Dear Editors,

In a study of Somalis in London, we found that physical activity was not a health topic participants gave much attention to.

Eight focus groups discussing health behaviours, primarily smoking and diet were held in Islington, North London in 2006. There were two women’s and six men’s groups with 62 focus group participants in total. A short questionnaire was also designed and distributed via local Somali community organizations. The methods for the focus groups and survey, and the characteristics of survey respondents, are described in detail elsewhere. 2

Nearly all (89%, n = 65) of survey respondents felt that regular physical activity was important for their health. However, it was strongly expressed in the focus groups that many of the Somali population, including the participants, did not do enough, or any, regular physical activity. Thirty-eight percent (n = 24) of survey respondents felt that they did enough physical activity, while among the UK general population 71% of the population self-report being fairly or very active. 1 This suggests that rates of perceived activity among survey respondents was much lower than among the UK general population.

For many of the focus group participants’ physical activity for health was an unfamiliar concept, partly because the physical activity was understood to be primarily about sweating (thus using a sauna was considered to constitute physical activity). Sweating was seen by focus group members as preventative for diabetes, and the absence of sweating among Somalis in the UK as a cause for obesity. Secondly, physical exertion was incorporated into daily life in Africa, from where many of the participants had lived for a large part of their lives before coming to the UK. When discussing levels of activity among Somalis, many examples were given about life in Africa entailing a great deal of walking in very hot weather. In the UK, particularly in London, it was felt that you ‘can bus everywhere’ and that the weather is only warm enough for walking during the summer.

It was mentioned in the focus groups that sports facilities were not adequately meeting the needs of the Somali population. For example, it was considered inappropriate by participants for men and women to exercise at the same time.

It would appear that a deficit in knowledge about the health benefits of physical activity needs to be addressed among Somalis in the UK, alongside efforts to increase access to existing exercise facilities.

References


Andy McEwen
Cancer Research UK
Health Behaviour Research Centre
University College London
2-16 Torrington Place
London WC1E 6BT
UK
E-mail: andy.mcewen@ucl.ac.uk

Lianne Straus
Barcelona Centre for International Health Research
(CRESIB)
University of Barcelona
Barcelona
Spain

Michael Ussher
St George’s University of London
London
UK
doi:10.1093/pubmed/fdm075
Advance Access Publication 14 November 2007

Breast cancer screening practice of Chinese elderly worth re-evaluation of health promotion policy

Sirs,

The incidence of breast cancer increased in many Asian countries. 1 – 3 According to the Hong Kong cancer registry