

## GENDER - BASED PERCEPTION ON FOOD MISCONCEPTIONS AND INFLUENCE ON DIETARY PRACTICES

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### Abstract

The paper investigated gender-based perceptions of food misconceptions: barrier to good dietary practices in Akoka community of Lagos state. A descriptive research design was employed. The sample size was two hundred and forty (240) adults (120 males and 120 females) randomly selected within Akoka community in Lagos. An adapted Likert scale format with four options questionnaire was used to elicit data from the respondents. The data was analysed and the findings showed that there were differences in the gender-based perceptions of food misconception and that the female and male genders agreed to the fact that nutrition education can influence food misconception except that the male gender disagreed in some areas. Among the recommendations made were that enlightenment campaign should be mounted by nutritionists to discredit gender food misconceptions and that extensive community-rural nutrition education will go a long way in helping to solve the problem of food misconceptions in different communities. This will help people to engage in beneficial dietary practices.

Keywords: Gender, Perception, Misconception, Cultural and Beliefs.

### Background to the Study

Gender based perceptions of food misconceptions are incorrect ideas and opinions of male and female about the selection of certain food groups and the important roles of certain nutrients that such groups of food supply to the body. Many individuals or groups of people have been denied their adequate dietary right because of these misconceptions which varies among gender and from one tribe to the other. Food misconceptions also refer to false representation of certain foods by different sex and certain tribes. Food misconception may also be called food myths, food taboos and or food fallacy. Male and female observations that several nutritious foods have been tagged with one ailment or cultural inflictions, based on cultural and on or mystical assessment has become an issue of concern in meeting the needs of food adequacy as a

predisposing factor to food security. Food taboos have a long history and one ought to expect a sound explanation for the existence (and persistence) of certain dietary customs in a given culture. Yet, this is a highly debated view and no single theory may explain why people employ special food taboos (Meyer-Rochow, 2009). Food occupies a prominent place in the hierarchical needs of man because man eats to live. Food has been scientifically defined as substances good and nourishing to human which could be in liquid, semisolid and solid forms, that are necessary to carry out one or more of life functions of the body such as healthy living, release of energy, growth and normal functioning of living organisms (Kola and Ajayi, 2003, Mbah, 2008 and 2011). Food enables man to grow, reproduce and perform all its metabolic activities.

Foods are available in different varieties, species, groups and origin (i.e. plant and animal source) from which man can select in order to survive. The process of selecting these foods, preparing them for ingestion, digestion, absorption, and utilization in the body to release materials that nourish the body is what is referred to as nutrition. Good nutritional practices are therefore a precursor to good healthy living. Scientists have identified six important chemical materials that are needed in good amount and proportion in the body for good growth, development and maintenance of physiological activities of the body. These chemical materials include proteins, carbohydrates, vitamins, liquids, minerals and water; they constituted what is referred to as food nutrients. The combination of these nutrients provides nourishment therefore must not be subjected to cultural taboos that bring about misconception.

All food available to man contains edible nutrients in different proportions for normal body functioning. Unfortunately, male and female of different tribes still face the problem of acute malnutrition as a result of abstinence based on one misconception or the other. This challenge is more pronounced in most of the developing countries in Africa where people starve for lack of adequate food and nourishment (Kola and Ajayi, 2003). The problem of food distribution and malnutrition in Nigeria is further compounded with series of superstitious beliefs and practices such as food fads, fallacies and taboos that have generated, particularly in the rural areas. Many misconceptions have impeded family health and resulted into different categories of diseases and ailments. This is the major reason why this study is looking at the Gender-based perceptions of food misconceptions.

Gender-based food misconceptions cut across all tribes in Akoka community of Lagos and are major threats to efficient utilization of food nutrients from all available food groups. Consequently, this has impeded family health and resulted into different categories of diseases and ailments. People of different physiological groups (infants, children, adolescent, elderly, pregnant and lactating women) have been

seriously affected by some of the mischievous food misconceptions. These misconceptions vary across the various tribes and gender.

This study therefore will no doubt provide useful information to individuals, groups and families on the issues of gender-based perceptions of food misconceptions. The findings will particularly expose the fact that some of the gender-based perceptions of food misconceptions have no scientific basis and that they only emanated from many incredible cultural and traditional backgrounds. Many individuals and groups of people will come to appreciate that adequate inclusion of all food groups in their diet will help to improve their nutritional status and encourage healthy living.

Gender can be defined as a set of cultural available symbols that portray both womanhood and manhood. The prevalence of these symbols and myths is universal, but the symbolic arrangements themselves are culturally specific (Charmes & Wieringa, 2003). Masculinity and femininity therefore provide a lens in terms of how we interpret and act out social relations. Hence, gender relates to a set of roles, stereotypes, position, choice and value's attributed exclusively to men or women respectively. Hence gender has a great way of influencing dietary practice or even may create some misconception about food based on the phenomenon about it. The way the two arms of gender will perceive certain foods will be different based on the characteristics identified with gender. Gender refers to the array of socially constructed roles and relationships, personality traits, attitudes, behaviours, values, relative power and influence that society ascribes to the two sexes on a differential basis. Gender is relational – gender roles and characteristics do not exist in isolation, but are defined in relation to one another and through the relationships between women and men, girls and boys. Simply, sex refers to biological differences, whereas gender refers to social differences.

Gender based perceptions of food misconception are influenced by household power relation, the breadwinner factor, cultural believes, decision making power, food availability, up-bringing and so on (Vlassoff, 2007).

Perception is the way one conceives or impression one has about a certain phenomenon. Perception about food could be positive or negative depending on socio-cultural belief or influence about the food misconception. This misconception about food can also be influenced by some factors such as traditional belief, culture, religion, geographical location, availability of some foods to the people in the area, availability of utensils and equipment, method of preparation and technical know-how and so on.

Apart from the factors listed, Mbah, Orhewere and Osifeso, (2001) identified some other factors that can influence dietary practices and perception of Nigerian gender. These factors are: food in season, staying quality of food, economic resources, likes

and dislikes suitable combination and size of the family. These factors can determine the perception of an individual whether male or female which can consequently influence the dietary practices.

Onifade (2006) and Peter (2000) explained that food misconceptions are originated from traditional history, cultural and illiteracy sources. There are misconceptions about the following foods such as vegetables Celocia spp (soko) and Oriri, rodent meat, orange, snail, periwinkle, cowpea, meat and egg. These foods are seen to be those that can nourish the body. In a situation where these misconceptions about the foods are paramount, it will be found that most populace will be nutritional deficient in nutrients that are associated with these food items, invariably influencing their dietary practices. These misconceptions on food are associated with consequences that turn people off, most especially those with little or no educational background. Some of the consequential effects about certain foods are that:

1. There will be deafness, redness of lips and strange illness – in terms of eating Celocia spp vegetable (Soko) and Oriri.
2. Eating of rodent meat remaining over-night, the meat will turn to staff and if a pregnant woman eats this meat there will be prolonged labour.
3. Consumption of snail by pregnant woman will lead to baby not being smart and intelligent.
4. Consumption of cowpea in some areas can lead to wrath of god of iron accompanied by strange illness and death.
5. Young children eating egg and meat leads to invoking of stealing spirit (Onifade, 2006 and Peter, 2000).
6. A child denied of eating egg and meat to prevent stealing or development of worm in the system can still be infected through other sources of food or though poor hygiene. This will also cause protein deficiency diseases and poor growth and development of the child.
7. People who are actively involved in athletics need more proteins than non-athletes. The fact is that the amount of exercises done is not a determinant of the amount of protein needed. The Protein requirements of adult depends largely on the body size and recommended allowance.
8. A diet low in calcium, leads to nervousness. The fact is calcium is readily withdrawn from the bones to supply less amounts needed to regulate the response of the nerves. There is no evidence that low-calcium diet intake leads to nervousness.
9. Red wine contains alcohol and as such it is totally not good for health. The fact is researchers at the National Institute of Ageing and Harvard University have found the answer to ageing problem (resveratrol”, a substance found naturally in red wine to protect mice fed with a high-fat diet from diabetes and helped them to live longer than the mice not given resveratrol from red wine.

- 10 Vitamins from food sources are better than the synthetic source. The fact is that each vitamin has a definite chemical composition. Thus, one milligram of vitamin from food source or from a concentrate exactly eliminates the need to spend additional money for vitamin tablets. (Onifade, 2006 and Peter, 2000).

#### Causes of Food Misconception

Food misconception can be caused by various factors such as traditional believe, customary, religion, cultural, poverty fad and fallacies, lack of adequate knowledge about nutrition, food allergies or intolerance, lack of adequate awareness about certain foods nutritive values among others. Socio-cultural issues such as tradition, custom religion. These can cause misconceptions about food among male and female gender. This might make some people not to consume certain foods that are forbidden in that area. These foods forbidden might be the only source of vital nutrient that may be lacking in that area, thereby causing nutritional disorder and affect their dietary practices.

**Inadequate nutritional knowledge and education:** When people are ignorant, there is tendency that they misconceive or their perception toward the consumption of certain foods in that area, whereby they are lacking or suffering the disorder of that nutrient. It might be that they need to supplement their diet with other nutrient sources. An example is the case in the Northern Nigeria where most of their cultivations are grains, this leads to most of them having goiter (iodine deficient), blindness, (vitamin A deficient) and so on. Another misconception in that area is that the male should eat the better part of the farm proceeds, while the female and children feeds on what is remaining (Uko-Aviomoh, 2008). Lack of functional nutrition and dietetic units, where people can make enquiring or report issues related to food and nutrition problems and issues about food misconceptions.

Nutrition education is a key component in ensuring good dietary practices. One of the principal aims of nutrition education is to provide people in rural and urban areas with adequate information, skills and motivation to procure and to consume appropriate diets. Household food security is a prerequisite for people to have an adequate and balanced food intake. However, to attain good health and nutritional status, people also need sufficient knowledge and skills to grow, purchase, process, prepare, eat and feed to their families a variety of foods, in the right quantities and combinations (FAO, 2014). This requires a basic knowledge of what constitutes a nutritious diet and how people can best meet their nutritional needs from available resources. Undesirable food habits and nutrition-related practices, which are often based on insufficient knowledge, traditions and taboos or poor understanding of the relationship between diet and health, can adversely affect nutritional status and dietary practices. However, people can adopt healthier diets and improve their nutritional well-being by changing their food and nutrition perceptions, attitudes,

knowledge and practices, if sufficient motivation is provided to do so. Also, people generally should be enlightened about the reinforcing specific nutrition-related practices or behaviours to change habits that contribute to poor health (such as food misconception); this is done by creating a motivation for change among people, to establish desirable food and nutrition behaviour for promotion and protection of good health. FAO (2014) also suggested that help needs to be given to people to learn new information about nutrition and to develop the attitudes, skills and confidence that they need to improve their nutrition practices and dislodge issues that are attached to food misconceptions.

Above all, the most important thing when it comes to diet and nutrition is to make the right nutritional choice irrespective of gender perceptions and misconceptions about food. The following tips or guidelines can be used as bases for good nutrition.

- 1 Eat sufficient amounts of grains, fruits vegetables, protein ad mineral food sources every day;
- 2 Maintain variety, balance and moderation in your food choices.
- 3 Drink plenty of water
- 4 Consume less sweet foods and avoid sugary snacks
- 5 Snacks on f\fresh fruits and vegetables
- 6 Exercise daily, regularly and moderately

Despite the various acknowledged health benefits of some food groups by nutritionist and the efforts of the Nigerian government to boost food production and ensure food safety and security, a good number of people in Nigeria still face the problem of getting enough, cheap, affordable and nutritious food to eat due to various misconceptions. Male and female adults in Akoka community are believed to still hold some of their traditional beliefs and food practices which could affect good health through denial of eating some foods that are delicious and good for proper growth and development. This study therefore examines the perceptions of male and female adults on food misconceptions as a predisposing factor to achieving food security and maintaining adequacy in nutritional status of the individuals and on members of the entire households in the Akoka community.

#### Purpose of the study

The general purpose of the study was to appraise some specific gender based perception on food misconceptions in Akoka community in Lagos State. Specifically, the study sought to find out the gender-based perception of:

- 1 Causes of food misconceptions in Akoka community of Lagos State.
- 2 The ways nutrition education influences food misconceptions.

### Research Questions

Based on the purpose of the study, the following questions were raised.

- 1 What are the gender-based perceptions on the causes of food misconceptions in Akoka community of Lagos State?
- 2 Are there ways nutrition education could influence food misconceptions in Akoka community of Lagos State?

### Methodology

Design of the study: The study adopted a descriptive survey design.

Population of the study: The population comprised all educated male and female adult residents of Akoka community in Mainland Local Government Area of Lagos State; who have at least NCE educational qualification and work around Akoka.

### Sample and Sampling Technique

A sample size was two hundred and forty adults. The community adults were stratified in to male and female and 120 males and 120 females were proportionately selected.

### Instrumentation

An adapted format of Likert scale with four point's option questionnaire was used to elicit responses from the sample. The items were categorized in two sections A and B. Section A was made up of five items that sought bio-data information and socio-economic status of the respondents on gender, marital status and educational qualification. Section B consisted of twenty (12) opinion statements and the respondents were expected to select the appropriate option from the scale (Strongly Agree=4, Agree=3, Disagree=2 and Strongly Disagree=1). The instrument was validated by 3 Home Economics experts who adjudged that the instrument had both content and structural validity. The instrument was pilot-tested to determine its reliability five male and five female adults but who were not among those originally sampled for the study. Spearman rank order was used to analyse and the analysis yielded a reliability coefficient of 0.79.

Method of Data Collection: The questionnaire was administered by the researchers and eight post trained post graduate students as research assistants. The questionnaires were administered and collected immediately.

Method of Data Analysis: The study employed the use of mean and standard deviation for the analyses of data at 0.05 alpha level of significant. Average mean of 2.50 and above was set as criteria for accepting items and 2.50 and below will be used to reject items.

Data Presentation, Analysis and Presentation

Table 1: Bio-data information of respondents for the study

S/N	GENDER /NO	MARITAL STATUS	EDU QUALIFICATION
1	Female -120	79 – married 41- separated	26- NCE 80- First degree 14-Masters
2	Male -120	95- married 35- widow	74- First degree 46- Masters

Table 1 reveals the bio-data information of the respondents based on gender, marital status and educational qualification as states on the Table.

Table 2: Mean rating of gender-based perceptions of causes of food misconceptions in Akoka community.

S/ N	Causes of food misconceptions	Female perceptions		Male perceptions	
		Mean	Remarks	Mean	Remarks
1	Poor nutrition education	3.26	Agree	2.35	Disagree
2.	Ignorance	2.36	Disagree	2.21	Disagree
3.	Poverty	2.36	Disagree	2.21	Disagree
3.	Food allergic, reactions and intolerance.	2.59	Agree	3.04	Agree
4.	Cultural and traditional believe	3.15	Agree	3.33	Agree
5.	Lack of functional nutrition and dietetics education.	2.89	Agree	3.62	Agree
6	Breadwinner syndrome.	2.86	Agree	3.77	Agree

Table 2 shows the mean ratings of female and male perceptions on the causes of food misconceptions. Items such as poor nutrition education, cultural and traditional belief, food allergic reactions and intolerance and lack of functional/dietetics education and breadwinner syndrome were identified as causes of food misconceptions. The male gender agrees to all the items too as their female counterpart except in the areas of poor nutrition education, ignorance and poverty as the causes of food misconception.

**Table 3: Mean rating of gender -based perceptions of the ways nutrition education influences food misconceptions in Akoka community of Lagos State.**

S/ N	Ways Nutrition Education influence food misconceptions	Female perceptions		Male perceptions	
		Mean	Remarks	Mean	Remarks
1.	Most ailments could be linked to denial of eating some nourishing foods.	3.21	Agree	1.79	Disagree
2.	Continuous indulgence in food related superstition will influence nutritional status.	2.73	Agree	4.33	Agree
3.	People eat whatever they can afford when they are hungry.	3.20	Agree	3.88	Agree
4.	Homemakers are responsible for their intakes.	3.01	Agree	4.16	Agree
5.	There is no assistance to support individual food supply by government.	2.76	Agree	4.34	Agree
6.	Meals should be planned using all the classes of food.	3.56	Agree	2.16	Disagree

Table 3 shows mean ratings of the respondents on ways Nutrition Education influence food misconceptions. All the items were agreed with by the female gender that nutrition education can influence food misconceptions while the male gender disagrees to two of the items; that most ailments could be linked to denial of eating some nourishing meals and the meals should be planned using varieties from the classes of food.

### Discussion of Findings

The finding revealed the perceptions of females on the causes of food misconception as poor nutrition education, food allergic, reactions and intolerance, cultural and traditional belief, lack of functional nutrition and dietetics education and breadwinner syndrome. They disagree to the fact that ignorance and poverty can cause misconception; the perceptions of the males on the causes of food misconception are not in any way different from the female, except that they too disagreed on ignorance, poverty and poor nutrition education as causes of food misconception. The finding is supported with the view of Vlassoff (2007) that pointed out some of the causes of food misconception highlighted in this study such as cultural believes, the breadwinner factor among others such as household power relation, decision making power, food availability, up-bringing. Based on this finding of this study, most foods (animal and plant) that are forbidden or counted as food misconceptions (food myth, taboo and fallacies) are not poisonous if consumed, only that people will have the feelings that they had done something contrary to their religion rite, societies belief, cultural belief and the guilt will be registered in them; and or worried or thinking about the consequential effect of consuming such food. In

actual fact, these foods (cowpeas, periwinkle, vegetable, meat, yam, fish, snail, and egg) belong to the class of protein, carbohydrate, fats, minerals and vitamins from which the body gets nourishment for proper growth and development, for example, proteins that are present in some of the forbidden foods enhance growth and repair worn out tissues in the body. Egg is complete and valuable food stuffs for rapid growth and development in children. Egg protein has a high biological nutrient value which makes it a perfect source of protein for growth and development. Eggs are rich in thiamin, riboflavin and vitamins A and B, as well as a very good dietary source of iron (Ihekerponye & Ngoddy, 1985). Cowpea which is forbidden by those who worship god of thunder is one of the most valuable leguminous crops that are high in essential nutrients needed for proper growth and development. The nutrient composition of cowpea consists of protein (22g), fat (1.60g), carbohydrate (61.00g), energy (340kg, iron (6.20mg), and calcium (110mg)(Akinjayeju, 2004).

The study also revealed from the finding that nutrition education can influence the gender perceptions of food misconception. It was revealed that the perceptions of female on nutrition education influencing food misconception is rated above the perceptions of the male because all the items on this issue were all agreed to by the female gender, while the male gender disagreed to some of the item such as - most ailments could be linked to denial of eating some nourishing foods and; meals should be planned using all the classes of food.

This can be pointed out to mean that the male gender do not have adequate nutrition education. Hence, they should be enlightened as suggested by FAO(2014) which state that, people generally should be enlightened about the reinforcing specific nutrition-related practices or behaviours to change habits that contribute to poor health (such as food misconception); this is done by creating a motivation for change among people, to establish desirable food and nutrition behaviour for promotion and protection of good health.

The implication of this study is that people involve themselves or got attached to issues that are detrimental to their health when they are patriotic to traditional and cultural believes, food taboos, food myths, fallacies that prevent them from consuming certain types of food. These beliefs constitute a high level of illiteracy and poverty which can cause health problems, malnutrition, starvation and even result to death.

The findings in this study are in line with the research conducted by Onifade (2006) on the perception of Health Education about the effects of the food taboos and fallacies on the health of Nigeria. It was observed that Health Educations in Nigeria believes that food taboos and fallacies tremendously affect the health status of Nigerians. In most cases, such beliefs have caused nutritional diseases and death in some cases.

### Conclusion

Some food misconceptions have no scientific basis. They only emanated from much incredible cultural and traditional backgrounds and beliefs. Many food deficiency diseases such as Kwashiorkor, diabetes, marasmus, osteomalacia etc are caused by nutritional misconceptions and confusion and barrier to good dietary practices through the fear that emanated from eaten some foods (food taboos and fallacies). It can therefore be concluded that food taboos and fallacies constitute the monster that have impeded family healthy-living particularly among the Yoruba people. Hence, nutrition education should be brought to the grassroots in order to equip people with basic and principle knowledge about consumption of food from the six classes of foods, nutritional benefits and important to the food nutrients to health and other vital information that need to be known and to detest food misconceptions (food myth, taboo, fallacies etc) as suggested and explained by Meyer-Rochow(2009) that food taboo have a long history and one ought to expect a sound explanation for the existence (and persistence) of certain dietary customs in a given culture. Yet, this is a highly debated view and no single theory may explain why people employ special food taboos.

### Recommendations

The following recommendations are made based on the above findings:

- 1 Enlightenment campaign should be mounted by the nutritionists against food taboos and fallacies to eradicate these erroneous beliefs that have no scientific basis.
- 2 There is a strong need for synergistic relationship between the Ministry of Health and Agriculture to organize health talk and agricultural show that will enlighten community in the rural/ urban area on the importance of eating various foods for proper growth and development.
- 3 Extensive community – rural nutrition educating programmes should be intensified and sustained so that the rural dwellers are re-oriented on their cultural and traditional beliefs about eating or not to eat certain groups of foods.

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