

MAP-IT in Action: Developing a Plan to Improve the Food Systems Frequented by Bangladeshi Americans Living in Hamtramck, Michigan

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Abstract-

Background: Bangladeshi Americans are one of the fastest growing Asian minority groups in the United States, including in the state of Michigan. Bangladeshi Americans have a high prevalence of cardiovascular disease. An inverse relationship between the consumption of fruits and vegetables and the risk of CVD among Bangladeshi Americans was found.

Method & Design: MAP-IT Framework was utilized as a strategic plan to create a sustainable healthy environment equipped with improved access to food systems frequented by Bangladeshi Americans living in Hamtramck, Michigan. This initiative is part of the collaborative agreement with the CDC Racial and Ethnic Approaches to Community Health (REACH) to improve the health of Asian Americans in Michigan. A windshield survey using observational data, Geographic Informational System (GIS) mapping, and quantitative and qualitative surveys will be conducted.

Discussion: Foods eaten at home are dependent upon the availability of nutritious foods sold at grocery stores, smaller convenience stores, and/or retail stores. Food systems are complex and dynamic.

Index Terms – MAP-IT Framework, healthy food options, Bangladeshi Americans, Hamtramck

I. INTRODUCTION

Americans do not partake in a healthy diet¹. The so-called “standard” American diet consists of meat, dairy, sugar, and processed foods². In addition, Americans exceed the recommended dietary guidelines on intake of sugar, sodium, and saturated fat¹. Data also shows that only 25% of Americans have a healthy eating pattern of vegetables, fruits, dairy and oils¹. This unhealthy eating pattern has been linked to the increasing rates of obesity in the United States (U.S.), which is associated with major negative health conditions including type 2 diabetes, stroke, some forms of cancer, and cardiovascular disease (CVD)^{1,3}. Similarly, there is evidence linking a high prevalence of obesity with lower income and minority groups in America; in some part due to limited access to healthy food items, and high density of fast food and convenience stores where they live^{1,4}. Among these minority groups in the U.S. with increasing rates of income inequality and obesity-related health conditions, such as CVD, are Asian Americans.

Asian Americans are the fastest growing minority group in the U.S. The U.S. Asian population increased from 11.9 million in 2000 to 20.5 million in 2015, a 72% growth in 15 years⁵. South Asians in particular, which include those from countries such as Bangladesh, had an increase of 224% in the U.S⁶. This minority group has displaced African Americans as the most economically divided group in the U.S., as income inequality among all Asians groups has increased significantly from 1976 to 2016⁷. Additionally, findings from the Mediators of Atherosclerosis in South Asians Living in America (MASALA) showed that South Asians account for 60% of heart disease worldwide⁸. This high of incidence along with increasing income inequality makes this population an important minority group to focus on about health promotion.

Research regarding the South Asian group of Bangladeshis and CVD were primarily from those living in Bangladesh. Most studies on Bangladeshi Americans were clustered with other South Asians. Previous studies have reported moderate prevalence of CVD among Bangladeshi people⁹. However, a recent systematic review of the literature by Chowdhury et al.(2018) showed an upward trend in prevalence of CVD among Bangladeshi adults¹⁰. The few U. S. studies on Bangladeshi Americans were primarily from the New York region. A needs assessment of Bangladeshi Americans from the Bronx, New York found high prevalence of CVD risk factors, however this assessment did not include diet¹¹. Another study of Bangladeshi Americans living in Queens, New York showed lower awareness of CV risk factors, particularly with physical activity and smoking¹². A 2014 study by Islam et al., called the DREAM Project, reported low consumption of fruits and vegetables by the Bangladeshi community¹³. Interestingly, in a large study of Bangladeshi Americans, an inverse relationship between the consumption of fruits and vegetables and the risk of CVD was

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