Possible interaction between gender and cardiovascular risk factors in first- and second-generation Turkish migrant women

Angelika Bader [1] Doris Musshauser [2] Alice Chwosta [2] Margarethe Hochleitner [3]

[1] Women's Health Office of the State of Tyrol, Austria
[2]Ludwig Boltzmann Institute for Gender Studies, Tyrol, Austria
[3]Innsbruck Medical University,Tyrol, Austria

In the third year of a CVD prevention program aimed at both second- and first-generation Turkish migrant women in rural Austria 910 participants completed a questionnaire on self-assessed CVD risk factors. Second generation was defined as having gone to school in Austria. More than half of the participants (477) were young adult women between 20 and 40 years of age. As expected, results varied widely between first and second generation. The greatest differences were found in gender- and lifestyle-related risk factors. BMI> 30 (first 26.3%/second 6.2%), exercise 3 times a week (36.3%/71.3%) and healthy diet (61.7%/83.6%) showed significantly better results among second-generation women. Smoking (16.7%/38.5%) showed significantly worse results in second-generation women. Having fewer language barriers, twice as many second- as first-generation migrants consume German-language media. Even though fewer language barriers led better awareness of health risk factors to be expected in second-generation migrants, they were less informed about their clinically measured risk factors like blood pressure, cholesterol and blood glucose levels than was the first migrant generation in the same age group. Thus, culturally coded gender expectations might be a stronger impetus for health behavior than health information for second-generation migrant women. Healthcare providers should strengthen positive health behavior of the culture of origin and the host culture to support good CVD health of women whose gender roles are in transition.