

Diet and Nutrition Event Report: 25 October 2022

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Background

The Imperial Patient Experience Research Centre (PERC) is a core facility of the Imperial Biomedical Research Centre (BRC) undertaking research on research and supporting Imperial BRC researchers to undertake public involvement and engagement in research.

PERC recognises that involving a diverse range of patients and members of the public in research is essential for ensuring that research is relevant, meaningful, and useful for improving healthcare experiences and outcomes for all. PERC is seeking to establish relationships with under-represented and under-served communities in North West London in order to engage a more diverse range of patients and members of the public in research. By working closely with these communities, PERC is aiming to ensure that research is tailored to their specific needs and priorities, and that their voices are heard in healthcare decision-making.

Approach and purpose

Since mid-2021 and as part of its ongoing efforts to engage under-served communities in healthcare research PERC has been working to establish a relationship with the Somali community in Hounslow.

Through discussions with Khadra Badal, a Hounslow community leader, PERC was able to identify several areas of health that were priorities for her Somali community in Hounslow. These included health literacy sessions on topics such as diabetes, autism, ADHD, mental health, and cancer. In response, PERC organised an initial health literacy session on autism, which was well-received by the community. This was followed by a session some weeks later on diet and nutrition for children and adults, which further strengthened the relationship between PERC and the community.

Ensuring that the speakers of the session were representative of the community was a crucial consideration when we were seeking speakers, as it was important to the community that the speakers understood their culture. In response to this request, we identified Aisha Hassan, a Somali paediatric dietitian from St Mary's Hospital, to present at the session. Aisha's presentation covered various topics, including the importance of good diet for children and food groups, the relationship between diet and autism and ADHD, considerations for fasting, and the relationship between diet and eczema and lactose intolerance. Additionally, Dr. Jia Li, co-lead of the Imperial BRC Gut Health theme attended the session to discuss her research on the relationship between diet, chemistry, and health. Dr Li also discussed the Western diet's impact on colon cancer risk, and the link between diet and Alzheimer's disease.

To ensure that the session was accessible to all members of the community, it was delivered in both Somali and English. By prioritising representation in speaker selection and delivering the session in multiple languages, we aimed to engage and empower the community, ensuring that their voices were heard and that they had access to the information provided and latest research in healthcare.

Event overview and agenda

The event was held on Tuesday 25th October 2022, from 10am to 12:00pm at Al-Furqan Education Trust, a space commonly used as a hub by the community. The session was divided into two parts, with the first part being delivered in English by Dr Jia Li, who discussed nutrition and diet for adults between the ages of 18-65 years and then circulated a questionnaire (Appendix 2) to understand community views on their research priorities. Translation to Somali was made available by Naima Adan (PERC) and Khadra to those who required it. The second part of the session was delivered by Aisha Hassan, who discussed nutrition and diet for children between the ages of 1-18 years. This portion of the session was delivered in both English and Somali, as Aisha is a native Somali speaker. After both presentations, the community members were highly engaged during the Q&A session.





The session was recorded with the intention of summarizing the main messages for dissemination to community members who were unable to attend.

Following the presentations, attendees were asked to provide feedback on which aspects of the Somali diet they believed should be prioritised for research. The questions asked about which elements of diet should be researched had been tailored specifically to a Somali diet (see questionnaire in Appendix 2, and results in Appendix 4).

Refreshments and hot drinks were offered during the session and were catered for by a member of the community.

Attendee recruitment

A total of 35 people attended the session including 14 children. To ensure that the event was widely advertised and accessible to community members in North -West London, the team utilised a diverse range of strategies. Flyers in both English and Somali languages were created and posted in local schools, the Mosque where the session was held, and various locations within the Hounslow area. An e-flyer was also shared on social media platforms, and the community's WhatsApp group and Facebook page were utilized to disseminate the event details and flyers.

Furthermore, as the Somali community is a verbal community word-of-mouth was used to share the event information. Community leaders spoke with community members in person at community events, local shops, and the Mosque. The event was announced during Friday prayers at the Mosque to reach a wider audience. These efforts to use multiple modes of communication were successful in raising awareness of the event and generating interest among the community in Hounslow and other parts of West London.

Outcomes of Event

The event was successful in engaging the community and fostering discussions on important aspects of nutrition and diet, with the intention of promoting healthier lifestyles within the community. Children who attended the event were not asked to provide feedback on the event or on the research focused questions. We have set out below the main outcomes of the event.

Responses to questions about researching diet

33 out of the 35 attendees at the nutrition and diet session completed the research question form. The majority of the attendees 28/33 (85%) who completed the research question form believed that understanding how a child's age impacts their response to different diets was the most important research question. 4/33 (12%) believed that understanding how an adult's age impacts their response to different diets was the most important research question, while 1/33 (1%) believed that understanding how someone's sex impacts their response to different diets was the most important research question. These results show that the attendees were more interested in learning about the effects of diet on children than on adults or based on sex.

According to the survey, which asked attendees to identify which foods they believe should be the focus in understanding how they affect gut health, the highest percentage of attendees (26%) indicated that sugar is the most important factor. Other factors that were identified for research focus included salt-rich foods (13%), saturated fat (15%), and cow's milk/lactose/dairy (12%). Plain flour, red meat, and unsaturated fats and oils each received a lower percentage of responses, with percentages ranging from 2% to 9%. Finally, only 4% of attendees suggested that a fibre-rich diet is important for understanding how it affects gut health.





The last question on the survey asked about the ways attendees' lifestyles has changed since living in the UK, the highest percentage of attendees 7/33 (19%) chose "less physical exercise". The next highest percentage of responses were for "less organic food" 5/33 (16%) and "more stress" 6/33 (17%). Other changes included "eating more Western food/diet" (13%) and "eating more traditional food" (13%). "More physical exercise" and "more organic food" each received a lower percentage of responses, with percentages ranging from 3 to 5%. Finally, only 6% of the attendees reported less stress as a lifestyle change since moving to the UK. At the session attendees provided feedback that the questionnaire did not provide for situations where the attendees had always lived in the UK.

Feedback on the event

27 out of the 35 attendees at the nutrition and diet session completed a feedback form. After the session a feedback form about the event was circulated (Appendix 3). 22 /27 (81%) of attendees rated their experience at the session as "Excellent" and 4/27 (14%) as "Good" and 1/27 (3 %) as "Average".

According to the feedback survey, 12/27 (45%) said they would share the information from today's session via WhatsApp, 5/27 (18%) would share it through word-of-mouth, and 4% through social media platforms such as Instagram and Facebook. Only 4% of the attendees preferred to use phone calls to share the information, while the remaining 13% chose other methods.

With respect to future health literacy sessions the highest percentage of attendees would like to hear more about autism in future sessions. Diabetes (18%), menopause (12%) was identified next. Mental health and digestive health each received 3% and 1% respectively, while the remaining topics including Down syndrome, vitamin/supplement for children, lactose intolerance, allergies, picky eating support, cancer, arthritis, stroke, fibroid, fibromyalgia, mental health, and memory loss each received 1% of the responses.

Additional verbal positive feedback was obtained on the day at the end of the event, with the community asking for more sessions (see Appendix 3 for more details).

How community insights and feedback will be used

The attendee responses and questions will be utilised in the future to:

- inform research questions in the Imperial BRC in the
- evidence public priorities in funding applications
- understand aspects of gut health important to the Somali community
- plan future events



Appendix 1

The two posters below were used to advertise the event.

Diet and Nutrition Poster- English



Diet and Nutrition Poster-Somali





Appendix 2 -Diet/Nutrition Questionnaire form

Questions for Diet/Nutrition Session on 1 November 2022

1. Which	research quest	tion is more important	to you (please cho	ose one)?
	how someon to different d	e's sex (i.e., male or fer liets?	male) has an impac	t on how they respond
	how a child's different die	s age (3-18 years old) h ts?	as an impact on ho	w they respond to
	how an adul different die	t's age (18-65 years old ts?	i) has an impact on	how they respond to
		rly adult's age (above 6 lifferent diets?	55 years old) has an	impact on how they
		ving do you think we s ronment? Select the to		
	Sugar rich	Salt rich	Fiber rich	Fish
	Plant-based	Unsaturated fats and oils	Red meat	Plain Flour
	Saturated fat	Cow's milk/lactose	e/diary	
	B			



Please tick all the ways your lifestyle has changed since living in the UK (compared to before you lived in the UK).





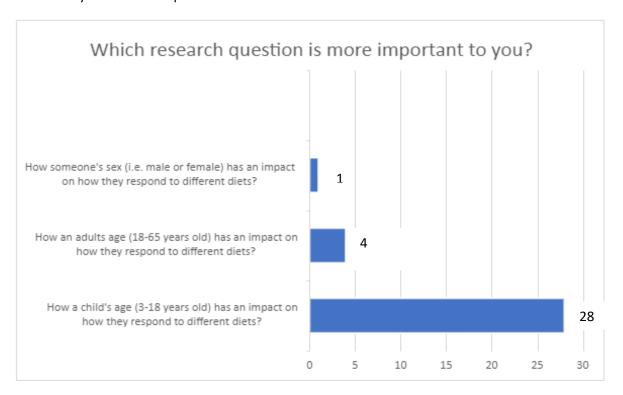
Appendix 3 -Diet/Nutrition Awareness Feedback form

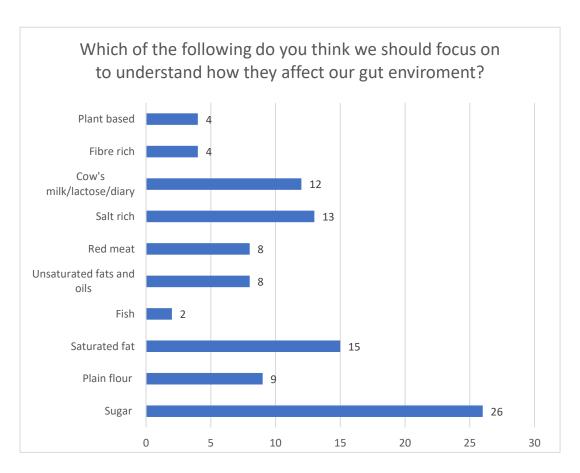
		Prefer to provide you
ease complete the ne QR code to acce	e questions below or scan ess the online feedback form	feedback online? Scan above
I. How would	you rate your experience at this	event? (please circle)
Ve	ry bad Bad Average Good	Excellent
	attend future events like this ju (please tick)	st for your
	Yes No I don't	
future sessi	r healthcare topics would you like ions?	
future sessi	r healthcare topics would you like ions? ppy to share my	
future sessi	r healthcare topics would you like ions?	
future sessi	r healthcare topics would you like ions? ppy to share my No, thanks Sure, it's:	



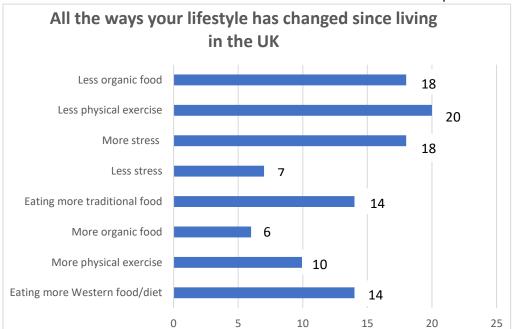
Appendix 4 - Diet and nutrition feedback on research

This feedback relates to the responses to the questions posed about which aspects of diet the community considered important to research.







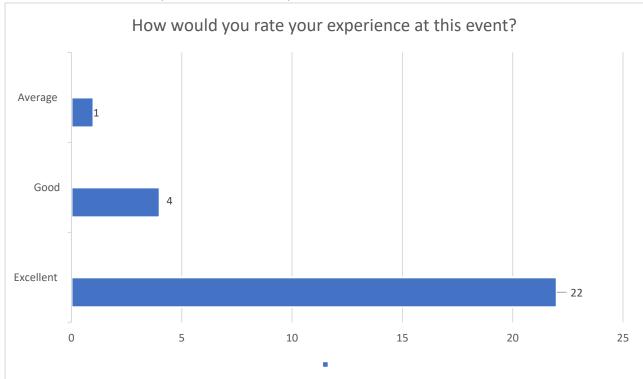


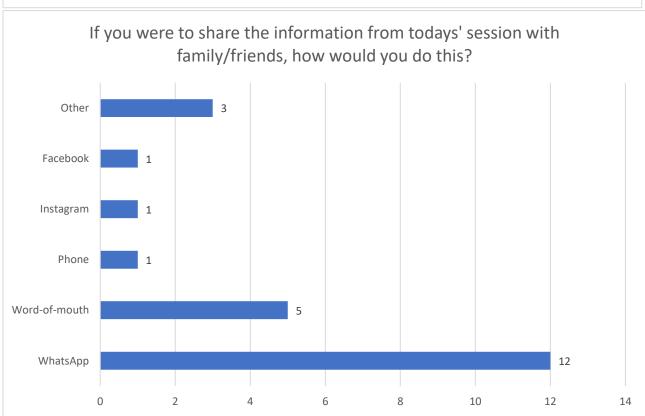


Appendix 5 – Attendee feedback

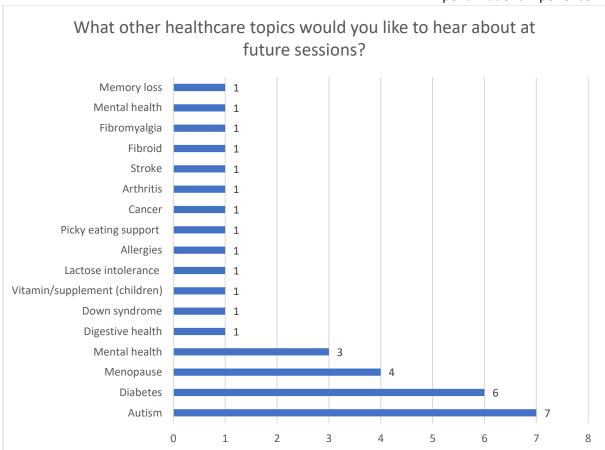
Feedback Results

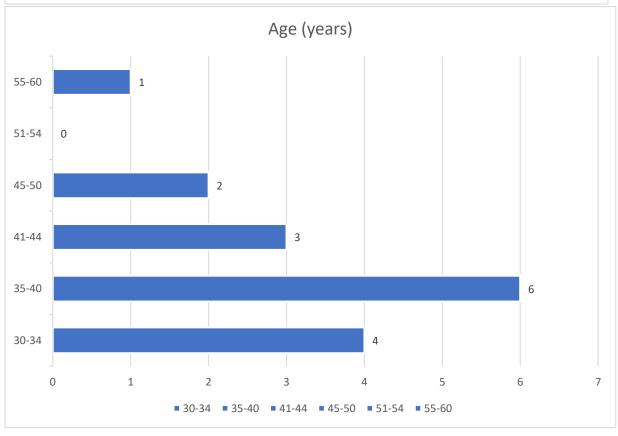
The event was attended by 47 members of the public (33 adults, and 14 children).



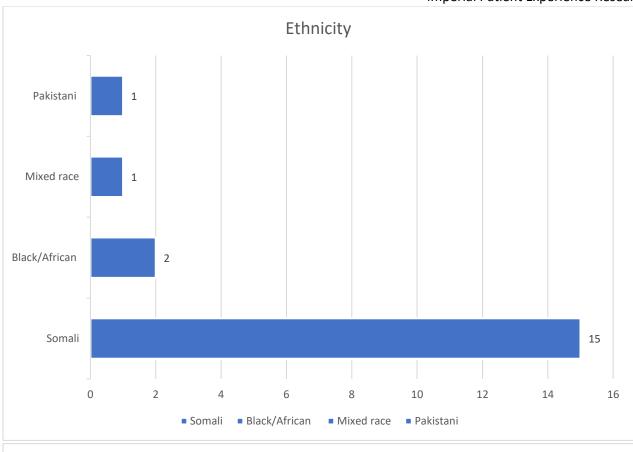


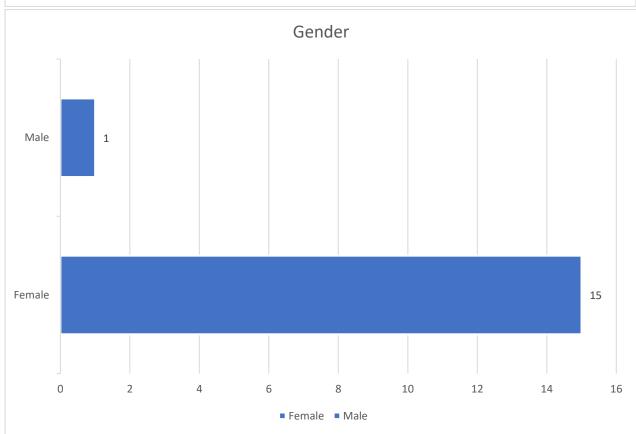




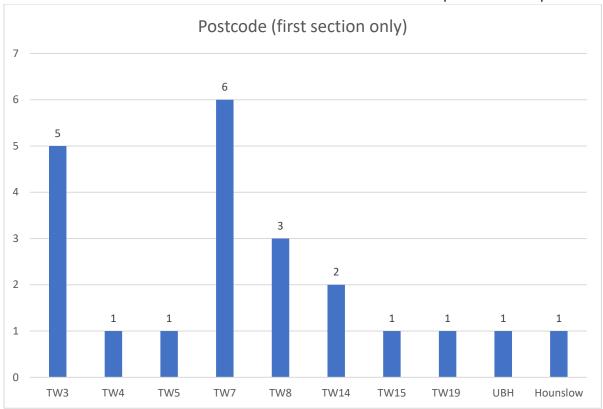












Appendix 6: Attendee demographics

Table 1: Demographic characteristics provided in feedback forms (N=27)

Characteristics	n (%)
Age (in years)	
Mean (range)	38 (30-57)
Age groups (in years)	
18-24	0 (0.0)
25-34	4 (16.0)





Characteristics	n (%)
Gilaideteristics	(75)
35-44	7 (28.0)
45-54	5 (20.0)
55-64	0 (0.0)
65-74	0 (0.0)
03-74	0 (0.0)
75+	0 (0.0)
Prefer not to say	4 (16.0)
Ethnicity	
White	0 (0.0)
Mixed/Multiple Ethnicity	1 (4.0)
Asian/Asian British	1 (4.0)
Black/African/Caribbean/Black British	17 (68.0)
Other	0 (0.0)
	(5.6)
Prefer not to say	1 (4.0)
Gender	
Female	20 (80.0)
I CITIAIC	20 (00.0)



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Characteristics	n (%)
Male	0 (0.0)
Prefer not to say	5 (20.0)
Postcode (first section only)	
	4.2.42.10
TW	16 (64.0)
UBH	2 (8.0)
	= (0.0)
Hounslow	1 (4.0)
TW4	1 (4.0)
TW5	1 (4.0)
TW15	1 (4.0)
TW19	1 (4.0)
144.15	1 (4.0)
No postcode provided	2 (8.0)