

OBSERVATION OF A CORRELATION BETWEEN EATING HABITS OF MOTHERS AND MALNUTRITION OF CHILDREN 0 TO 5 YEARS DURING AN ANTHROPOLOGICAL EXPLORATION IN THE DEPARTMENT OF SÉGUÉLA (CÔTE D'IVOIRE)

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ABSTRACT

From the cradle to coffin, good diet is a crucial element in the development process of each of us. This means that poor feeding practices are able to subvert various aspects of life of the individual who is affected. The category of individuals who are interested in this research is children 0 to 5 years whose feeding practices for mothers, noted, may interfere somewhat, more or less significant and persistent, various forms of development of this category of children. And that, despite the sensitization of the health authorities of the department. Indeed, put in a cultural and social context, socio-anthropological exploration undertaken in the department of Séguéla, North-west of the Côte d'Ivoire, clarifies that the feeding practices of mothers with children between 0-5 years lead to malnutrition. It is this situation that this article attempts to provide some answers, relying on a qualitative approach to comprehensive targeted. This approach is strongly focused on semi-structured interviews and participant observation carried out over a long anthropological boardwalk³ in the north-west of the Côte d'Ivoire (department of Séguéla).

Keywords: Child malnutrition, feeding practices of mothers, children 0 to 5 years.

Résumé : Depuis le berceau jusqu'au cercueil, la bonne alimentation constitue un élément crucial dans le processus de développement de tout un chacun de nous. C'est donc dire que les mauvaises pratiques alimentaires sont capables de bouleverser divers aspects de l'existence de l'individu qui en est affecté. La catégorie d'individus qui intéresse le présent travail de recherche est les enfants de 0 à 5 ans dont les pratiques alimentaires des mères, constatée, risquent passablement de perturber, de façon plus ou moins importante et persistante, divers formes du développement de cette catégorie d'enfants. Et cela, malgré les sensibilisations des autorités sanitaires du département. En effet, mise dans un contexte culturel et sociétal, l'exploration socio-anthropologique entreprise dans le département de Séguéla, Nord-ouest de la Côte d'Ivoire, permet de préciser que les pratiques alimentaires des mères des enfants de 0 à 5 ans fabriquent la malnutrition. C'est à cette situation que le présent article tente d'apporter quelques éléments de réponse, tout en s'employant sur une approche qualitative à visée compréhensive. Cette approche est fortement axée sur les entretiens semi-structurés et l'observation participante réalisée sur une longue promenade anthropologique⁴ dans le nord-ouest de la Côte d'Ivoire (département de Séguéla).

Mots clés : malnutrition infantile, pratiques alimentaires des mères, enfants de 0 à 5 ans.

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³ Anthropological boardwalk is a boardwalk where we observed closely the socio-cultural practices related to child nutrition.

⁴ La promenade anthropologique est une promenade où nous avons observé de près les pratiques socioculturelles liées à la nutrition des enfants.

INTRODUCTION

Long before the epoch of the carved stone and polished stone, human beings have always been engaged in a perpetual quest for longevity default pretending to eternity. Good nutrition plays a central role in this perpetual quest for longevity of men. However, data on the increase in malnutrition rates of children from 0 to 5 years within the population make us fear the worst because this segment of the population is responsible for promoting and ensuring promotional ambition in African countries. For example, in Côte d'Ivoire, analysis of data from the Demographic and Health Survey 2012 suggests that 30% of children under 5 suffer from malnutrition. [EDS- 2012]. This situation affects vulnerable groups, occurrence in children under 5 years, is now a public health problem in Côte d'Ivoire. UNICEF data significantly reinforce this assertion. According to UNICEF, malnutrition remains an important cause of mortality in children under five. It is the underlying cause of 50% of infant mortality in Côte d'Ivoire, [EDS-MICS, and 2011-2012]. According to these sources, that is to say, Unicef, EDS-MICS 30% of children under 5 suffer from chronic malnutrition in Côte d'Ivoire. Based on these rates of national and international investigation reports, it is reasonable to hypothesize that, the fate of children under 5 years is currently being threatened.

Côte d'Ivoire records for several years an increase in the prevalence of chronic malnutrition in children under 5. Thus, according to the National Program of Nutrition (PNN, 2009) the national rate of malnutrition in children under 5 is increased from 25.4% in 2000 to 34% in 2006. The North and West regions of the country have always been the high prevalence areas with 46.6% and 41.1% respectively. In the northern zone which has the highest prevalence (46.6%) of the country, the Worodougou region has the highest prevalence in all regions of the country. Indeed, the Worodougou region with a prevalence rate (48.4%) higher than even the national rates. In other words, the main results of various nutritional surveys of National Nutrition Programme conducted in 2008, 2009, 2010, 2011 and 2012 show that the malnutrition hotspots in Côte d'Ivoire are located in the northern and western areas, especially in areas of Bafing, Guémon, Worodougou and Montagnes. Furthermore Worodougou region has the highest malnutrition rates (48.4%).

On analysis, it can be said that this alarming situation is due to the long military and political crisis which caused prolonged absence of the state and its services in this area. But in reality it is not so, because despite the presence of the state since 2011, sensitization campaigns, trainings, advices and promotion of good nutritional practices caravans organized at national and departmental level, the Nutritional painting pins up endemicity of child malnutrition in the Worodougou region. Indeed, acute malnutrition in children 4-24 months was 16.1% in 2009 (PNN, 2009), is estimated at 14.7% in 2014. Under the angle of politics, we see that the rate is slightly lower than in 2009, However, from the perspective of the WHO, (2000), classification, this rate is at a near-critical level. But then, what explains that despite training, consulting, caravan and sensitization of the population of Séguéla Department, the child malnutrition rate is still rising? It is this question that this article attempts to provide answers to enrich the debate on the nutrition of children under 5 years in Côte d'Ivoire which wants emerge in 2020.

Methodological framework of the study

The methodological framework used in this study is first powered by a review of the literature capitalizing the current scientific thought on malnutrition, then, with a preparatory

phase coupled with a qualitative approach based semi-structured interviews and observations, Finally, a theoretical structure for understanding the phenomenon that concerns us (Analysis of malnutrition and its main determinants). At the desk review, the disciplinary vector was sociological journals, economic and medical related to malnutrition. This documentary operational phase was to medium digital resources online and reports of nutritional surveys of the National Nutrition Program (PNN). The exploited documents helped to master the material joints of the study and help guide the search central idea and subsidiary issues arising. Let us recall that the ethnographic part of this contribution is that of the health district of Séguéla.

As for the preparatory phase, it began with formal exchanges sometimes, sometimes informal, with health workers and social workers of the health district of Séguéla, Specifically the service responsible for nutritional issues for children 0 to 5 years in the department. Informal exchanges were used as sources of information, because it was important for us to see how popular representations, true or false, helped to organize the local reality for the actors involved in child malnutrition. This helped to better understand the phenomenon from a distance, to further strengthen the documentation process which began well before the choice of field of study. This phase also allowed to have an idea about the proper procedure for the collection and analysis of data.

Respondents were selected to illustrate the dynamics of nutritional behavior of mothers in the health district. During the interviews which took place from 20 November 2015 to 03 December 2015, specific reminders on nutrition practices are introduced so as to make clear the terms of use in terms of verbatim. It is also worth noting that in the dynamic data collection, informal interviews have sometimes turned into group discussions. The constant reinvention of traditional and modern living in Ivory Coast is not at all observable by Durkheim's notion of sociological behavior of the actor. Rather, this invention is analyzed and implemented very vigorously, not only through the "captivating" Weber's sociological approaches but also through the interactionist theory. This last theoretical approach "analysis behavior in terms of strategies of actors or groups of actors considering that these strategies value the room for maneuver, however minimal, that has any social actor, even dominated in its relations with institutions and other actors" (Chauveau, 1994). Interviews with the direct actors of the phenomenon (the mothers) of the study was very thorough, this because of the central role that health authorities at national and international level, have given to mothers in speeches and practices regarding child malnutrition in the country. Thus, food practice of mothers was entered through the words, speeches and behavior of direct and indirect actors of the phenomenon. Just because we agree with Chauveau (1997 :195) that individuals always have reasons, good or bad, to act as they do.

After this methodological framework, note that the interviews have mobilized 34 individuals directly or indirectly connected with the phenomenon of malnutrition in the health district of Séguéla. This is among other mothers, health workers in charge of the issue of nutritional health in the department, social workers and sellers who sell of the reference food of the mothers called « Anango-Baga ». These women who are sellers in the big market and in the neighborhoods of Seguela were interviewed to get information on the social logic which structure their business.

Malnutrition embedded in the popular imagination of the mothers

At first, note that it's on infant nutrition scene, that the social and cultural popular imagination is the strongest alive. Indeed, in Côte d'Ivoire as in many other countries or African city, when it comes to nutrition for children 0 to 5 years old, the recommended medical imaginary by health authorities is most often overturned by the majority of mothers. The nutritionist says the same thing when he says « *good, good, malnutrition cases we find much here (...)! The women there, they do not give much in the children, they have their porridge called Anango-Baga, it's what they like to give kids, it's their culture...* »; « *I talk about them Anango-Baga, they give children, this porridge does not contain all the nutrients the child needs for growth* ». Or in this upheaval medical imaginary, children, future leaders of tomorrow, are found between the coffin and acute or chronic malnutrition, or severe or moderate underweight.

The literature lets yet foresee that malnutrition is not only an appetite satisfaction affair. This implies that a child that a mother is eating enough to calm the immediate hunger can still be malnourished, UNICEF, (1998). Indeed, in the view of literature, malnutrition can be in various forms that act in symbiosis. This is the case of protein-energy malnutrition and disorders caused by micronutrient deficiencies.

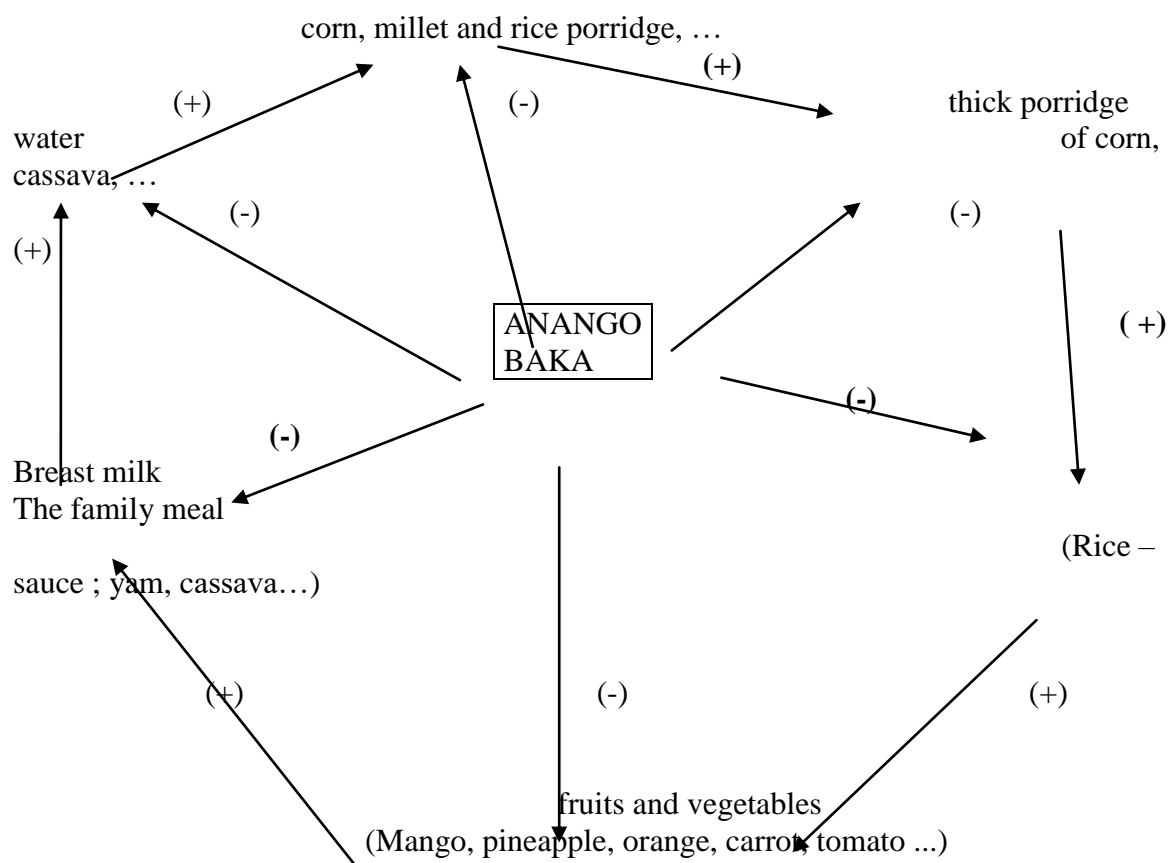
The popular imagination that structure the individual consciousness and / or collective of mothers was observed in at least two major modalities. The first modality is related to the social imaginary that mothers mobilize around itself malnutrition as a childhood disease.

Indeed, the study found that mothers developed etiological and nosological of malnutrition not to achieve a verifiable knowledge and communicable, but to legitimize nutritional practices far the recommendations of health authorities. The head of the Nutritional Therapeutic Unit (NTU) of the regional hospital says the same things when he says:

“When in front of malnutrition of their children, they do not make the connection with the child's feeding: rather they say that the child has furuncle in his stomach. For them it is the belly furuncle which causes weight loss or bloating the child's stomach. Furuncle of belly is natural, they say, so when it starts, there are drink traditional medicines belly furuncle to the child.”

In respect of this first category, we can admit that thinking malnutrition is to try to include in the temporal chaining, and logic belly boils and is at the same time legitimizing the observance of specific responses located in different points of the causal sequence, may alter the course.

In the region of Séguéla, food practice of mothers is shaped by extensive networks of imaginary disease, replies produced by the worldview in force in the department. This worldview as a system of thought can be objective or conscious and regular exchange between the actors and their nutritional strategy for children; but it can also be subjective or unconscious and then has an unexpected influence on nutritional patterns of mothers. This is why health workers in charge of nutrition, organize food good practice advice, on occasion children weighing sessions in health centers of the health district. But despite the advices, mothers “refuse ” to follow the recommendations of health personnel, as reflected in the diagram below:



LEGEND

- (+) positive attitude to the recommendations of health personnel.
 (-) negative attitude to the recommendations of health personnel.

here seen with sufficient clarity that the meanings and causes that are attributed to child malnutrition in Séguéla Department are dominated by a kind of popular rationality. Under these conditions, the nutrition services built by the state to protect the health of children is not the one who directs the nutritional life of the child. Consequently, mothers first try to resolve the issue by tradition before going to the nutritionist usually when the case became desperate. That's what the midwife of the Maternal and Child Protection structure told us (MCP) in these terms: « *the majority of women here refuse to submit their child nutrition service, this is not in their culture* ». On that basis, one can hypothesize that, the gap between rationality of conventional medicine and nutritional practice of mothers is strongly dependent on the popular imagination or health awareness among women. One is used to reveal the other and both are the obverse and reverse of the social logic of understanding of the disease or health of children in relation to nutrition.

The second modality is directly related to the popular imagination mobilized around the magic porridge itself commonly called “Anango-Baga”. At this level, the analysis of empirical exploration products in the department suggests a profound unity of inspiration and direction about what they call “Anango-Baga. This profound unity lies in the establishment and composition of social reality in the mythology of Koyaga⁵ women. In this mythology first is a linguistic dimension, (JAFFRE and SARDAN, 1999) « *Nago-baga-hot Hé déh*

⁵ Koyaga : The local main ethnic group of health district of Séguéla.

lagnanan, Ani ka làbhoyan». This speech literally meaning the porridge called « Anango-Baga » gives a beautiful shape to babies and makes them presentable to the community. When trying to specify the motivations that lead the actors to choose or refer to the porridge called « Anango-Baga » for nutrition for their babies, they systematically refer to the effectiveness of nutritional practice selected through a security discourse linking nutritional choices and the beautiful form of the baby. With such imagination, malnutrition rates can not be lowered as desired by the health authorities. However, the dynamic process within which the nutritional practices of mothers against their children is however a result, it is itself builder of a share of the social. If not, how can we admit that mothers gleefully jump nutritionists available to the population by the state, and indulge in the popular practices.

Using the magic porridge or "Anango-Baga" source of malnutrition in the district

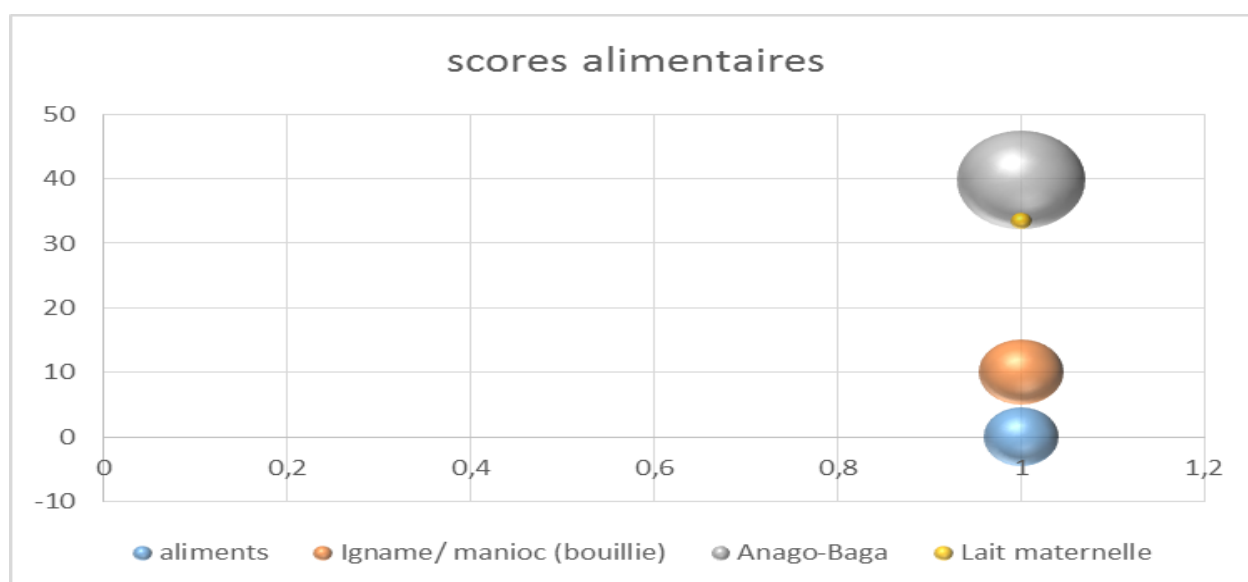
« Eat five fruits and vegetables a day », « eat a full and varied food », « Alcohol abuse is dangerous for health ». All indications that remind us that the state of our health depends largely on our self-esteem in relation to health. Now, if the state of health of the adult, master of his movements, depends in part on self-esteem health, that of the child of 0-5 years can only depend on self-esteem health of his parents which finds expression in the child's diet. That's what the nurse responsible for the management of malnutrition at the regional hospital in Séguéla confirmed in these terms *« Yes, mothers have a great responsibility because it is they who are responsible for feeding children and their practices can promote the occurrence or not of malnutrition ».*

The growth in the use of the magic porridge that mothers commonly call « Anango-Baga » in Côte d'Ivoire and particularly in the department of Séguéla takes a new dimension for at least a decade, that of chronic malnutrition in children from 0 to 5 years. The consumption of this magic porridge which is comprised solely of edible starch happened to develop, between mothers and saleswomen, a social network for medical character and ranging along the axis from home (mother) to market (porridge's saleswomen). So to say that the magic porridge called "Ananga-Baga", occupies the center of the nutritional sphere of children 0 to 5 years. This idea can be confirmed by the words of a midwife of maternal and child health services, saying *« good, I know the nutritional practices of mothers is that they give early family meals to children, they do not wait the child is 6 months, they begin to give hard foods to children from 3 months. Some women also waiting six months before giving other foods to children, but they do not know compose children's meals, they too often give stodgy to their children (...). with Anango-Baga ».* Based on participant observation and interviews conducted in the department of Séguéla, one is be entitled to say that today the construction of child malnutrition is consistent with the expectations and promises of health unconsciousness which finds expression in «Anango-Baga ». Basically, malnutrition is a consequence of inadequate food intake, but many other factors also come into play, (AFD, 2016). That is why nutritional practices for mothers deserve to be analyzed, because from six months, infants should receive complementary foods, as breastmilk no longer meets all nutritional needs. During the complementary feeding period, the age of six months to five years, the child must be at least four times a day, a meal rich in energy and nutrients and easy to digest according to WHO recommendations. However, the report of the nutritional survey in 2012 of the National Nutrition Programme (NNP), 36% of children do not receive adequate food from six months. Since the choice of foods consumed by infants is usually done by mothers, then it is important to question the nutritional practices of these. The field survey conducted for this purpose, shows that more than half, that is to say 66.78% of mothers use "Anango-Baga" as a basis for additional food for the nutrition of the child. To this end, healthcare professionals of

the maternal and child, find that this porridge constitutes for mothers the food of choice for infant feeding.

Given this finding, therefore we are entitled to know what nutritional strategies of mothers of department are to the health of the child. Moreover the quest for “beautiful form of the baby” put forward in the interviews is the product of a social construction that allows with regard to their health awareness, the development of a collective representation around “Anango-Baga”. Here what matters sociologist is not whether such a practice is good or not, but why it is thought good by and ineffective by health authorities, What does it mean, and how is constructed and recognized the efficiency that women attribute to their practices?

Thus, the speech released during various interviews reflect the idea that the female population in charge of child nutrition mobilizes a maximum range of nutrition responses as that would offer them the choice of specialist officer infant nutrition. Thus, the child is forced to eat porridge “Anango-Baga” and the family meal from rice “dékachia” ou “woussou”. When reading the scores attributed to different foods that mothers associate with Anango-Baga, (see diagram below), it appears that mothers only seeking to feed the child quantitatively and not qualitatively.



Source: Field survey in November 2015 to Séguela

Without analysis, scores shows that the porridge called “Anango Baga” is used by mothers, while this practice is not recommended by nutrition experts.

This practice of mothers not in accordance orientation nutritionists, is powered by a social circuit. However through competing systems explanation of malnutrition and nutritional strategies for women in the district, it turns out that the influence of entourage outweighs awareness and advice of nutritionists. That is to say, many mothers are colonized in part, by nutritionists methods used by their " elders ". This form of symbolic solidarity that is observed in the nutritional behavior of mothers is supported by about a mother in these words: “it was my mother who told me that”. The social worker confirms this fact in these words « usually mothers say it is their parents who give them advice to feed the children. For example, There are women who have enough milk in their breasts to nurse their babies, but

they are going to pay "Anango-Baga" to give their child because she sees other women do the same. It has become a fad».

In terms of infant feeding in the district, the focus is disproportionately placed on the magic porridge « Anango-Baga » and very little on the recommended diet for nutrition services, to the point that the financial and technical efforts of the baby Protection Compliance struggling to recourse married mothers. On analysis, the exaggerated use of magic porridge « Anango-Baga » can be explained by two major assumptions.

First, there is the assumption that the use of the magic porridge is related to quality failure and the cost of care and hospitality still justified in mothers fear of the hospital, fear of poorly controlled medical and normalized by a code of ethics (Massiot, 1995:32) and lack of trust in public health facilities in general.

Secondly, there is the assumption that the use of the porridge "Anango-Baga" is justified by the position that occupies Koyaga woman in the household. Indeed, most women significantly contribute to household expenses, especially in the construction of daily meals and that with precarious incomes. In this situation, « Anango-Baga », porridge very accessible because of its low price, is the most suitable alternative. With this porridge women can have the time to do their daily work and to save money to make other charges. The discourse of this mother illustrates this assertion *"This is because milk from my breast is not much, when the child head, it is not full. When I give the porridge, « Anango-Baga », he eats, he's full and then he sleeps; there I can work quietly."* On analysis, these words are emerging ignorance or poor education of mothers. So we analyze the place of ignorance of mothers in the manufacturing process of nutritional practices ineffective and not recommended by experts, and the underlying operational framework. It claims to be prescriptive but highlights how ignorance or level of health awareness among mothers constitute an operator manufacturing malnutrition. The proposed approach is in fact a common framework for all women surveyed as part of this study. According to an African old adage reported by Dedy Séri (2007) « one who was once bitten by a snake is afraid at the sight of a single liana ». This wisdom suggests that the idea of nutritional ignorance relates to the preservation of life of the child. Indeed, the subject is aware of the danger of the snake, to have experienced or have heard of it does not develop the same attitudes and strategies that he who knows nothing at all. In other words, the knowledgeable mother takes less risk to her life and that of her baby, while that which is less exposed her child. It is recognized by literature that individuals reproduce ineffective patterns of thought and action that widen health inequalities. Also is there a difference in the nutritional health outcomes, both between Western societies and that non-Western societies as within societies. To this end, the many diagnostic studies of the last 30 years of application of Alma-Ata, have rarely complained or paralleled the adverse nutritional practices and ignorance of mothers. It is true that significant and sustained discussions have identified many obstacles nutritional quality of children 0 to 5 years in Africa generally and particularly in Côte d'Ivoire such as, individual and / or community poverty of individuals and the severe shortage of health infrastructure, disproportionality between the cost of health and gross national product (GNP), the weakness of health systems in the organization, managing health care provision, monitoring and evaluation and the existence of a large gap between policy statements and the level of their implementation. But these are of order variables infrastructure or equipment which describe the socio-economic position of the actors, their living conditions and « New material condition putting in the drawer ignorance variable.

The results of this study clearly show that malnutrition is built by the ignorance of mothers. Mobilized the variable ignorance here is to refer to education, all the more that education is the remedy for ignorance.

That's what the midwife told us in these words « *Women who have their malnourished children are often illiterate. They are generally small businesses or sometimes they are farmers* ».

The speech from the midwife automatically creates the existence of a parallel between the education and occurred or not of malnutrition. In fact, the theories and nutritional strategies available to a mother to cope with the problems of maintenance of the life of her child, its retention in an implicit or explicit goal of health marry symbolically and unconscious level of education or knowledge of reality. So ignorance of mothers leads malnutrition in the health district of Séguéla.

CONCLUSION

This work aimed to analyze the relationship that emerges between nutritional practices for mothers and child malnutrition rates rising in the department of Séguéla. The comprehensive perspective taken in the study to understand that increasing year by year the malnutrition rate takes a constructivist character. To this end, the study showed the persistence of speech highlighting "ineffective" nutritional practices. Thus, the study helped to identify the existence of two major elements involved in the production of child malnutrition in the health district. The first element refers to the emergence of the popular imagination on infant nutrition scene of the district. The second element identified by the study as structuring child malnutrition is the influence of "magic" porridge, called "Anango-Baga" in the nutritional awareness of mothers in the district. This element is colonized by the level of education of mothers.

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