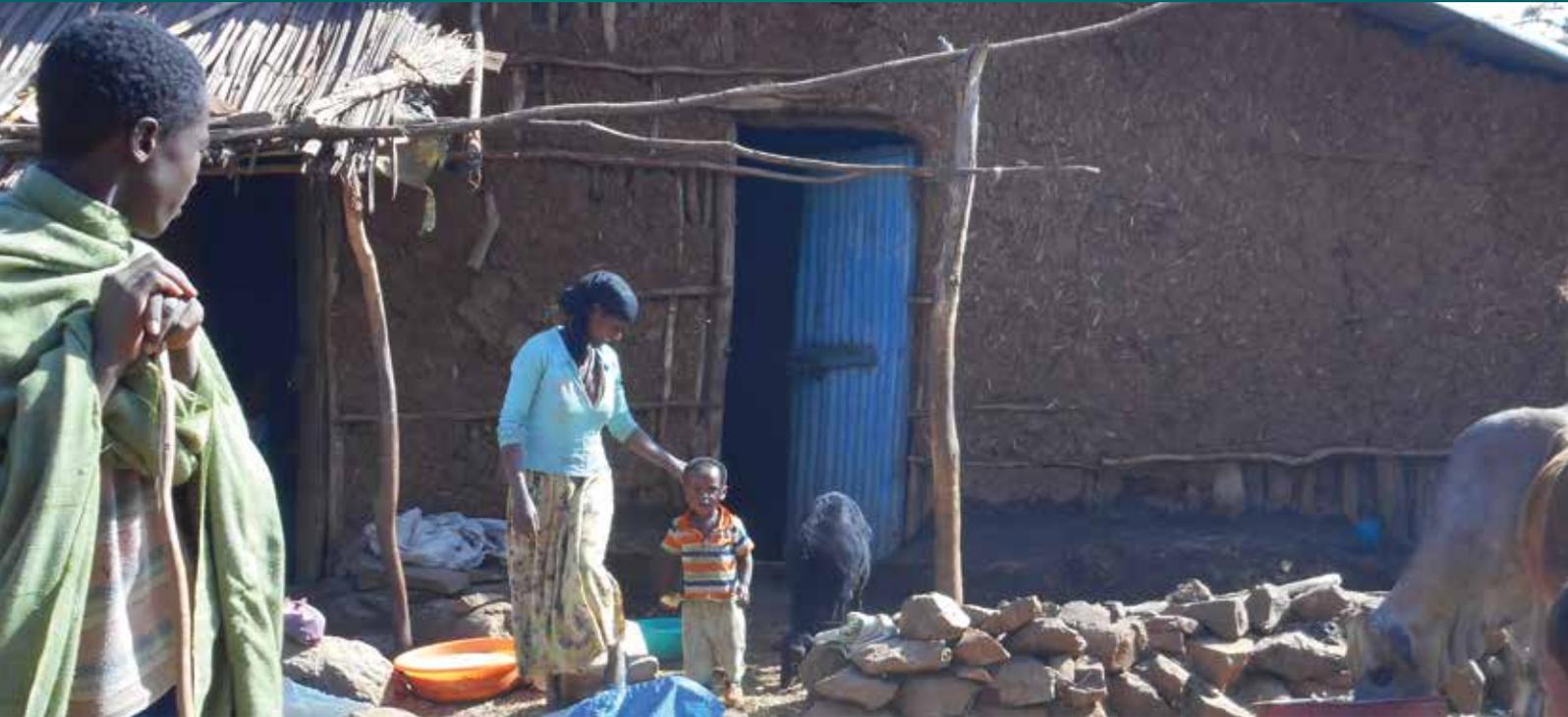


Young child feeding practices in Amhara region: The role of religious-based fasting in Orthodox Christian communities



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BACKGROUND

Children who are stunted—or shorter than they should be for their age and genetic background—have suffered from poor nutrition over a long period of time.¹ In families where one or more child is stunted, major causes may be poverty, chronic lack of food, inadequate health services and poor water and sanitation and caring practices.² However, even in areas of food security, inadequate feeding and care practices may persist because of families' lack of knowledge, time, or skills to feed children adequately.

In Ethiopia, almost 44 percent of children under five years of age are stunted.³ In Amhara, the second most populous region in the country, many zones and *woredas* (districts) are considered food secure. Despite this, Amhara has the highest rate of stunting in the country—more than 52 percent of children. Although feeding practices for young children in Ethiopia are generally poor, complementary feeding practices are worse in Amhara than in the country as a whole.

Quality and diversity of foods are critical problems. The World Health Organization (WHO) recommends feeding a variety of foods to meet nutrient needs. Children under two years of age should receive, among other things, *animal source foods* (which can include dried milk yogurt, cheese, eggs, beef, chicken, and fish) each day. However, according to the most recent Ethiopia Demographic and Health Survey (EDHS 2011),⁴ only 10 percent of young children in Amhara received animal source food the day before the survey, in comparison to 14 percent nationally.

THE NEED FOR RESEARCH

Cultural factors play a role in many nutrition practices. This is an area of special interest in Amhara, where about 85 percent of the population belong to the Orthodox Christian church.⁵ Alive & Thrive's secondary analysis of data from EDHS 2011 showed that, at the national level, there were significant differences in child feeding practices—both positive and negative—in Orthodox Christian families as compared to families belonging to other faiths. Children in

Orthodox Christian families were significantly less likely to be breastfed immediately after birth than those of other faiths, and were also 50 percent less likely to consume animal source foods.⁶

In 2015, Alive & Thrive conducted formative research in the Amhara region to understand barriers to feeding young children animal source foods. The program speculated that in Orthodox families, the practice of fasting on certain days might influence the diets of young children, even though the church exempts children under the age of seven years from fasting.⁷ The Ethiopian Orthodox calendar includes about 180 days during which believers fast. There are several extended periods of fasting during the year, the longest being the eight weeks just before Easter (or Lent). In addition, Wednesday and Friday are designated as fasting days most weeks of the year. During periods of fasting, all animal source foods—including milk, butter, cheese, eggs, meats, and fish—are meticulously avoided all day. Cooking of other foods is typically delayed until noon or later.

Although there has been little research on this topic, one study conducted in Oromia in 1970⁸ found that on fasting days, the diets of rural Orthodox children aged six months to three years were significantly less adequate in terms of calories, protein, and nutrients (especially calcium and riboflavin) than on non-fasting days. Protein consumption was found to be about 25 percent less than adequate on fasting days (but was adequate on days in which the family did not fast).

Given the lack of current information, Alive & Thrive undertook a study to increase our understanding of how young Orthodox children are fed during fasting periods.

STUDY DESIGN AND PURPOSE

Alive & Thrive's study in Amhara aimed to explore current practices, knowledge, and beliefs related to feeding animal source foods to children six to 24 months of age—especially on fasting days. Research took place in two *kebeles* in North Achefer district (which is food secure) and two in Mecha (which is not fully food secure). The study was conducted in two phases.

Phase I of the research was conducted with 40 mothers from March 23-April 3, 2015, during the long Lenten fasting period. Qualitative methods included semi-structured interviews with mothers. Researchers also conducted full-day observations of eight mothers with children under 2 as well as a week of trials of improved practices (or TIPS), during which mothers were asked to try to give their young child animal source foods and then provide feedback on the experience.

During Phase II, information from mothers was shared with church leaders and priests in order to elicit their views, and frontline health workers were also interviewed. The overall goal of the study was to fill the gaps in understanding about current child feeding practices in relation to adults' fasts, with the aim of seeking ways the church and the health system might work together to support improved child feeding practices within the context of local opportunities, values, and constraints.

FINDINGS

MOTHERS LISTED MANY BARRIERS TO FEEDING ANIMAL SOURCE FOOD ON FASTING DAYS

On the day of the interview, all of the mothers said their children under two years were not currently fasting; however, every one of the mothers observed gave the young child his or her first meal at 10:30 a.m. or later and none was observed feeding animal source foods that day.

Although mothers were aware that young children do not have to fast, they were hesitant to give them animal source foods on fasting days. Their reasons included that the neighbors would notice and object, that household utensils could become contaminated by animal foods on fasting days, that meat was not available in the market, and that it would be wasteful to slaughter an animal just for a child (when the rest of the family could not eat the meat). Even mothers who had eggs and milk in their homes acknowledged they had not fed these to their children that day. Some mothers indicated that they were reluctant to prepare foods with butter, since merely smelling butter could interfere with their own fasts or offend others.

A common theme was that children need to eat what the family eats. Only 12 of the 32 mothers reported that they prepared separate food for their child the day of the interview. The most common reason was lack of time:

"I have to do my chores throughout the day. I don't have time to prepare a separate meal for the baby."

MOTHERS ARE WILLING TO TRY FEEDING THEIR CHILDREN ANIMAL SOURCE FOODS, ESPECIALLY EGGS AND MILK, ON FASTING DAYS

Despite these concerns, all but one mother (who cited cost) were willing to try giving some animal source food to their child during the week-long trials of improved practices, conducted during the Lenten fast. Eggs and milk were the most acceptable foods. A few mothers added these to their child's porridge and a few cooked these separately and fed them to the child. Some mothers complained that their child did not like the taste of the new

food. But others reported that adding eggs and milk to the child's food left them more satisfied. One mother said:

"The child is crying less and plays more, giving me more time to do my chores."

MOTHERS FACE YEAR-ROUND BARRIERS TO GIVING YOUNG CHILDREN ANIMAL SOURCE FOODS

Mothers in the study said they could not afford to give their children meat; fish was not available in their communities. Most also believed a child cannot chew and swallow meat safely or even digest it properly until around two years of age. Many did remember hearing from health extension workers (HEWs) that they should add milk or butter to a young child's porridge, but they generally delayed giving any animal source food until around one year of age.

CHURCH LEADERS AND PRIESTS CLEARED UP MISCONCEPTIONS AND SAID THE CHURCH COULD PLAY A ROLE

Interviews with church leaders and priests clarified for the researchers that merely smelling butter and other animal source foods *does not* interfere with fasting. Priests also said utensils and hands could be washed with soap and cleaned up after animal source foods were prepared for a young child, just as they are before preparing foods for the family on regular Wednesday and Friday fasts.

Most church leaders and priests were quick to say the church could—and should—play a role in improving child feeding, but none of them had offered their congregations advice due to their own lack of knowledge and awareness. When asked, they said they were willing to help promote eggs and milk, even on fasting days. Approaches they agreed they could take included holding meetings with HEWs; raising the topic during sermons, home visits, or regular community gatherings; reassuring mothers that they can avoid contamination through handwashing and washing of utensils; and encouraging their congregation to share the foods in their homes they are not eating during fasts with families who have young children. To take these actions, priests said they would require direction from church authorities and that the instruction should be handed down through formal channels (for example, by letter).

One church leader mentioned that sharing food is an essential aspect of fasting:

"Fasting will be complete if it is coupled with sharing. If someone who is fasting did not give what he or she should have been eating to the needy, it is 'saving' and is not fasting."



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FRONTLINE HEALTH WORKERS CONFIRMED WHAT MOTHERS SAID AND TOLD US THEY THOUGHT CHURCH INVOLVEMENT WAS CRUCIAL

HEWs said they counseled mothers on initiating complementary food at six months and on enriching porridge with eggs, milk, and butter, but that mothers tend to delay initiation. Most of the Health Development Army (HDA) volunteers said they were not convinced that animal source foods (especially meats) could be started at six to eight months and thought these foods should be delayed until one year.

Both HEWs and HDAs said mothers' practices were different on fasting and non-fasting days. HEWs mentioned that most mothers start cooking around noon during fasts and that nothing is prepared specifically for young children on these days. Some of the HEWs and HDAs said they were reluctant to feed their own children animal source foods on fasting days and were hesitant to counsel mothers to do so.

None of the frontline workers had collaborated with priests on the topic of child nutrition, although some had worked with them in promoting other maternal health issues. Although they expressed surprise at the idea that priests might give advice on child feeding, they agreed that the involvement of the church and priests is crucial, especially in dealing with some of the misconceptions around fasting.

SUGGESTED NEXT STEPS

In the communities studied, mothers confront many barriers to feeding their young children quality diets. Giving animal source foods is a special challenge, particularly on the many fasting days in the Orthodox Christian calendar. Collaboration among families, frontline health workers,

and especially church leaders and priests, may help improve local practices, which are supported by strong social norms. Suggested priorities for nutrition program partners include:

FOR FAMILIES

- Providing clear and practical messages to mothers about how to feed the child on fasting days
- Emphasizing the importance of simple recipes for enriching a child's porridge with animal source foods, especially those that may be available in the home; practicing patience as new foods are introduced because children accept new tastes and textures gradually
- Specifying that young children need *frequent meals* and *animal source foods even on fasting days* (reinforcing that the child needs his or her own dish). It is not enough to remind families that children are exempt from fasting, since all mothers in the study knew this and, in fact, indicated that their young children were *not* fasting
- Reaching fathers and other family members because their support for these behaviors is critical; providing messages to the whole community, particularly before long fasting periods, will help shift social norms

FOR FRONTLINE WORKERS

- For HEWs and HDAs – Confirming that animal source foods can be introduced at six to eight months (because some frontline workers are also in doubt), and reassuring them that they may promote the daily provision of eggs and milk for young children even during fasting periods
- For Agricultural extension workers – Providing specific messages to be shared about animal source foods that may be easily supplied at the household level and are especially important for child growth
- Encouraging collaboration with local priests in supporting specific practices and dispelling misconceptions

TOGETHER WITH CHURCH LEADERS AND PRIESTS

- Engaging with the church hierarchy through appropriate channels in order to begin a dialogue on specific child nutrition challenges in the region, relevant church rules and teachings, and pathways the church may decide are appropriate for informing and involving priests at different levels to work with the health system on this topic
- Seeking ways that church leaders may work with families directly to improve child feeding, especially during fasting periods

REFERENCES

- ¹ A child is considered stunted if his or her height-for-age is less than two standard deviations from the medium, as defined by WHO Child Growth Standards.
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- ⁴ Ibid.
- ⁵ Ibid.
- ⁶ Ibid.
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