



Tigrinya Speakers from Eritrea: A Brief Introduction for Health Care Workers

*“Living in a refugee camp is just like a prison. It's
the hardest thing I've seen in my life. All my
talents and capacities are useless here.”*

--Araya Issak, camp leader

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How To Use This Presentation

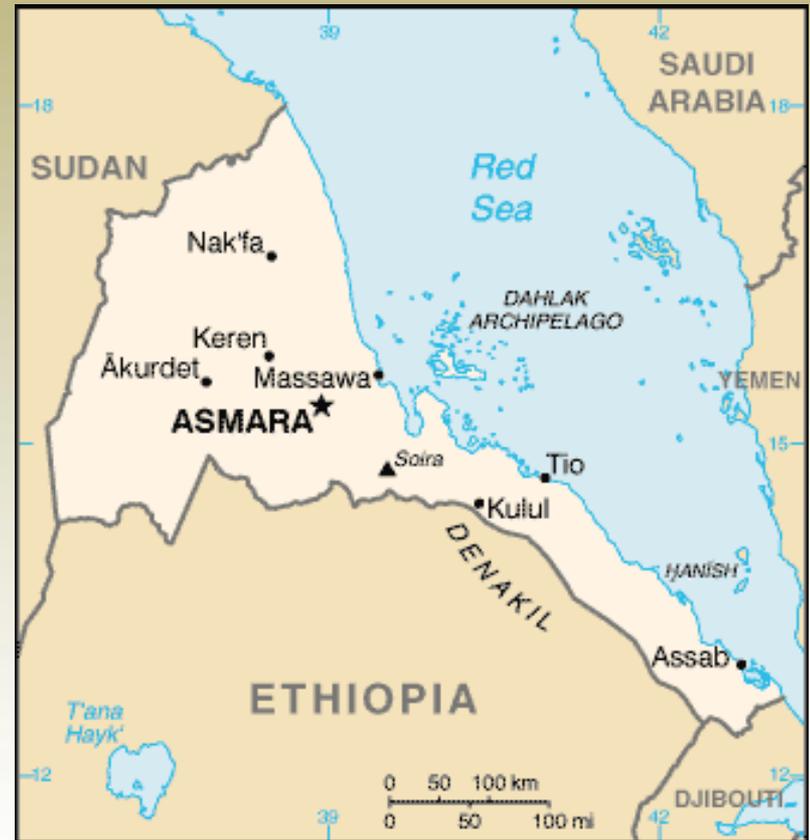
This presentation is designed to give a general overview of Eritrean culture for individuals working in the healthcare field. It is not intended to be a full account of the culture and beliefs of all Eritrean immigrants.

It is important to note that the information contained in this presentation will not be applicable to all Eritreans. Changes in Eritrean culture will also occur as the acculturation process continues in the United States.

Providers are encouraged to assess the needs and behavior of all patients individually.

Eritrea

- About the size of the state of Mississippi
- ~4.5 million people
- Capital is Asmara
- Ethnic Groups
 - Tigrinya (~50% of the population)
 - Tigre
 - Saho
 - Afar
 - Beja
 - Bilen
 - Kunama
 - Nara
 - Rashaida
- Primary languages are Tigrinya and Arabic
- More than 1 million refugees and internally displaced people in Eritrea





A Brief History



- 1890-1941—Italian colony
- 1941—British colony
- 1952—UN made Eritrea an autonomous region of Ethiopia
- 1961-1991—Thirty year war of independence from Ethiopia
- 1993—Eritrean independence
- 1998—War with Ethiopia
- 2000—Peace treaty with Ethiopia
- Current—escalating tensions along the border

Why Refugees Flee Their Homes

- Forced conscription—mandatory national service and/or military service with very poor pay
- Displacement in the border war between Eritrea and Ethiopia
- Religious discrimination against evangelical Christians
- Discrimination against minority ethnic groups



Cultural Background: Food



- Staple in the highlands—*injerra* is commonly eaten in the rural areas. It is a pancake-like bread that is eaten together with a sauce called *tsebhi* or *wat* .
- Staple in the lowlands is a porridge made of sorghum
- Traditional foods are eaten with the right hand only
- *Bun* coffee ceremony is an important ritual

Cultural Background: Etiquette and Naming

- Respect for elders and authority is deeply rooted
- Prefer not to be equated with Ethiopians—prefer Eritrean interpreters
- Although some Eritreans speak English well, medical terminology may not be understood or directly translatable
- Children are given their father's first name as their surname
- Women do not change their name upon marriage



Cultural Background: Gender Roles

- Patriarchal society
- Men typically responsible for family decisions—particularly those relating to external affairs
- The majority of both Eritrean men and women are circumcised. Female circumcision, or female genital mutilation, is carried out both among Christians and Muslims



Reproduction



- Birth control is commonly practiced
- High value placed on natural childbirth and women generally try to avoid using painkillers
- May wait to come to the hospital in hopes of avoiding interventions
- Men are not typically present during the birth
- Women are supposed to rest in bed for 40 days after the delivery

Infancy and Childhood

- Women fear exposing their infants to sun and Vitamin D deficiency may be a concern
- Breastfeeding is highly valued and generally continues for up to a year
- Toilet training often begins as early as 5 to 6 months
- Uvulectomies are done on many East African infants at a few weeks of age to prevent throat infections



Death and Dying

When someone is diagnosed with a life threatening illness or dying it is advisable to first tell a family member or next of kin so that the family member can inform the patient.



Mental Health



- PTSD is a concern among the Eritrean community
- Anyone over the age of 20 is at risk, particularly if they served in the army
- Women in some of the refugee camps are at risk of sexual and gender-based violence, ranging from domestic violence to rape
- There is stigma associated with mental illness

Medical Care

- Generally familiar with Western medicine and will typically seek help from a medical practitioner first
- May use natural remedies in addition to medical care—it is important to ask specifically if the individual is taking any traditional medicines
- Eritrean men prefer to be cared for by male health care providers and women strongly wish to be cared for by female providers



Medical Care Continued

- May be concerned with blood draws, fearing that too much blood is being drawn
- There is an expectation that medicine will be prescribed for every illness
- HIV/AIDS is highly stigmatized and individuals who are positive may keep the information to themselves



Special Concerns: Obesity

- Being full-figured or overweight is considered attractive and a sign of status
- Families eat from a communal platter which can make it difficult to assess how much one has eaten
- It is rude for guests to refuse food, even if they are not hungry





Special Concerns: Hepatitis

- Hepatitis is generally understood through its symptoms and yellow skin and eyes and dark urine are associated with the disease
- The traditional word for hepatitis, *iff shwa*, literally means bird disease and there is a traditional belief that hepatitis is caused by a night bird or bat
- To avoid confusion with the term bird disease, the term *kabidy* may be used, which literally means liver disease
- The concept of being a carrier and of preventative measures are difficult and confusing





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