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PERCEIVED ADEQUACY AND CHALLENGES OF FAMILY MEAL INTAKE OF FEDERAL UNIVERSITY OF TECHNOLOGY, OWERRI (FUTO) WOMEN

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Abstract

The objective of this study is to investigate the perceived nutritional adequacy and challenges of family meal intake as provided by Federal University of Technology Owerri (FUTO), women. A descriptive survey method using 100 women selected from various schools and units including the library and registry was used for the study. A semi-structured interview schedule/questionnaire was used to obtain information from respondents. The result shows that nutritional meal intake is inadequate in families of FUTO women. The study concludes that women should be made aware of the implication of their food choices and habits and how these relate to their families' well-being. The research recommends, amongst others, training, education and awareness programmes on nutritional knowledge through public lectures and community nutritional programmes (messages, social media and support materials); government should standardise prices of food; adequate budget should be made on food allowance by families and finally, government should increase monthly income of workers.

Keywords: Nutrition, family, perception, challenges, meal.

Introduction

Adequate nutrition is essential for any family to achieve optimal growth, development and good health because of the stages of growth that take place during lifetime. The influence of proper diet on health cannot be overemphasised. Nutrition is a major factor in promoting health, preventing and treating diseases and improving the quality of life (Vorster & Hautvas, 2002). Nutrition also determines the health of all (Brundtland, 1999). It starts with what we eat. This is why the saying "we are what we feed on". Good nutrition is essential for the health and human capacity needed to achieve the Millennium Development Goals (MDGs) for health and nutrition by 2015; hence, the MDG 4: to reduce child mortality and 5: to improve maternal health targeted at women and children (Millennium Development Goals, 2005).

Basically, the foods we eat contain six

vital nutrients: carbohydrate, protein, fat, mineral, vitamin and water that are essential for growth, repair and maintenance of the body. Adequate diet is, therefore, described as the meals that have a balance of the six key nutrients in the right proportions (Ene-Obong, 2008). Thus, nutrients intake must have adequate requirements in order to avoid deficiency diseases such as developmental abnormalities, scurvy, rickets, anemia, kwashiorkor and also chronic diseases such as high cholesterol, diabetes mellitus, goitre, cancer and cardiovascular failure (Weininger, 2015). Well-nourished people learn better, are more productive and can build immunity to resist diseases (Obaid, 2004). Ene-Obong and Ekweagwu (2012) maintain that malnutrition erodes human capacity, reduces productivity, survival, health, education and the economy of the nation. Thus, proper nutrition is now seen as a basic right for human development, productivity and

economic development.

In Nigeria as in other parts of the developing world, malnutrition is one of the perceived public health problems. There is a growing concern that malnutrition is not only a problem of food security but also a function of health, social awareness and behavioural determinants affecting women and the quality of meals they provide for their families. A woman's social awareness and behaviour are essential input into family meal intake and its nutritional composition. Mothers have shown to be the predominant meal providers for their families (Ene-Obong, Davidson, Mbah & Atah, 2010). Women's social, economic and psychological characteristics influence the quality of meal they provide for their families (Ene-Obong, et al, 2010). Women constitute an important segment of any society as they represent the mothers of the entire Nigerian population. They constitute 49% of the entire Nigerian population (National Population Commission, 2007). Thus, educating women to understand and appreciate nutritional value of meal intake of their families has far-reaching implication for the development of any society. As Ene-Obong and Ekweagwu (2012) maintain, good health and adequate nutritional meal intake of the family improve learning potential, contribute to decreasing risk of health conditions, enable healthy adulthood, aging and consequently contribute to national growth and development.

However, in spite of available information through books, journals, radio and television programmes on proper nutrition that would have enlightened, educated and created awareness to women on the need for proper diet, there are clear indications that a lot of women do not know how to feed well. This could be noticed in some deficiency diseases arising as a result of inadequate nutrition. Through these nutritional health problems, many women and families that would have been healthy are suffering from one health problem or another. This study thus, intends to determine the nutritional adequacy and challenges of family

meal intake of women in Federal University of Technology Owerri.

Objectives

1. To determine the types of meal provided by Federal University Technology Owerri women to their families.
2. To find out the number of meal(s)/course(s) provided by Federal University of Technology Owerri women to their families.
3. To ascertain the perceived nutritional adequacy of the meals provided by Federal University Technology Owerri women to their families.
4. To determine the challenges of providing adequate meals by Federal University Technology Owerri women to their families.

Literature Review

Nutritional adequacy is described by Ene-Obong (2008) as dietary intake elements that must be supplied sufficiently to guarantee a healthy diet. These nutrients are carbohydrates, proteins, fats, water, minerals and vitamins. A meal as defined by Pliner and Rozin (2000) is a channel of food intake. The United States of America Food and Drug Administration define a meal as a portion of a pyramid-based dietary intake that includes three to five food groups (Renkyl, 2000). A family consists of one or two parents and their responsibility for the growth and development of one or more children (Foster, 2001). Elliot and Gary (2000) define a family as any set of people who are from the same household and use the same food resources. Family meal serves as a source of good family nutritional health, growth, development and socialisation (Curran, 2001).

Current research indicates that family meal has undergone changes over the years. Emphasis is more on the nutritional value of meals with findings revealing negative effects on eating habits, food choices, food skills, knowledge and the socio-economic

characteristics of women who provide the meals. Researches on meal intake and its nutritional value support meal adequacy as a tool to help families maintain ultimate health condition. Study by Onifade, Owoyaye and Ologun (2008) on nutritional health problems in Nigerian adolescents attributable to availability of foods and feeding culture in Nigeria, found out that adolescent students eat mainly carbohydrate food because it is mainly available and this accounts for high rate of Kwashiorkor among secondary school students. Study by Okwori, Onu, Onagwa and Waziri (2011) on infant feeding practices and the effect of early complementary feeding on child nutritional status in Nigeria found out that early introduction of complementary foods may have negative effect on the weight of the children and is also associated with undernourishment and malnutrition. Research on young children and teens support the value of the family meal as tool women can use to help raise healthy children and families. However, family meal intake presents a lot of challenge for many women and their families as they cope with job demand, work schedule, knowledge of nutrition, income, time, expenditure and cooking abilities. A good knowledge of food principles would enable women adjust to changing food needs and supplies and be receptive to further knowledge and informed

choices that will maintain good health, well-being and productivity.

Studies have examined meal intake of families, their health and well-being of household members. Not much is known about the nutritional adequacy of meal intake of FUTO women and their families and how the family is strengthened healthwise as a result of an increase in nutritional family meals.

Methodology

The study was conducted in Federal University of Technology Owerri, Imo State, Nigeria. The population of the study consisted of women working in FUTO with a total of 1351 women comprising of 1094 academic and 257 non-academic staff. Since this study was part of a larger study aimed at determining the relationship between perceived nutritional adequacy and challenges of meal intake of families of FUTO women, a simple random procedure was used to select women for the study. A total of 135 women participated in the study. However, the response rate shows that 100 (74%) questionnaires were duly filled and returned, while the remaining 35 (26%) were those whose copies of the questionnaire were either not properly filled or non-response. Data analysis was, therefore, based on the 100 respondents.

Date Analysis

Demographic Characteristics of the Respondents

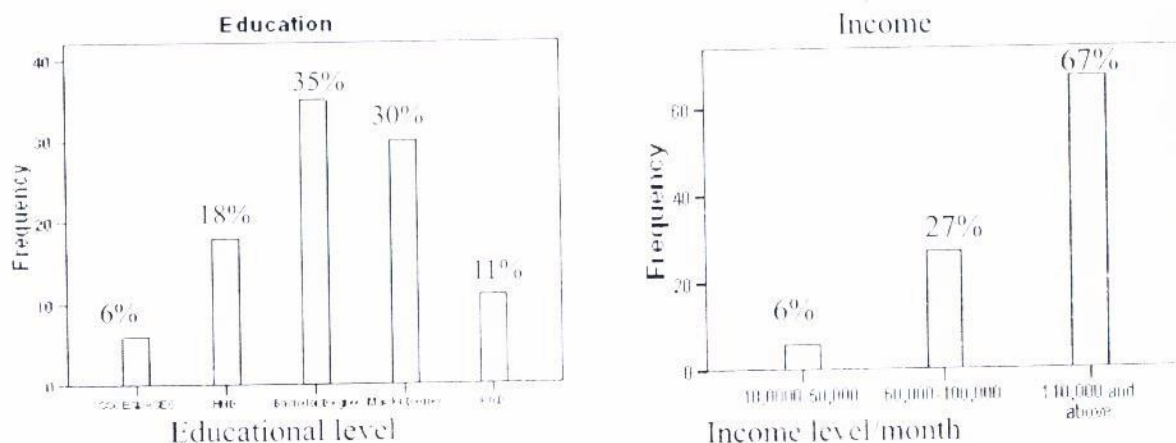


Figure 1: Multiple Bar Charts Showing Demographic Composition of Respondents

Figure 1 shows the educational background of FUTO women. Women with Bachelor's Degree have the highest response rate of (35%), followed by Master's Degree (30%), Higher National Diploma (18%), Doctor of Philosophy (11%), with the least being Senior Secondary Certificate Examination West African School Examination Council (6%). This result shows that majority of the

respondents are educated.

On monthly income, women with monthly income of 110,000 and above have the highest responses of (67%), 60,000-100,000 (27%) and 10,000-50,000 (6%). This implies that respondents with higher monthly income are in the majority. Thus, can afford to feed their families with adequate nutrition.

Table 1: Types of Meal Provided by FUTO Women to their Families

Food variable	Frequency	Percentages (%)
a. Roots, tubers and starchy		
Garri (Eba)/Akpu (Fufu)/ wheat/ Semovita	97	97.0Very high
Yam	95	95.0Very high
Cocoyam	33	33.0Very low
Corn	40	40.0Low
Potato	58	58.0Moderate
Plantain	62	62.0Moderate
Spaghetti/Macaroni	40	40.0Low
Noodles (Indomie)	60	60.0Moderate
Rice	97	97.0Very high
b. Animal protein		
Meat	90	90.0Very high
Fish	83	83.0High
Egg	60	60.0Moderate
Milk	92	92.0Very high
Cheese	5	5.0Very low
c. Cereals		
Oat meal	42	42.0Low
Cornflakes	45	45.0Low
Pap/ Custard	48	48.0Low
bread	90	90.0Very high
d. Legumes		
Beans	92	92.0Very high
Akara	87	87.0High
Moin moin	60	60.0Moderate
Soy milk	49	25.0Very low
d. Sea foods		
Periwinkles, Crabs, Shrimps, Prawns, Lobsters	60	60.0Moderate
e. Vegetables		
(water leave, pumpkin leave, okazi leave)	79	79.0High
f. Fruits		
(Water melon, orange, pineapple, paw paw and Banana)	62	62.0Moderate
Total		100

Table 1 shows the types of meals the women present to their families. It shows that in the group of roots, tuber and starch, the highest response rate was made as garri (eba), akpu (fufu), wheat/ semovita (97%), rice (97%), followed by yam (95%). Cocoyam has only (33%).

Animal protein has the highest response rate of milk (92%), meat (90%), and fish (83%), while cheese has the lowest response rate of (5%).

Cereals consisted of bread (90%), pap (48%) and cornflakes (45%). The lowest is oatmeal (42%). Legumes reported beans (92%), akara (87%) and moin moin (60%). Soybean has only (49%). Sea foods generally reported (60%). Vegetables reported (79%) and fruits (62%). Data also revealed that other vegetables mentioned by respondents include bitter leave, garden egg leave, uzizi and utazi leave. Fruits mentioned includes apples, pear and mango.

Table 2: How many times families eat

Times families eat	Frequency	Percentage (%)
One	0	0.0
Two	9	9.0
Three	91	91.0
Four	0	0.0
Five	0	0.0
Total	100	100

Table 2 shows that out of 100 respondents, (91%) ate three times a day, 9% ate two times, while there was no response on one, four and

five times. This implies that they provide the three basic meals of breakfast, lunch and dinner to their families.

Table 3: Perceived nutritional adequacy of each meal

Meals	Percentage (%)	Perceived Adequacy Responses
Breakfast		
Egg stew and Plantain potatoes, bread, egg and tea/beverage, akara and pap/oat meal, vegetables and fruits.	48.0	Adequate
Cornflakes rice and noodles (indomie).	52.0	Adequate
Total	100	
Lunch		
Garri (eba), akpu (fufu), wheat/semovita and vegetable soup, fish/meat pepper soup, moin moin, vegetables and fruits.	51.0	Adequate
Yam, rice and beans.	49.0	Adequate
Total	100	
Dinner		
Fish/meat sauce, yam/vegetable pottage, rice and beans, plantain, potatoes, yam, spaghetti/macaroni with shrimps, vegetables and fruits.	45.0	Adequate
Garri (eba), akpu (fufu), wheat/semovita and egusi/ogbono soup.	55.0	Adequate
Total	100	

Table 3 shows the result of interview/response of the women on the meals which they provide for their families and the perceived adequacy. Of the 100 women, (48%) informed that their families are provided with egg stew and plantain potatoes, bread, egg and tea/beverage, akara and pap/oat meal, vegetables and fruits bread, egg and tea for breakfast, while the majority (52%) gave their families cornflakes, rice and indomie (noodles). While the first group gave their families the major classes of food

carbohydrate, protein, minerals and vitamins, the second group's meal lack protein, minerals and vitamins. However, the entire respondents are of the view that breakfast they provide for their families are adequate.

On lunch 51% of respondents reported that their families are provided with garri (eba), akpu (fufu), wheat/semovita and vegetable soup, fish/meat pepper soup, moin moin, vegetables and fruits; while 49% gave their families yam, rice and beans. The first group gave their families the major classes of

food protein, carbohydrate, minerals and vitamins; the second group's meal lack protein, minerals and vitamins. Yet, the respondents were of the view that the lunch they provide for their families are adequate.

For dinner (45%) provided their families with fish/meat sauce, yam/vegetable pottage, rice and beans, potatoes, plantain, spaghetti/macaroni with shrimps, vegetables and fruits, while (55%) gave their families garri (eba), akpu (fufu)/wheat/semovita and egusi or okra soup. The first group gave their families the major classes of food: protein carbohydrate, minerals and vitamins. The second group's meal lacked minerals and vitamins and also are heavy meals which should not be eaten at night. However, the entire respondents are of the view that dinner they provide for their families are adequate.

Results

types of meal provided - Varied types of meal

are provided three times daily by FUTO women to their families.

number of meal (s)/course (s) - Three course meals are provided.

perception of meal adequacy - Perception of meal provision is adequate

The result of the study shows that the perception of meal provision of FUTO women to their families is adequate, irrespective of the nutritional inadequacy of the meals on face value assessment. The finding of this study shows that the meal pattern is inadequate and thus, may not meet the nutritional needs of FUTO women and their families. This situation, however, contributes to aging, decreases health conditions, healthy adulthood and productivity of workers.

Table 4 Challenges to Adequate Provision of Nutritional Meals

Challenges	Frequency	Percentage (%)
Inadequate income	43	43.0
Inadequate control of family budge by women	24	24.0
Low family budget on food allowance	43	43.0
High food prices	44	44.0
Product advertising cannot be guaranteed	11	11.0
Inadequate nutritional information on packaged food item	12	12.0
Lack of nutritional knowledge	52	52.0
Lack of cooking ability and skill	17	17.0
Poor food habit	32	32.0
Poor personal food taste	40	40.0
Low regional food sufficiency	29	29.0
Lack of food variety	28	28.0
Tight work schedule	40	40.0
Total		100

From the Table, the highest response of 52% is recorded at lack of nutritional knowledge. Other challenges with appreciable response include high food prices 44%, inadequate income 43%, low family budget on food allowance 43%, tight work schedule 40% and poor personal food taste 40% respectively. Other listed challenges did not attract reasonable responses and may not be considered serious challenges. It could then be adduced that the majority of

the women are oblivious of what should constitute adequate meal for their families. Career pursuits of the women also influence the meal they provide for their families.

Conclusion

Inadequate diet with low nutrition has been identified as the major cause of diseases in women and their families. Women should be made aware of the implication of their food choices, taste and habits and how these relate

to their families' well-being. Since the choice of family meal intake is the responsibility of the women, their knowledge of nutrition is imperative in making the right food combination that would help their families acquire the ultimate health status.

Recommendations

- 1). Federal University of Technology Owerri Women Association should train and educate women on the nutritional knowledge of food through public lectures and community nutritional programmes via messages, social media and support materials. This would create knowledge empowerment on appropriate food and food combinations to achieve the desired result of proper nutrition, since inadequate knowledge about food practices is often a greater determinant of inadequate nutrition than food insecurity.
- 2). Government should standardise food prices by subsidizing the cost of food through favourable agricultural policies in order to ensure food sufficiency. Also University institutions should invest in massive food production guarantee food availability, accessibility and stability.
- 3). Adequate budget should be made on food allowance by families.
- 4). Government / Institutions should, through cooperative society activities and women programmes, increase monthly income of workers so that women can afford to provide diverse and quality meals for their families.
- 5). Women in the university institutions should engage in co-operative society activities to earn more income.
- 6). Women's group in the university system should, engage in agricultural practices to enhance food production and also generate extra income to

provide diverse and quality meals to their families

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