete” (Participant D Transcript).

Participant E affirmed that home diet makes her identity unique irrespective of sometimes eating indigenous food. As such, Participant E explained that,

“Home diet have contributed a lot to my identity because of its uniqueness, when I came to America newly, I was eating McDonald’s and Wendy’s food, because they were cheaper than eating Gambian foods, although my number one choice is Gambian food. So, I can buy a burger just for a dollar according to the money I make. Therefore, as a Gambian, the income I make can determine the type of food one eats. Then, I would say my identity was compromise because of my low income. In other words, I mean as a Gambian to maintain my identity properly requires me making a decent amount of money to sustain my proper Gambian way of life and cooking my preferred Gambian food. Typically, I spend \$10 each day for my food. However, eating these foods I never felt satisfied because of my heath concern and it’s different from my food. I always miss Gambia food as an immigrant in Columbus. Like I said, food is very important because it is part of our culture as Gambians, it’s like everyone have their unique food and I always believed that we have the best food” (Participant E Transcript).

On the relationship between home diet and her identity, Participant G emphasized that,

“My food has contributed a lot to me because wherever I go, I eat Gambian food. For example, whenever I go work, I packed Gambian food. So, I eat Gambian food all the time. Similarly, I noted that many Africans in my workplace bring their food as well. Interestingly, my American colleagues will say your food smell nice. They (Americans) are also always curious with my food as some would say to me, “What do you have

today?” I use that opportunity to tell them about Gambian food; therefore, I educate Americans about my identity. Precisely, I normally tell them the recipe, but I wonder they can prepare it because of some the Gambians ingredients can only be access from the African stores. Some American friends would even ask me to give them Gambian food whenever I cook. So, this is how I show my identity as a Gambian. There was a time I owned and operated a restaurant and only cook and sell only Gambian food” (Participant G Transcript).

Participant H, while reflecting on home diet and her identity, indicated that food serves as a symbol of her culture. Thus, she recounted that,

“Food is culture and culture is people, food speak the language we understand and identifiable wherever I am. Many Gambians in Columbus share a common opinion on this” (Participant H Transcript).

Similarly, Participant J explained the importance of her identity and symbolism through home diet by stating that,

“For me eating fish, peanut butter soup, okra soup, Benachin is part of what it means to be Gambian. Since I was born, I knew myself to be eating fish. I have eaten different kind of fish as Gambian therefore fish is part of my culture, my diet and it serve as an identity for my Gambianess. You know the Gambia River has fresh and fish is abundantly available, therefore, fish is a Gambian trademark. So, eating these foods contribute to my identity as a Gambian while staying in the US” (Participant J Transcript).

Home Diet and Preservation of Gambian Cultural Heritage

The participants in the study underscored the relevance of their home diet to their cultural heritage as Gambians residing in Columbus. Participant A hinted that home diet helped preserve her cultural heritage and bestow it upon her children. Thus, she remarked that,

“I believe food is part of my culture because as you may know, it makes my kids to know where they came from, know their food, and what their country food look like in terms of food. When they go there, they will not have any problem eating the food. Gambian food is one of the most important part of my culture in Columbus that I am not losing” (Participant A Transcript).

Furthermore, Participant A indicated home food symbolism goes beyond her culture because it helps her to believe in herself. In line with this, she indicated that,

“I want to add that we must believe in our self and eating what we know is the best way to do that, even though we are here but we have to eat the food we know. If I do not that, I will lose my culture and start eating everything, which even some Americans would not because of health issues does food can caused. Therefore, one shouldn't forget where he/she come from simply by eating the food you know” (Participant A Transcript).

Similarly, Participant B explained that the connection between home diet and her culture is that, during Gambian ceremonies, food is one means of showcasing her culture:

“Because of our culture, that is one of the reasons why I always cook Gambia dishes during certain ceremony. Therefore, I transfer this important knowledge to my kids because I want my kids to know their culture and the role food in Gambian

ceremonies. I always talk with my daughter and show her the way we cook certain food on occasions such as Tobaski, Koriteh, Tamharit and naming ceremonies and weddings. This is important because through food, I am able to tell my kids what types of food they need to cook in order to observe our religious and cultural occasions even though we are not in the Gambia” (Participant B Transcript).

Additionally, Participant C explained that she introduced the Gambian food diet to her children so that they can prepare it during festivities. Along these lines, Participant C said that,

“As you see right now my daughter is cooking Gambian porridge, which I taught her, and this is one of the dishes I normally prepare to break my fasting, as a Muslim fasting is an important pillar of my religion. Also, during Ramadan, we eat normal food just like we are in Gambia. During Ramadan as week, every day my family cook three different meals so that we enjoy variety and regain strength for the fasting period. But because of time is a constraint, I only prepare two meal every day for my family to break during fasting occasion. Therefore, cooking home diet during festivities connect me to my root and culture and funny my children love it. In fact, during Ramadan we eat our last meal at 4:00 am and that practice is because of my culture. My children always ask mummy what we are eating today. My kids are now familiar waking up that time of the hour just to eat. These are things I want my kids to know about my food and my culture through religion” (Participant C Transcript).

Interestingly, even during Thanksgiving, Participant C linked food and local cultural practices in Columbus by stating that,

“Even though I am a Muslim and from the Gambia, we don’t celebrate Thanksgiving, but we the Gambian community here in Columbus do during Thanksgivings. We the Gambians gather not just here but those you know around you. So, we observe it by coming together cook different Gambia dishes, laugh, chat and eat together. We don’t only celebrate the culture and gesture behind Thanksgiving we do the same for the July 4 celebration” (Participant C Transcript).

In a related manner, Participant C indicated she integrates her home food in a cultural way by participating in American culture. She disclosed that,

“For me personally, while cooking for Thanksgiving, I cooked it using Gambian ingredients and seasoning. Because turkey is bigger than a chicken, I must season it well so that it will be taste good as the way we season our chicken. Although, we the Gambian community in my side of Columbus do not gather in one place every time to celebrate it, but we rotate among ourselves for every Thanksgiving ceremony. For example, the last Thanksgiving. My kids also celebrate Halloween, although not in terms of food, activities through school and the community. Then, my identity has included a mixture of some cultural aspects of the City of Columbus I as a Gambian immigrant” (Participant C Transcript).

Participant E explained that she observed her cultural and religious festivities as a Gambian immigrant residing in Columbus:

“During Gambian festive seasons, such as Ramadan and Tobaski, I observed all of them here in Columbus. During Ramadan, my family use to eat different food but also light food that I normally cook. Also, during Ramadan, I always want to eat special

Gambian food even though I am in America, so I try as much possible to cook every time during Ramadan. Like in the Gambia people, every day I cook different Gambian dishes, porridge, meat stew, rice and making local drinks just to have a feeling of the Ramadan as it is done in The Gambia. However, here in America, we do not have all these times to cook every day, but as I said, I tried my best to cook Gambian dishes during this special festive season. Here in the US time is a constraint because I also go to school. Because both going to school and working at the same time, I cook a lot during the weekends and store it in the refrigerator for my families particularly during Ramadan. As a community, it is a cultural practice here among the Gambian living in Columbus during this festive to contribute money and we cook Gambia foods and go to the park with our kids to celebrate just like it as it is done in the Gambia. This practice of ours as the same tradition back home, where people get together to celebrate it. Therefore, we try pretty much to do our tradition here in the US during Ramadan and Tobaski celebrations through food” (Participant E Transcript).

Simultaneously, during American festivities, Participant E explained that she participates in them while also maintaining her cultural food:

“Well regarding American festivities, I do not participate 100%, we do cook Gambia food by making our own typed of grill meat (Afra meat). I also prepare Benachin served with meat and sometimes fish just to make it the American festivity as a Gambian style. Although, sometimes, I make hot dog and burgers for kids during these festive occasions. But these hot dogs and burgers are prepared by me using Gambian seasoning and not in the same way as done in the restaurants” (Participant E Transcript).

Furthermore, Participant E explained her reasons for integrating the cooking of Gambian food during festivities as a desire to maintain the cultural identity of her children for when they return the Gambia. Thus, she highlighted that,

“Because we came from somewhere to America, one day, we are going back to our roots. For me, I do not want to retire here in America, because I want to go home to enjoy my latter part of life. So, it is important for my kids to know we come from the Gambia and let them know their culture, tradition, and food. So, I teach them using YouTube to watch music Senegambian African videos for them to familiar with our culture and way of life. Like I told them in Gambia, we like sucking bone of meats, we love it, is not because we are hungry and do not have enough food. But we just enjoy socking bones of meat and fish. So, my son like to do it with fish bones, he will sock it. So, my kids do all this because I show them who they are and how Gambian eat and enjoy their food. So, being away from home is not easy, because one moves into different culture that affects everything about us Gambia, especially our food. But, through my culture, I can show my kids, who we are in terms of our food” (Participant E Transcript).

Participant F underscored that Gambian home diet is part of her identity and culture because it makes her happy. She indicated that,

“Gambian food is part of who I am. This is because without eating Gambian food, I feel like my life is not complete. Eating Gambian food makes me happy and I love it so much. My family’s identity and culture is tight to food, for example as a Mandinka, we cook super kanja and nada (peanut butter) a lot, these foods are common Mandinka (Ethnic group) food in the Gambia” (Participant F Transcript).

In a similar manner, Participant H explained that the sharing of food is a way to showcase her cultural identity in Columbus. Indeed, she explained that,

“Our culture allowed us to share food with friends, family and neighbors. In fact, it is a common practice to share food with the elderly for blessing, respect, and love. So, culturally, we share home with friends, family, and strangers. My cultural value is still with me, I still do it in Columbus” (Participant H Transcript).

Finally, Participant J also explained that, because of her identity and culture, she prepares certain home diet dishes to celebrate festive occasions. Thus, she pointed out that,

“Home diet contributes to my cultural heritage because anytime I have ceremonies. I prepare Gambian dishes during naming ceremony, marriage, and birthdays. For all my kids, when they were born, during their naming ceremonies, we cook Gambian dishes and serve it to all gracing the occasions. Typically, we also cook Gambian traditional porridge during naming ceremony of my babies. These is the way home diet contributes to my culture heritage” (Participant J Transcript).

Home Diets Prepared During Gambian Religious Festivities

In addition to identifying their most common Gambian diets, the participants were able to identify the food they served during monumental moments marking their identity and cultural heritage in Columbus.

Participant A expounded on this point by stating the reasons for her choices and that she avoids some foods due to heartburn:

“In Ramadan, during Ramadan I always cook especially the millet porridge for my husband and meat stew for the kids. I also cook pepper soup for us to break our fast.

My husband loved the pepper soup, I prepare it for him. We don't normally eat rice during Ramadan, because my family complains that when they eat rice it gives them heart burn during the day while they are fasting. So, sometimes we miss it so much that I cook a little bit" (Participant A Transcript).

Furthermore, Participant A explained that she opts for these foods for her happiness by underscoring that,

"You know during Ramadan, so many foods become tasteless as people keep fasting throughout the day. Therefore, these kinds of food such as millet porridge and the pepper soup help them to eat while rice seem very heavy. For the rice when you take two to three spoon you are full, millet porridge is good during Ramadan when you eat during night time or early morning time, it digests quick and keeps one hydrated" (Participant A Transcript).

In describing some of the Gambian food she prepares during feasts, Participant B claimed that, during these occasions, she cannot serve her family indigenous food. She asserted that,

"So, when it comes to Gambian festive seasons or events, I always prepare Gambia dishes that Gambian back home prepare during those periods. Therefore, during Ramadan when someone is fasting you cannot give them pizza because traditionally, they need to eat food they are used to as Gambian. I used pizza as an example because some people might argue that it's not an American dish. So, what I want to emphasize is that you cannot give someone who is fasting food that are not typically eaten during the fasting period when it comes time to breakfast. So, I always cook Gambian dishes during

Ramadan so that they feel like they are in Gambia and have the same feeling. For example, during Ramadan, I sometimes prepare beef stew in Gambian style. So, when it comes to other festivities, such as Tobaski, I grill meat, cook Chere (Gambian couscous). These types of food are usually served during Tobaski feast. So, I must cook these foods during Tobaski so that so that I joy the festive occasions. So, this means without these foods, I would never enjoy the food. So, my food accords a sense of belonging and culture as it relates to this occasion. Anytime I eat these foods, it connects me to my home (Gambian). I feel like being present during these festive occasions there even though I am absent. Overall, home diet makes me connected to religious festivities and demonstrates my cultural and defines who I am and what I believes in” (Participant B Transcript).

Participant F stated that, during Gambian festivities, she observes them locally and prepares Gambian food to mark these occasions:

“During religious festivities or occasions such as the month of Ramadan, I cook Benachin mostly. Also, when breaking the fast, I cook variety of Gambian food for my family. During Tobaski and Koriteh, I cook Benachin for my family. Basically, during these festivities, I prepare food as I am the Gambian. In fact, I share photos of my food with my family in the Gambia and always see your festivity is not different from ours due to the Gambian food prepared” (Participant F Transcript).

Additionally, Participant H explained that she prepares the most commonly cooked Gambian dish during festivities:

“Most Gambian like to prepare Benachin during festive occasions. People love it when cook very well. So, during festive, I cook Benachin for my family because I do not want them to miss home food during this important occasion. I normally go to the African stores make so I get all the ingredients and prepare the Benachin as exactly I do while in the Gambian because the occasion food cannot be modified” (Participant H Transcript).

Participant J also disclosed her most cooked Gambian dishes during festivities by mentioning that,

“For me, I prepare Gambian food the same way we do it in the Gambia during festivities. For example, during Tobaski, I and my husband buys a whole goat and prepare variety of food from it and invite our friends to eat with us. We will use this occasion to refresh our minds with back home. We talk about everything, family matters, our ups and downs of life. The occasion also enables us to forget our worldly challenges we faced in Columbus because our minds are fixated on the occasion and nothing else. So, I can say that our food facilitates our mind in a positive way and to only think as a typical Gambian, especially Tobaski and other festive occasions” (Participant J Transcript).

Discussion

Identity is important to the Gambian immigrant community in Columbus as far as their home diet is concerned. A similar pattern or trajectory has been noted in other studies (Ray, 2017; Yeboah, 2009; Martinez, 2013; House et al., 2014). Clearly, home diet had significant meaning and implications for Participant A because her identity as a

Muslim prevents her from eating any food that contains alcohol and pork. As a result, she does not have any choice when it comes to food selection, other than to always strictly adhere to her home diet. Further, participant A claimed that consuming home diet is an important aspect of immigrants' identities because it satisfies them more whenever they eat a home diet.

Therefore, it is plausible that any food foreign to some Gambian immigrants may cause them to feel unsatisfied. Thus, to some Gambian immigrants, home diet identity denotes satisfaction. However, one exception was an instance when Participant A described defying her identity as a Gambian and explained that, when she is out with her children, she buys them food from McDonald's, Wendy's, or from other fast food restaurants. However, she also emphasized that, any time she has the opportunity, she prepares her own food for them because her identity and religious heritage does not allow her to consume alcohol or eat pork. Therefore, because of identity and heritage, this Gambian immigrant mother in Columbus tended to avoid consumption of domestic food whenever possible.

Some participants also found it difficult to go without their home diets because they are deeply connected with their own food. Therefore, it can be inferred that home diet symbolizes identity among Gambian immigrant mothers in Columbus. As postulated by Participant B, regardless of cooking Gambian food frequently, going without Gambian food is a challenge for her. This is because, when not eating Gambian food, she remains unsatisfied. Furthermore, Participant B hinted that home diet kept her grounded as it is a way of preserving her Gambian identity while away from home. She claimed that the

Gambian home diet reminds her of her childhood days while growing up in the Gambia and participating in naming ceremonies and such. Therefore, it was observed that Participant A uses food during festivities to invite people with whom she shares identity and heritage. This shows that food can be used a medium to maintain immigrants' identity and heritage. This finding of the study affirms Yeboah's (2008) assertion that immigrant identity has a tremendous effect on their socialization.

Home diet helps maintain the Gambian identity and community (Ray, 2017; Waltz et al., 2017; Blanchet, 2017). As alluded to by Participant C, her identity is attached to home diet because it manifests a strong association with their heritage. In terms of identity, she described its relationship to home diet as pertaining to Gambian cultural food, her people's taste, and her family. Participant C emphasized wanting her children to know their origin and telling them that, no matter how long they stay in the US, one day they must return to the Gambia. Therefore, one can deduce that Participant C uses food as a medium to preserve her identity and the identity of her children while living in Columbus. Finally, Participant G linked home diet with a sense of community it conferred upon Gambian immigrants. Thus, she indicated she referred to home diet as "Gambian food" to her friends anytime she has time to share food with them. This suggested that home diet is used by Participant G as a medium to showcase her identity to her friends and community in Columbus.

In another domain, home diet denotes the uniqueness of being a Gambian, as was also observed in another study carried out in the US among Asian American immigrants (Lakika and Drimie, 2019). Specially, Participant D reflected on her identity and home

diet through the lens of uniqueness. To her, irrespective of the cheap alternative food she can obtain from the fast food restaurants at sometimes \$5 per meal, her views on the favorability of home diet remain unchanged. She posited that home diet is carrier of culture because it is an important part of identity. Furthermore, she explained that the home diet she prepares is unique in the Columbus area, which makes it a way to preserve her identity as a Gambian immigrant.

Overall, identity is a central aspect of home diet among the Gambian immigrant mothers staying in Columbus. In the present research, food satisfaction emerged as a driver of Gambians' food choices, as previously indicated by Parasecoli (2014). This finding shows that immigrants' identities in Columbus, Ohio, are significantly influenced by the satisfaction they gain from eating their home diet. Thus, it can be claimed that the satisfaction immigrants derive from home food helps them maintain their identities as Gambians while residing in Columbus. Secondly, another participant in this study maintained that her home diet keeps her connected to her origin as a Gambian immigrant in Columbus. This implies that this is who she is as a Gambian away from home. This experience was linked to her childhood days while growing in the Gambia, especially eating food during symbolic occasions in the Gambia, such as naming ceremonies and other festive occasions.

In other respects, home diet entails cultural representation for Gambian immigrants in Columbus. Research by Muktiar (2015), de- Craft et al. (2019), Massey (2015), and Ezme (2017) note the linkages between food and culture. Evidently, Gambians in Columbus participate in festive occasions. Apart from participating in

Gambian festive occasions, they also participate in American occasions as well. With respect to domestic occasions, Participant A participates in Thanksgiving, but prepares the meal using ingredients from the Gambia. This implies that, although it is an American festive occasion, her Gambian identity is not lost in the process of celebrating it.

In conclusion, as a parent, one participant indicated that she is fully aware of the significance of the connections among food, identity, and cultural representation, particularly with respect to her children. Participant E explained that her family uses home diet to preserve the identity and heritage of their children, so that they never forget these foundations.

In a related manner, Mukhiar (2015) and de-Graft et al (2019) argued that home diet is about a sense of self and is a method of identity stabilization through symbolic consumption. Thus, it can be deduced that the Gambian immigrants residing in Columbus preserve their knowledge of food because they want to conserve their identities while living in the United States.

Participants in the study explained that they preserve home diet knowledge due to the importance of their culture. This fits into the larger discourse on home diet. For example, Garnweider, Terragni and Mosdal (2012) indicated that immigrants preserve their knowledge for cooking home diet because they value preserving aspects of their original food habits. Further, Garnweider, Terragni and Mosdal (2012) asserted that knowledge preservation of home food among immigrants symbolizes effective communication of cultural sensitivities through food. Similarly, Gambian immigrant

mothers residing in the city of Columbus preserve their knowledge of cooking their home diet by handing it down to their children.

In conclusion, the concept of identity among Gambian immigrant mothers within the context of food has a broad meaning, ranging from religion and familiarity, to community and stability. Therefore, it can be claimed that the concept of identity among these participants is anchored and driven by a sense of community belonging rather than by an individualistic interpretation.

Chapter 4: Home and American Food vs Integration

Introduction

This section focuses on how the participants in the study used food during the integration process. The primary integration strategy that emerged in the context of this study was through the inclusion of domestic food ingredients while cooking indigenous Gambian food or dishes. The research question below guided the results that emerged for this section of the study:

How do Gambian immigrant mothers access home diet and integrate home food with domestic food?

Results

Two main themes emanated from the interviews: access to home diet ingredients and integration or substitution of home ingredients with domestic ingredients.

Strategies for Accessing Home Diet Ingredients

During the interviews, participants in the study revealed how they access home diet ingredients in Columbus.

Participant A revealed that she accesses home diet ingredients from the African stores around Columbus. She highlighted that,

“I get home diet ingredients from the African stores around Columbus; however, these stores are not located in the same place. Therefore, I did monthly grocery from them to go around for my monthly needs, because I do not have time to go these many stores frequently. I also utilize other international Asian store like Saraga international to

buy fish and from other stores around, such as some Arab stores and Chinese stores” (Participant A Transcript).

Conversely, irrespective of access, Participant A revealed some constraints encountered while purchasing home ingredients in Columbus:

“However, home ingredients are very expensive, but we don’t have a choice because we want to eat Gambia food home diet. Nonetheless, we forget about the cost and buy what we need. I also use Kroger to buy fresh Okra when am cooking okra soup and other small other vegetable ingredients because it makes no sense to bring fresh okra all the way from the Gambia” (Participant A Transcript).

Additionally, in terms of access to home diet ingredients, Participant B also revealed that,

“It is hard sometimes to have home diet ingredients, because sometimes you go to the African market store and they run out of stocks, such as the dry/smoke fish, the locust bean and other ingredients. Sometimes because I really want to cook a Gambian dish and need certain ingredients and I cannot find it. This is frustrating and a very different situation compared to home where these items or ingredients are always available. Again, these ingredients access to these African stores is sometimes very costly. But I don’t have a choice, so I always buy them because I most use these ingredients when cooking. So, I would say not having the ingredients on time and the high cost makes it these items inaccessible for the most part for me. The good thing is some areas in the East side of Columbus, there are some stores that are close together. So, for me, I can navigate or drive around to shop for what you need making some of the ingredients available, but the

affordability is the challenge to access the food. So, I can say that really there is availability at most times but in limited stores making their prices not competitive” (Participant B Transcript).

Additionally, Participant B revealed her difficulties in learning how to access home diet when she first arrived in the country. Thus, she explained that,

“So, when I came new, I wanted to cook, and my husband took me to Kroger to buy some ingredients. But he took to places totally different because all what was there was freeze meats and fish to prepare Gambian food, because I am used to getting fresh meat and food. I could not believe myself that I could not get any single ingredients such as fresh meat and fish to cook. I could only get peanut butter and had to buy the freeze meat to prepare a peanut butter soup. So, for a long time, I was just modifying ingredients, such as using spinach instead of African serrel leaf and mixing other ingredients as well to cook my food. So, I started eating American food, that I was not used, such as hot dog, burger, and pizza. So, I remember visiting a friend he asked me what food I like most in America. And I response was hot dog and she was kind of, “Oh wow, hot dog. That’s good.” However, she advised me that the food ingredients used to prepare American food has alcohol and wine, so since I don’t prohibit by my religion to avoid these things, I am kind of avoiding it. So, it makes it really bad for me. So, some of the ingredients I buy from the American stores and restaurants I stop buying them because of the alcohol and the wine and stuff like that. For the most part also, these foods have sugar or honey on their chicken and for me that is a no no. So, before I discovered the African stores to access home food, I suffered a lot” (Participant B Transcript).

Interestingly, Participant B disclosed other alternatives to accessing home diet ingredients, such as ordering from home and online:

“One interesting fact is that I keep my connection with my home country by always travel back home to the Gambia, and whenever I am coming back, I always bring along some ingredients. So again, rather than bringing African cloths, I choose to bring food stuffs because it is more important to me. So, I reduce my baggage weight by leaving to my clothes behind, all that is done just to create space for home diet ingredients. This is because these ingredients are way easier and less costly when compared the price to the ingredients here in Columbus. However, there are challenges attached to bringing home ingredients because of the custom here in the US. I must declare these items at the airport upon arrival and they always want to know everything. So, sometimes, I can be lucky if you explain that is for your own personal consumption, then they would sometimes allow you pass with it. So, this is another strategy that I use to have home diet ingredients in the US. Another way of getting home diet ingredients is through online, some Gambian sell online. So, these items also buy from online, and the sellers will ship these items to my address” (Participant B Transcript).

Furthermore, Participant C told her story of accessing home diet ingredients by revealing that,

“In Columbus, we have big African store such as the one in Livingston and the one at Morse Road, I used them a lot to buy home diet ingredients. For example, when I buy palm oil and a very good one, I go to the store in Morse Road. The Morse Road have all the African ingredients you may need to prepare a Gambian food. Although, there

ingredients are not fresh like in the Gambia, I am happy I can go there and get what I want. Another issue with the African stores is that the ingredients are expensive, but I understand because everything is imported, and they are doing business and they want to make profit. So, I can have these ingredients but with a heavy price to pay because I do not have a choice. I have to cook Gambian food for my family” (Participant C Transcript).

Furthermore, Participant C also expounded on her alternative strategies for home diet ingredients as follows,

“I also access home ingredients from other sources, sometimes, some Gambians bring food stuffs from Gambia to sell it here, examples of such items include dry snails, smoke bongo fish, locust beans, smoke catfish, and others. So, I buy from them as well, I feel comfortable buying from them whenever their items are here, because I know their items are fresher than the ones in the African store. so, whenever, they bring these food items from Africa, if one is late to hear the items arrival, most of time the food stuff is gone or all demanded because people will prefer buying from these dealers because their items fresh and can buy in bulk from them so that they can have these ingredients for a very long time” (Participant C Transcript).

Moreover, Participant D also explained how she accesses home diet ingredients in Columbus:

“Access to Gambian home diet here in Columbus, I will say we are very lucky now when compared to my first trip to the US in Columbus 2011. Then, we do not have much access to these goods as at now. This was because, stores such as Saraga and the

so many African markets stores were not in existence. At that time, there was only three African markets but now in the city, there are more than 20 African stores in Columbus. In situation even without a ride, I usually board the public transport and go to these stores. The only challenge associated with the African stores is that their items are costly. So, if I want to cook a real Gambia Okra Soup, or the Potato leave, it might cost me up to \$100 to prepare because I cook in big quantities. Another challenge to accessing home ingredients is that sometimes the ingredients needed for Okra soup such as smoke catfish. So, instead of that, I buy use mackerel instead of smoke catfish, which me cost \$35. So, cost wise, smoke Mackerel is far cheaper. For me, African food is expensive in Columbus. Finally, another challenge regarding access to home diet is lack of advertisement compared for US food. US food are advertise on television and on the internet, it influence my kids choice of food, I believe advertisement where also available, it will also influence my kids here as it favorably does for American dishes” (Transcript Participant E).

In addition, Participant H described accessing home diet ingredients from the African stores in Columbus. She expounded on the point by asserting that,

“From the species, to bread, meat, chilies, hot sauce and vegetables, all of them are available in the Columbus, so, for me, Gambian food ingredients are very accessible in the community of Columbus” (Participant H Transcript).

Similarly, Participant J also reflected on how she accesses home diet ingredients in Columbus, by stating,

“Well I do not have any problem when it comes to accessing Gambian food ingredients here in Columbus. We have many African stores, there are also some individual like me who sell ingredients, and I am fortunate to have the contact information the major dealers in the city who also import from the Gambia. The only problem for accessing home diets ingredients is that they are costly to someone not making much money” (Participant J Transcript).

Integration Strategies of Domestic Ingredients into Home Diet Preparation

Several participants (C, D, F, H, and J) in the study highlighted some of their integration techniques in Columbus through substituting domestic ingredients for needed home diet ingredients.

Participant C underscored that her integration strategies for home diet with domestic ingredients entails the following:

“You know as I said, here there are certain Gambia dishes I can cook such as meat stew, chicken yassa, peanut butter stew, because their ingredients are very common and available here just like in the Gambia. As a result, I am able to use domestic ingredients to prepare my Gambian food. I can share due to the same ingredients needed to prepare are the same also available in the stores here. So, through food, I can use US ingredients to cook Gambian food. But the only different is that the food prepared tastes are apart from those prepared from the Gambia, simply due to the difference in seasonings. So, I use these commons ingredients in cooking for some dishes where possible but for some other Gambian dishes, I cannot substitute its ingredients with any of the domestic ingredients. Basically, vegetables are easy things to get, but if I want to

cook okra soup, the smoke fish, or the locust beans, I must go to the African store because there is no way to substitute it. Another possibility to use domestic when cooking Gambian food is to use frozen meat and other ingredients to cook Gambian food. I can normally find these ingredients in the African store they are always freeze food, not fresh as they are stored for a long time. Sometimes, I do not even feel comfortable even to cook it. I know I am putting them in my food everybody is a bit scary of health concerns. My integration of domestic food is done when the ingredients I need to use are the same with my home food ingredients, but my way of cooking makes it taste as a normal Gambian food” (Participant C Transcript).

Participant D highlighted that she substitutes home diet ingredients for healthier indigenous items, as explained below:

“For the fact that, in the Gambia, our dishes normally are seasoned with the Maggi or Jumbo, which are not very healthy. For that reason, the good thing about cooking Gambian dishes here in US, I have the opportunity to use different plant seasonings other than Gambian seasoning. However, I used the chili seasonings as well so that the food can taste very good as I am in the Gambia. It is because of the healthy seasoning; I substitute some Gambian ingredients by using healthier seasonings available here when cooking certain Gambian dishes” (Participant D Transcript).

Conversely, Participant D mentioned that she is constrained when substituting typical Gambian food ingredients. As a result, she revealed that,

“There are some Gambian diets that one cannot substitute the ingredients because they have special ingredients. An example is the okra soup. I can add other ingredients,

but I cannot substitute the main ingredients needed to prepare it” (Participant D Transcript).

Additionally, Participant F also described integrating some domestic ingredients while cooking her Gambian dishes. More precisely, she asserted that,

“I integrate domestic ingredients in my cooking a lot. If I do not have smoke bunga fish, I used tilapia fish instead. So, for me, availability or not of home ingredients shaped my decision either to use domestic ingredients or not when cooking Gambian food. However, I am concerned with some domestic ingredients because of the chemicals put in them, for example, chickens containing antibiotics, they make me scared” (Participant F Transcript).

Moreover, Participant H expounded on her process of substituting some indigenous ingredients for home ingredients to upgrade her food. She explained her rationale in the following way:

“Gambians like spicy and seafoods a lot. So, here when I am cooking Gambian food, I tend to be creative by adding new indigenous ingredients in my food. I add shrimps whenever I am cooking Super Kanja and Plasas, cassava leaf soup. This makes my Gambian food so special and different from my usual Gambian food. Cooking is an art, that’s the reason why I elevate my own diet by adding anything that will make it taste and look better” (Participant H Transcript).

Similarly, Participant J claimed that she integrates indigenous ingredients while cooking Gambian food because she has the option to do so. As such, Participant J revealed that,

“In most cases, I do integrate some seasoning into my cooking. I seize on the opportunity here because of availability of variety, there are some seasonings here that one cannot find them in the Gambian, such as paprika, coriander, rosemary, and many other seasonings. So, I always used them or incorporate them into my cooking to give it a great flavor. I love these seasonings and I can tell you I put them in all my food now. Also, because some ingredients are expensive and not available in abundance, I substitute them. I use smoke turkey instead of smoke catfish to prepare my okra soup or sweet potato leaves. But the good thing about these ingredients is that I now have the ingredients. I am now a businesswoman; I import Gambian food ingredients to sell and for personal use. Items I sell most are smoke catfish, fresh fish, and the red African palm oil. These ingredients are in high demand. Gambians around wants them so much, whenever my supplies arrived, it will not take time to sell out” (Participant J Transcript).

Hindrances to Integration

Some of the participants identified some obstacles that impede the integration of domestic ingredients while cooking Gambian food.

Participant A attributed her hindrances in using domestic ingredients when cooking due to health reasons and her faith:

“I believed that Gambia ingredients and food are healthier. Here, most the food ingredients have preservatives. I am very worried because if you look at the rampant spread of cancer is very alarming in this country. So, I am afraid to use many of the indigenous ingredients because I care about my health and that of my family. That is why I do not buy food from outside. I prefer to cook my own food, so that I know what to add

or what not to add. Some of the fast food, they add wine in their food. As a Muslim, I don't drink wine or eat pork. One thing is that in America the foods have lot of oil and fat, that's why the only things I buy is chicken nugget. I always take my own food to work” (Participant A Transcript).

Additionally, Participant C also reflected on some of the challenges she faces as she tries to integrate through food in Columbus. Like other participants who linked those challenges to health reasons and availability, Participant C stated that,

“The way of cooking determines the food prepared, so American food healthiness depend on the way they are cook. Like, for my way of cooking is different when I am preparing African food especially for meat, because I cooked well-done. But, in some of the American restaurants, I noticed some of the grill meat is normally not well-done. So, for us Gambian, we are used to well-done cook or grill meat because we think that meat not properly cook can cause some health issues. So, this belief hinders my consumption of some of foods served in restaurants” (Participant C Transcript).

In a related manner, Participant C also revealed that the availability of ingredients is a challenge for her integration into the Columbus way of life as far as food is concerned:

“I am willing to talk about these issues because, as a lady, we have challenges in accessing the home diet ingredients due to high cost because we have families and so many bills to take care off. These expensive ingredients are a big challenge for me. Additionally, on domestic ingredients, we factor the health and wellbeing of families whenever buying indigenous food ingredients. So, it is a challenge because I must know

exactly what we buy and eat all the time. Therefore, is difficult to cook home diet because you cannot get the home ingredients we need and had to resort to unhealthy ingredients that we tried to avoid” (Participant C Transcript).

Participant D also described the challenges she encounters with respect to food in Columbus. In particular, she revealed that health concerns were a major obstacle:

“Everything that I cook home is healthier than all food I buy from outside. I am of the belief that all food prepared from home is healthy because I know who and how it was prepared. Additionally, Gambia food is healthy because our serving portions depends on usual food intake. So, I mean the preparation of the food is done a healthy way because I know the amount of sodium and salt to add into your food being Gambian that is harmful. So, I find it difficult to adapt eating in restaurants because they add lot of sodium, fats, oil, potassium, salt and other preservative ingredients, making it unhealthy. As a result, I am not happy eating some indigenous food because I don’t know how it was made and what stuffs are included while preparing the meals” (Participant D Transcript).

Furthermore, Participant F also explained that, because of health considerations, she finds it challenging to integrate through food. She underscored that,

“I think Gambian food is more healthy food than buying from outside. This is because I did not know food sold in restaurants or fast foods or how it is prepared. For my own food, I do know the ingredients I used. Because of that, I can safely say that Gambian home diet is far healthier than food that is sold outside because I don’t how many portion and ingredients are use in its preparation” (Participant F Transcript).

Similarly, Participant H also detailed some of the reasons why she felt it was difficult to integrate into Columbus due to health concerns associated with food:

“I do believe all food are healthy is just left with the way it is prepared and served. My observation is that most food sold in the fast foods are processed food, which means preservatives have been added in them. I am not comfortable eating processed food because it can cause serious health problems. I would love to eat food everywhere, but my only hindrance is because of the amount of processed ingredients that are used when cooking food in fast foods and some restaurants” (Participant F Transcript).

Finally, Participant J also shared some of her views as to why she finds it difficult to integrate into city of Columbus. Thus, she posited that,

“I rather have the same Gambian food I know throughout my life than trying something that would endanger. I am 100 percent certain that Gambian ingredients are healthier because they don't have artificial preservatives. And, Gambian ingredients are not genetically modified. And here, I must watch out because so many things GMO. These reasons demotivate me to try out American food, because of most their ingredients are GMO or genetically modified food, this unnatural food are health hazardous” (Participant J Transcript).

Discussion

The three themes that emerged in this section of the study revolved around access to home diet ingredients, substitution strategies, and health considerations while making the choice between home diet and indigenous food.

Overwhelmingly, participants in the study explained that home diet ingredients are readily available in Columbus due to the numerous African stores that operate in the city. According to Osirim (2018), these African stores are an aspect of Pan-Africanism because they promote the common interest of Africans. As a result, it can be inferred that the presence of African stores in the city of Columbus within the African immigrant communities is geared towards the provision of essential food ingredients to the African immigrants residing there. Similarly, according to Massey (2015), the Mexican immigrant communities in the US between 1942 and 1965 maintained a network with the objective of serving the needs of their communities. Likewise, Gambian immigrant mothers in this study described acting in conformity with community spirit and belonging with a view toward preserving their cultural heritage while staying in the United States.

However, they noted some challenges and concerns they have while trying to access home ingredients, which pertained to the high cost of home ingredients in African stores, as well as concerns regarding the lack of knowledge about how long these ingredients have been stored (Lakika and Drimie, 2019).

Participants in the study do integrate into life in Columbus by using domestic ingredients in the typical Gambian food they prepare in their homes. They described purchasing from common stores normally used by every household in the city, such as Kroger, Walmart and other membership stores such as Sam's Club and Saraga to obtain some of the ingredients they need in order to cook or prepare the Gambian home diet.

With respect to home diet and indigenous food, Gambians that participated in the study described making choices based on which foods are healthier, as was observed

among African migrants in a study by Bloom (2011). The evidence that emerged in the study showed that Gambians do not participate much in buying, cooking and eating domestic food due to health concerns they have with regards to the indigenous food served in restaurants and fast food establishments (Okafor, Carter-Pokras, and Min Zhan, 2014). Okafor, Carter-Pokras and Min Zhan (2014) observed that immigrants try to moderately integrate domestic ingredients in their home diet and thus compromise with the possible adverse health consequences of doing so.

According to Lakika and Drimie (2019), another challenge faced by immigrants while trying to integrate into their new-found destination is that they are bound to adapt to their new-found home. The evidence from this study highlights that the Gambian immigrants in Columbus are compelled to integrate by using domestic ingredients in their home diet because they often cannot avoid it.

Additionally, Parasecoli (2014) argued that immigrants have difficulty integrating through indigenous ingredients due to a relative lack of familiarity with these ingredients and their perceived lack of palatability in comparison with the home diet. Accordingly, the Gambian immigrant mothers residing in Columbus are adversely affected by a lack of familiarity with domestic ingredients and perceived lack of palatability of those ingredients as they attempt to integrate them into the preparation of their home diet foods, such as Super Kanja, Domoda, or Benachin. These dishes are the most famous diets among Gambian immigrants residing in Columbus.

Understanding immigrants' own perspectives on their lived experiences matters in the study of concepts or phenomena pertinent to immigrant life (Yeboah, 2008). It is

imperative to note that the present study addresses a gap in the literature with respect to Gambian immigrant mothers' lived experiences with respect to home diet while residing in the US.

This chapter highlights new windows of opportunities to address what is currently missing in the scholarship about immigrant food and the role of online shopping among Gambian immigrant mothers. Some of the participants' viewpoints also indicate that the notion of integration through food between home diet and indigenous food is limited because the two are inseparable when preparing them.

Chapter 5: Conclusion and Implications

The present research accords the academic community an understanding of Gambian mothers residing in the city of Columbus regarding their perspectives on home diet and indigenous food. Additionally, this study afforded the Gambian immigrant mothers in Columbus the opportunity to voice their perceptions about and experiences with home diet and indigenous food. Evidence from the study suggests that Gambian immigrant mothers in Columbus attribute their positive attitude toward home diet to a variety of factors, including a connection with their origin, their love for their food, familiarity, and the preservation of their identity, cultural heritage, and religious practices. Ultimately, the Gambian immigrant mothers who participated in this study had a positive attitude towards their home diet and were critical of indigenous food served in restaurants and fast food establishments. As a result of these immigrants' preference for their home diet, three major Gambian dishes emerged as their most commonly consumed meals: Super Kanja, Benachin, and Domoda.

The present study also adds to the scholarship on home diet, identity, culture, and integration, and thus fits into the field of human and social geography. First, it demonstrates that the relationship between food and identity is profound among the Gambian immigrant mothers in the city of Columbus. Second, home diet was observed as a medium by which Gambian immigrants maintain their identity and community, particularly through the invitation of fellow countrymen and women to share food. Finally, cultural heritage was a significant theme that emerged in the study; participants

felt that, through home diet, they can connect with their origins and better teach their children who they are.

The integration of Gambian mothers also surfaced in the study as an important aspect of their experiences in Columbus. As such, the coping mechanisms and integration processes described by Gambian immigrant mothers residing in Columbus centered on the utilization of African stores to buy their needed ingredients to prepare their home diet. Additionally, participants claimed that whenever members of the Gambian immigrant community have the opportunity to visit their country of origin, they prioritize bringing back home diet ingredients. Moreover, online platforms to buy home diet ingredients were other avenues used by Gambian mothers to access home diet ingredients. Consequently, these outlets serve not only as stores for ingredients, but also as agencies or institutions of solidarity because they help the African community to meet their common needs through food. In addition, as indicated by the participants in the study, they also use the indigenous stores to substitute needed ingredients they are lacking in order to prepare their home diets. In a related manner, Gambian immigrants integrate in Columbus by mixing home and indigenous diets when cooking their food because they believe there is no separation between the two when it comes to cooking food.

Overall, highlights of this study include some of the most frequently cooked and famous home diet dishes among the Gambian immigrant community in Columbus. Based on my own reflections, I noted that these preferences of home diet among the Gambian mothers interviewed in this study are in accordance with the preferences of home diet among the indigenous Gambian population. These home diet dishes are identified in the

order of preference as Super Kanja, Domoda and Benachin. Nonetheless, some participants in the study contended that indigenous food served in restaurants and fast food establishments can still be enjoyable depending on how it is prepared. Participant H mentioned that even indigenous Gambian food may not be healthy if the right ingredients or portions are not used in the preparation or cooking of the food.

Conversely, the study was also able to present contrary views of participants in the study, despite them overwhelmingly favoring home diet over indigenous food. For instance, some participants in the study maintained that home diet and indigenous ingredients are in reality inseparable due to the necessity of using indigenous ingredients when preparing home diet. Also, the study highlights that, irrespective of preference for home diet, the ingredients required for its preparation are imported into the US and thus are not fresh, which engenders additional health considerations among Gambian immigrants. With respect to identity, it appears that some Gambian immigrants in Columbus hold ethnocentric views as far as their food is concerned. They often indicated that they considered their home diet to be the best food; however, some of the participants in the study reported being aware of its health challenges and described how they address them. Lastly, regarding the theme of integration, the role of technology was identified as an important avenue to access home food ingredients. It also appeared that some of the participants were not aware of the possibility of shopping online from the Gambian vendors offering this access. Secondly, the definition of indigenous food among the Gambian immigrant community focused on fast food and food served in restaurants rather than indigenous food typically prepared in American households.

The present research reveals a noticeable pattern in which immigrants' positive attitudes towards home diet are manifested in their commonly consumed Gambian diet and in the knowledge transmitted to future generations. Therefore, it is vital for future studies to focus on second generation Gambians to ascertain whether they continue to prepare Gambian dishes. Secondly, the study provides a premise to replicate the study among other immigrant groups residing across cities of the globe because the study's design process has been adequately documented. Thirdly, the study identified an area requiring further research: the role of technology and online shopping in obtaining home diet ingredients among Gambian immigrant mothers residing in the US. Finally, the study provides knowledge of navigation strategies for Gambian immigrants with respect to home diet and indigenous food in the city of Columbus. As a result, the study provides resources for potential new Gambian immigrants to acquaint themselves with the coping mechanisms available to access their home diet and integrate into the city of Columbus.

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Appendix A: Interview Protocol

Q1: Participant Profile Questions

- A. Name:
- B. Age:
- C. Income:
- D. Duration of stay in the United States:
- E. Education

Q2: How do you perceive home diet in comparison to indigenous diet in Columbus?

Q3: Please tell me the Gambians home diets you commonly used.

Q4: How do you preserve the knowledge of home diet preparation?

Q5: How does home diet contribute to your identity as a Gambian while staying in the US?

Q6: In what ways does home diet contribute to the preservation of your Gambian cultural heritage in the US?

Q7: Please describe the home diet dishes you prepare while observing Gambian religious festivities.

Q8: How are you integrating or substituting domestic food in Columbus into your home diet?

Probe: Please elaborate on why you are doing so.

Q9: How would you describe the community of Columbus in terms of access to home diet ingredients?

Q10: In your opinion, is home diet healthier than domestic food? Please elaborate on why or why not.

Conclusion: Thank you for your willingness to participate in this interview. Do you have anything else to ask?

Appendix B: Ohio University Adult Consent Form with Signature

Title of Research: Understanding Gambian immigrant mothers experiences as it relates to home diet and integration in the city of Columbus, Ohio.

Researcher: Fatou Jagne

Advisor: Timothy Anderson

IRB number: 20-E-69

You are being asked by an Ohio University researcher to participate in research. For you to be able to decide whether you want to participate in this project, you should understand what the project is about, as well as the possible risks and benefits in order to take part in the study. This process is known as informed consent. This form describes the purpose, procedures, possible benefits, and risks of the research project. It also explains how your personal information will be used and protected. Once you have read this form and decide to take part in the study you are a participant and will be asked questions about the study. You may print a copy of this document to take with you.

Summary of Study

I am undertaking this research in order to better understand the experiences of Gambian immigrant mothers with regard to food choices. I am especially interested in knowing how Gambian women in Columbus integrate their home diet preferences (e.g. food items and preparation techniques) into their food choices and consumption while living in the United States. I also want to better understand the challenges involved in these choices.

You have been asked to participate in this study because you are a Gambian immigrant mother, and your experiences and knowledge with food preparation and

consumption choices will inform my study. My discussion with you will be recorded using an audio recording device in order to study this discussion at a later date.

Explanation of Study

This study is being done to understand the experiences of Gambian mother's immigrant regarding home diet and integration in Columbus. Therefore, the study will reveal experiences, challenges, coping strategies and perspectives of Gambian mothers in Columbus regarding home diet and integration in Columbus, Ohio.

If you agree to participate, you will be asked to answer semi-structured questions through an audio recorded interview with the researcher face to face. Your participation in the study will last for 30 to 60 minutes.

Risks and Discomforts

No risks or discomforts are anticipated.

Benefits

This study is important to science/society because there is a gap in literature about Gambian mothers' experiences regarding home diet and integration in Columbus, Ohio. It will also accord the participants to opportunity for the Gambian mothers' voices be heard regarding their perspectives on experiences with home diet and integration within Columbus, Ohio.

Confidentiality and Records

Your study information will be kept confidential by using pseudonyms. All recordings will be kept in a separate folder on the researcher's laptop. The laptop is always locked

with a complex password that nobody else can access. Additionally, the recording will be destroyed by December 2020. Further, while every effort will be made to keep your study-related information confidential, there may be circumstances where this information must be shared with:

- * Federal agencies, for example the Office of Human Research Protections, whose responsibility is to protect human subjects in research;
- * Representatives of Ohio University (OU), including the Institutional Review Board, a committee that oversees the research at OU.

Future Use Statement

Identifiers might be removed from data collected, and after such removal, the data may be used for future research studies without additional informed consent from you.

Contact Information,

If you have any questions regarding this study, please contact the investigator [Fatou Jagne fj495915@@ohio.edu] or the advisor [Dr. Anderson, anderst1@ohio.edu]

If you have any questions regarding your rights as a research participant, please contact Dr. Chris Hayhow, Director of Research Compliance, Ohio University, (740)593-0664 or hayhow@ohio.edu.

By agreeing to participate in this study, you are agreeing that:

- you have read this consent form (or it has been read to you) and have been given the opportunity to ask questions and have them answered;
- you have been informed of potential risks and they have been explained to your satisfaction;
- you understand Ohio University has no funds set aside for any injuries you might receive as a result of participating in this study;
- you are 18 years of age or older;
- your participation in this research is completely voluntary;
- you may leave the study at any time; if you decide to stop participating in the study, there will be no penalty to you and you will not lose any benefits to which you are otherwise entitled.

Consent of Participant

Signature of Research Participant: _____

Date: _____

Printed Name: _____

Phone Number and Email Address _____

Version Date: /02/04/2020

Appendix C: Approved IRB

Project Number	20-E-69
Project Status	APPROVED
Committee:	Office of Research Compliance
Compliance Contact:	Rebecca Cale (cale@ohio.edu)
Primary Investigator:	Fatou Jagne
Project Title:	Understanding Gambian Immigrant Perspectives on Home Diet and Integration in Columbus, Ohio
Level of Review:	EXEMPT

The Ohio University Office of Research Compliance reviewed and approved by exempt review the above referenced research. The Office of Research Compliance was able to provide exempt approval under 45 CFR 46.104(d) because the research meets the applicability criteria and one or more categories of research eligible for exempt review, as indicated below.

IRB Approval:	02/05/2020 11:22:30 AM
Review Category:	2

Waivers: No waivers are granted with this approval.

If applicable, informed consent (and HIPAA research authorization) must be obtained from subjects or their legally authorized representatives and documented prior to research involvement. In addition, FERPA, PPRA, and other authorizations / agreements must be obtained, if needed. The IRB-approved consent form and process must be used. Any changes in the research (e.g., recruitment procedures, advertisements, enrollment numbers, etc.) or informed consent process must be approved by the IRB before they are implemented (except where necessary to eliminate apparent immediate hazards to subjects).

It is the responsibility of all investigators and research staff to promptly report to the Office of Research Compliance / IRB any serious, unexpected and related adverse and potential unanticipated problems involving risks to subjects or others.

This approval is issued under the Ohio University OHRP Federal wide Assurance #00000095. Please feel free to contact the Office of Research Compliance staff contact listed above with any questions or concerns.

The approval will no longer be in effect when the Primary Investigator is no longer under the auspices of Ohio University, e.g., graduation or departure from Ohio University.



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