The Effects of Traditional Weaning Food on Children

(A Case Study of Under Five Children 0-2years In Port Loko, Sierra Leone)

Sylvia Kercher Bangura

Faculty of Education, Ernest Bai Koroma University, Port Loko Campus

Sylviakercherbangura@gmail.com

ABSTRACT

Weaning is the process of gradually introducing an infant formula or another natural milk or introducing solid food to a child other than breastmilk.

Weaning practices and the problems of weaning foods in Port Loko are that of low nutrient density and high bulk of carbohydrate food. Most caregivers don't attend ante natal clinic were nutrition talks are given. It was discovered that the first weaning food was usually starchy foods and no protein foods, most proteins foods were regarded as taboos, or religious and traditional believes of family members. Children are usually feed with hand which some times goes into the child's lungs and choke him/her to death. Poor hygiene also contribute to infection in children as the feeding utensils are not properly cared for; these diseases are malnutrition either Kwashiorkor, marasmus, Anemia, Diarrhoea, vomiting, whooping cough. Weight for height, Height age and weight for age client for children were assessed, it was found out that children who were introduced at poor weaning food at an earlier age suffers from malnutrition other than those introduced to at later years. Breast feeding is said to be given exclusively up to six months. In other to prevent these childhood diseases from occurring due to poor weaning foods and poor hygiene practices, good access to safe drinking water, good sanitation, economic empowerment of women, promotion of breast feeding, diary guidelines and development of recipe and improvement of locally available weaning food to be nutritious can be of good help to the care givers, community and the Nation as a whole it will help reduced infant death.



INTRODUCTION

The research is concern with practices, beliefs and norms of child weaning practices in a typical traditional setting.

It looks into the effects traditional weaning foods have on children in Africa setting, especially in Port Loko District in the Northern Region of Sierra Leone.

Weaning is the process of gradually introducing an infant, formula or another mammal to milk, cereals to the child to complement mother milk (Wikipedia) weaning is the most important transitional phase of child, weaning begins as soon as supplementary food is introduced to the child, normally in Sierra Leone, the food and nutrition directorate under the ministry of Health and sanitation lay emphasis on the importance of exclusive breast feeding onto the age of six (6) months of the child. The reason is that most mothers are not knowledgeable as to the age and type of weaning foods to be introduced to the child.

In the Africa setting most mothers are not even aware about the nutritional value of food to be introduced to the child. Traditional beliefs, religious believes, poverty and ignorance and food taboos, can result in poor weaning practices, most foods that are of nutritive value.

Breast milk alone can not provide sufficient amount of all the essential needed to maintain growth after the first six (6) months, increasing needs of calories and proteins of growing children cannot merit by diminishing output of mothers' milk. The age of introduction of supplementation is 3-5 months in the urban and middle-income group as they can afford to provide nourish of diet for their children. It is advisable that they become knowledgeable and aware about when, which type of nutritionally available foods that can be introduced to the child. If babies are not properly weaned with a nutritive food, their immunity will be weak /poor and they will be susceptible to inactions such as kwashiorkor, marasmus, Anemia, Odema, skin disorder, stunted growth etc. and some children may even die (infant mortality). Food that should be introduced to a child be clean, pure and free from harmful organism most weaning foods causes the children to be upset (stomach).

The purpose of weaning is not only to introduce the baby to regular foods but also to help him/her have a blend taste "Starts limited quantity "suggest (Dr. Halbe) introduce only one new food at a time in a week, it is good to try food for few days to see if its suits the child. The baby intake of food and her stool will also give you a few indications of how well him/her is tolerating the particular food, once the child gets used to a particular food. The mother switches over to its straight-ahead Dr. Halbe).

Fruits and grains are not to be given to children during the 1st year of infancy, they are not really bad but the sweetness can throw off baby's taste buds and can make them avoid dense food (nutritious foods) these can caused them develop childhood diseases such as malnutrition, Anemia, Odema, Skin disorders, stunted growth and underweight. Children below the age of one year as they cannot digests grains properly (they are best eaten at age two (2) years (be well clinic) care must be taken when feeding a child feeding utensils/ e.g. cup, spoon, feeding bottle and feeding units/container with lid which should be sterilize to prevent the child from infection such as diarrhoea, malnutrition, worm infestation, anemia, skin disorder, stunted growth and protrude abdomen, constipation etc. freshly prepared food should be given to a child at every feed, one should prevent feeding a child with stale foods as this may lead to a child been infected (mostly diarrhoea and vomiting and this leads to dehydration and finally death of the child.



In the north-western region, Port Loko District in particular, care givers and mothers forced their children to foods that the child would not like by using their hands and forcefully feed them, holding their nostrils and then food forced down in their mouth of the child to swallow. Sometimes these foods block the air way (respiratory track) and the child become (suffocated and have difficulties in breathing and sometimes the child may even die, leading to infant mortality. Most of the causes of infant mortality is caused by care givers/ mothers practicing hand feeding practices for their babies.

If proper weaning foods are not introduced to the child, the child's growth may falter (slow down or interrupted at post-natal clinics children are weigh on a monthly bases and plotted in an antenatal clinic card, prepared for a period of birth to five years of age. The weight for height and age is plotted. This card is design in a way that even the illiterate mother can at list weather the child is growing or not. If the child dropped in body weight an advice is being given to the mother on the causer, prevention and treatment of the cause of disease or diet given to the child. The nutritional needs of babies are very important to prevent childhood diseases. The child needs the following for its proper growth and development. Childs birth weight is normally doubled in the sixth month. His growing length the organs of body e.g. The brain can never develops, hence the child needs good food to promote growth. Poor nutrition retied growth; their food require a good supply of vitamins especially vitamins c, A and D. Carbohydrate is also needed to provide energy (special cereal preparation such as maize, rice, millet porridge are also needed. Protein requirement of infant is high protein for infant is 2.5gm per kg of body, calcium for strong bones and teeth, minerals/ fat increases energy helps the brain develop, keeps the skin and hair healthy and protect against infectious folate helps cells division, zinc helps the cells grow and repair. Both water- and fat-soluble vitamins are needed to strengthen their immune systems, (Brennamd) Professor E U Anyakoha.

It is very important that care givers/ mothers have fair knowledge about when to wean and the types of weaning food to introduced to there children usually poor weaning foods, ignorance, poverty, religious/traditional believes, negligence are also contributing factors to the increase in (infant mortality rate in the Port Loko District, North west region of Sierra Leone.

Mostly care givers mothers more of carbohydrate food (Rice, Millet, Ogeri porridge) to their children, without any form of other nutrient, giving carbohydrate foods to these children without other nutrient will make the child become obsess, anemic, etc. these food can be fortified by adding some form of other proteins foods like fish (dry pounded fish) beans (pounded beans) beanie (pounded Bennie) and groundnut paste, milk formula. Should be added to these carbohydrate food (rice, flour, millet to make it fortified. Some care givers and mothers introduced their children to family diet as early at age four (4) mothers, there children cannot even consume much food as their family members does. So, they may also suffer from childhood diseases (Malnutrition and other diet related diseases of Children.

Nutritious and balance meal) weaning food at infancy has a great effect on the holistic development of the child, growth and development of the child, the intellectual development of the child.

RESEARCH OBJECTIVES

- ➤ Identify the qualification of nutritionist and dieticians in hospitals
- Examine the age bracket weaning foods are introduced



- > Commonly used weaning foods in the community
- ➤ Health hazards associated with poor weaning foods.
- ➤ The effect the traditional weaning foods have on the physical, mental development of the child
- > Traditional believes and taboos of Nutritious weaning foods.

METHODOLOGY

The research was carried out in Port Loko Township, Port Loko District is found in the North-Western Region of Sierra Leone, with the second most populous district in Sierra Leone after the Western area urban District. It is the district capital head quarters and its largest city Lunsar, the other major towns in the district includes Masiaka, Lokomasama (Pepel) Lungi.

Port Loko District borders the western Area to the West, East Kambia District to the North, Bombali District to the East and Tonkolili District and Moyamba District to the south. The District occupies a total area of 5,719km² (2,200sqms) and comprises eleven chiefdoms. The inhabitant is mostly Temne by tribe and pre dominantly Muslims. The district is made up of Nine chiefdoms. The main economic activities include scale mining and production of food crops (cassava and sweet potato, Bai Bureh warriors being the oldest Soccer clubs in Sierra Leone based in Port Loko. The district hosts the International Airport (Lungi) Airport.

The study was carried out in Maforki in the Port Loko District the north-western region of sierra Leone. Port Loko township of the habitant are mostly traders and Muslims by religion, with its famous university Port Loko University College, Port Loko.

The study was conducted in five (5) antenatal clinics in five chiefdoms in the Port Loko District.

A total of 25 respondent from Maforki-antenatal clinic, Bureh Kasseh peripheral Health unit (PHU) marampa Magbesseneh antenatal clinic, lokomasama antenatal clinic a total of respondent from each chiefdom with care givers and five lactating mothers, adult women, 5 men, a total of 100 respondents were targeted, gender parity taken into consideration in the selected ante natal clinic in Port Loko. The ante natal clinic selected provided the necessary information on weaning foods for children.

The data collection tools used were questionnaire aid face to face discussion, and sample of these locally food prepared and given to the children their weight for height taken and plotted in the antenatal chart (card) for a period of six months, observing the hygiene practices, and making corrections were necessary, health talks/teaching done at each centre. The questionnaire developed contain items on different aspects of the objectives of the investigation outline in the study research. The different categories of respondents. This was done to get more disclosures of the effective of traditional weaning on children on the individual on the concept. The result of the analysis was presented in tables, bar charts and pie charts.



RESULTS AND DISCUSSIONS

FIGURE 1- QUALIFICATION OF NUTRITIONIST ATTACHED AT EACH ANTENATAL CLINIC

During the study, it was found out that there was only one Nutritionist attached at the Government Hospital (Antenatal clinic). Nutrition education were done by nurses and community health officers attached at peripheral Health Unit who provide antenatal care in their various sections. These nurses have little or no knowledge above nutrition.

TABLE 1- CHILDS AGE AT WEANING

AGE BRACKET	FREQUENCY	PERCENTAGE
Less than 3months	9	36
4-5 months	9	36
6months	7	28

The table above shows the age at which children are weaned 36% are weaned between the ages of 1-3 months mostly those who weaned are mostly children at this age are mostly working mothers, and most of them can afford nourishing formula (Milk or cereals) for there children 36% weaned their children between the ages of four to five 4-5(months) and 28% introduced weaning foods at 6months.

TABLE II- COMMONLY USED WEANING FOOD

FOOD ITEM	FREQUENCY	PERCENTAGE
Rice pap	5	20
Ogeri pap	5	20
Fofo pap	4	16
Bennie mix	5	20
Corn pap	6	24
Total		100

The table above shows the commonly weaning food used in the community 2016, 1 rice pap, Ogeri pap and Bennie mix are used and 16 foo foo pap and 24% corn pap. These weaning foods are mostly carbohydrate and not fortified only Bennie mix is fortified and has a balanced nutrient that is suitable for weaning. Bennie mixed as the name implies is made up of rice flour, groundnut and benni paste, pounded fish all blended.

TABLE III – HEALTH HAZARDS ASSOCIATED WITH POOR WEANING FOODS

HAZARDS	FREQUENCY	PERCENTAGES		
Malnutrition (kwashiorkor/ marasmus)	10	40		
Anemia	8	32		
Worm infestation	2	08		
Stunted growth	2	08		
Skin diseases (scabies)	1	04		
Diarrhoea	2	08		



The table above explain the effect of poor weaning practices, it was found out that 46% suffers from malnutrition (either marasmus or kwashiorkor) 32% Anemia, 08% worm infestation, stunted growth and Diarrhoea respectively and 04% suffers from skin disorders.

Weaning process ideally for infant should commence between the ages of 5-6 months. The reasons are that, most care givers do not observe hygiene practices in handling babies feeding unit and even food introduced to them are not fortified (balanced diet) to be eaten by the children. All of these coupled together are the cases of these diseases and they are the most common causes of infant mortality in Sierra Leone.

FIGURE II

TRADITIONAL BELIEVES AND TABOOS

Children need more of Iron foods (fish, meat, poultry, fish and enriched cereals, grains beans, foods that contain vitamin C (such as tomatoes, oranges improve the iron absorption of the child. These foods are forbidden most time as care givers regards them as taboos, either because of their traditional believes culture, hereditary diseases, religious believes etc. They believe that the child will become a witch if he/she eats any flesh of an animal or its products that has blood.

TABLE IV - CAUSES OF POOR WEANING PRACTICE

STATUS	FREQUENCY	PERCENTAGE		
Poverty	10	40		
Illiteracy	5	20		
Traditional/ believes	5	20		
Religious believes	5	20		

The table above illustrate the causes of poor weaning practices. There are several factors that causes these poor weaning practice 40% is due to poverty, 205 illiteracy, traditional and cultural believes and Religious believes. These causes listed are the major causes of infant mortality and child hood diseases in Port Loko North western Sierra Leone.

Normally when children are weaned with the wrong type of food at an earlier age, they tend to become malnourish. The table above shows its indication at each age.

The weight for height when children are weans below shows that 3% of them have normal weight 12% malnourished, at age 4--5 months 16% normal, 8% malnourished, 6months and above 44% normal weight and 8% malnourished. The height for age and weight for age read out below 3months 12% normal height and weight for age, 16% malnourished, 4-5 months 16% normal height for age and weight for weight for age, 8% malnourished, above 6months-40% normal height and 8% weight for age malnourished. This results clearly shows that when children are weaning at latter years in life they tend to grow at a faster rate.

Anthropometric measurement is used at all antenatal clinic to access the growth of their child.

FIGURE

THE PHYSICAL EFFECT OF POOR WEANING

It was revealed that poor weaning food causes a lot of treat on physical appearance of the child, such treat leads to predispose of various diseases such as whooping cough acute



respiratory track infection its leads to lower IQ as its ha a negative impart on the academic performance, the child may become stunted and some leads to death.

Effect of early weaning on the weight for height . height for age . weight for age weaning (anthropometric measurement)

	BELOW 3MONTHS				4-5MONTHS				6MONTHS AND ABOVE			
	Normal		Malnourish		Normal		Malnourish		Normal		Malnourish	
	Frequency	Percentage	Frequency	Percentage	Frequency	Percentage	Frequency	Percentage	Frequency	Percentage	Frequency	Percentage
Weight for height	3	12	3	12	4	16	2	8	11	44	2	8
Height for age	3	12	4	16	4	16	2	8	10	40	2	8
Weight for age	3	12	3	12	4	16	2	8	10	40	2	8

Source - 2020

The table above shows the effect of early weaning on the weight for height for age weaning.

At antenatal clinic children are weighed at every visit and their weight for height or weight for age plotted out the Antenatal card which shows that the child is growing or declining.

CONCLUSION

Many of the traditional weaning foods used in Sierra Leone (Port Loko in Particular, are of low nutrient density, cereals grains and starchy roots and tubers continue to form a bulk of the weaning foods some children however, are weaned directly out of the family diet aim earlier age.

Infant feeding practices are not fully developed, infection and malnutrition are problems associated with poor weaning practices. Breast-feeding was universal at birth, early weaning with watering, energy food is introduced, the weaning food dominated by rice and Ogeri papa which is known to be bulky with no nutrient content. Consumption of fruits and vegetables is very low with negative implication (taboos/traditional and religious believes). The socioeconomic status of these responded were really poor and that forced them to give their children starchy entry food which is easily accessible within the community seldom do those care givers attend ante natal clinics, they only do that when their children are sick.

Most parents used their hands to feed their children, which might choke the child to death. Diarrhoea responding infection, anemia, vomiting was common amongst their children fiscally -contaminated water is important vehicle for transmitting pathogenic-microorganisms. Which account for a high degree of mobility and mortality in these children.

RECOMMENDATION

- The food and nutrition directorate to established dietary guidelines for weaning.
- > months
- Advocate for nutrition education in the school curriculum
- ➤ Teaching parents and care givers on specific feeding disorders, such as Anemia .obesity
- ➤ Promote nutrition talks at both post-natal and antenatal clinics
- ➤ The food and nutrition directorate to improve on locally available weaning foods found in the communities by either formulating and developing nutritive weaning foods.
- > Food directorate to develop recipe books.

BIBLIOGRAPHY

Asare Elizabeth and Kwaofoa Mercy (2011) – Understanding Management in Living" Published by Kwadwoan Publishing.

Eugenia Rogers – Home Economics for Junior Secondary Schools – Pupils book 1-2 Volume 2. Published by Macmillan education 2003

Prof. E. U. Anyakoha M Eluma – Home Management for Schools and Colleges

Africana-feb Publishers ltd Onistha, Nigeria.

Petkeviciene J, et al. BMC Public Health 2015- Anthropometric measurements in childhood and prediction of cardiovascular risk factors in adulthood.