

Breastfeeding promotion and support among infants aged less than six months in Maiduguri, Nigeria – Caregivers and health workers perspectives

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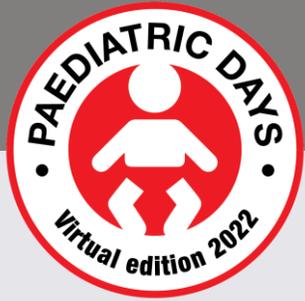
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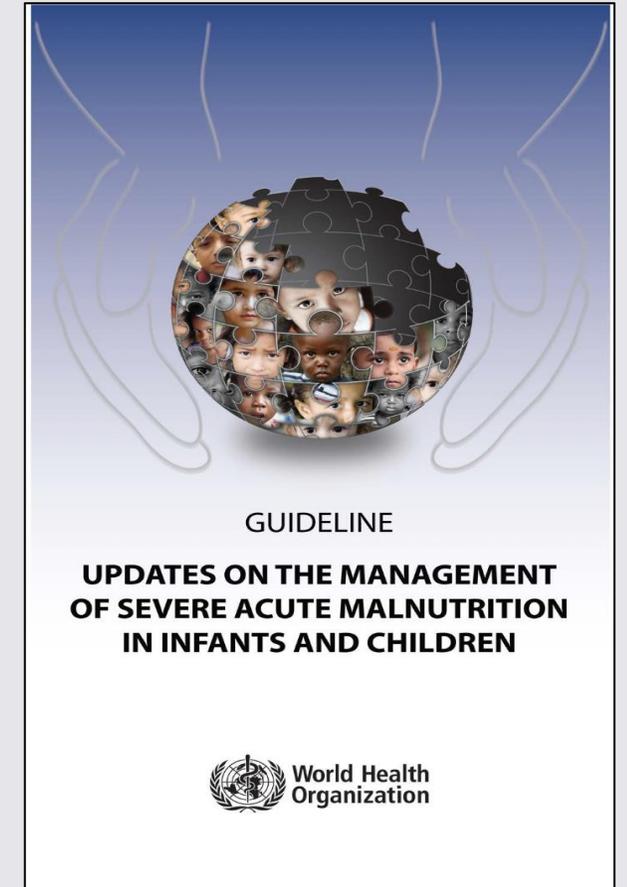
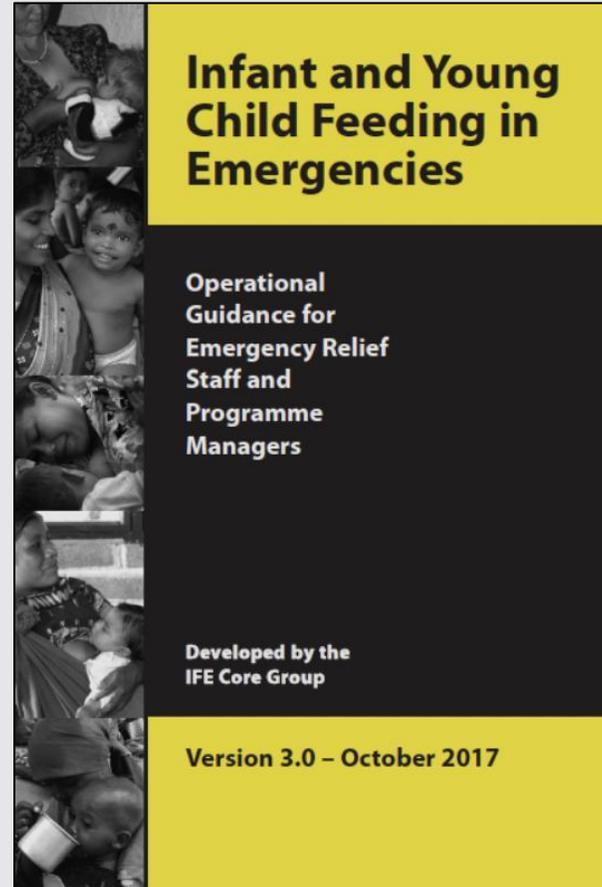
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BACKGROUND

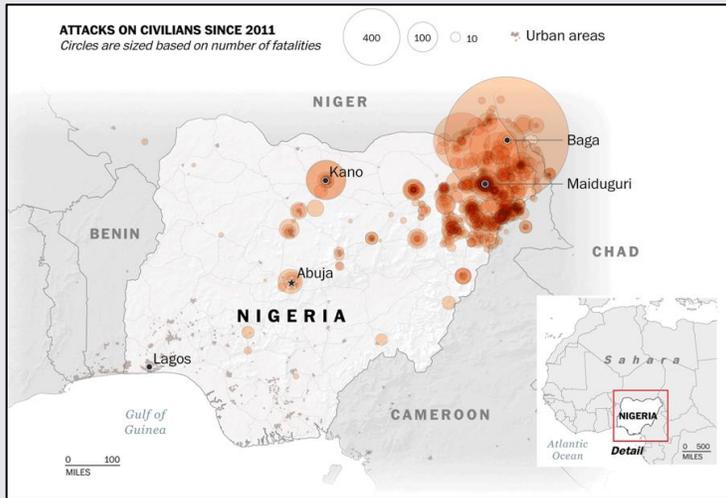
- It is recommended that **breastfeeding (BF)** is protected, promoted, and supported for all infants in emergency settings
- The re-establishment of exclusive BF is a central part of the **management of acutely malnourished infants under six months**





AIM and SETTING

To explore caregivers and health workers perceptions and experiences of BF promotion and support in the context of MSF nutrition project in Maiduguri, North-east Nigeria



The Washington Post, 2016



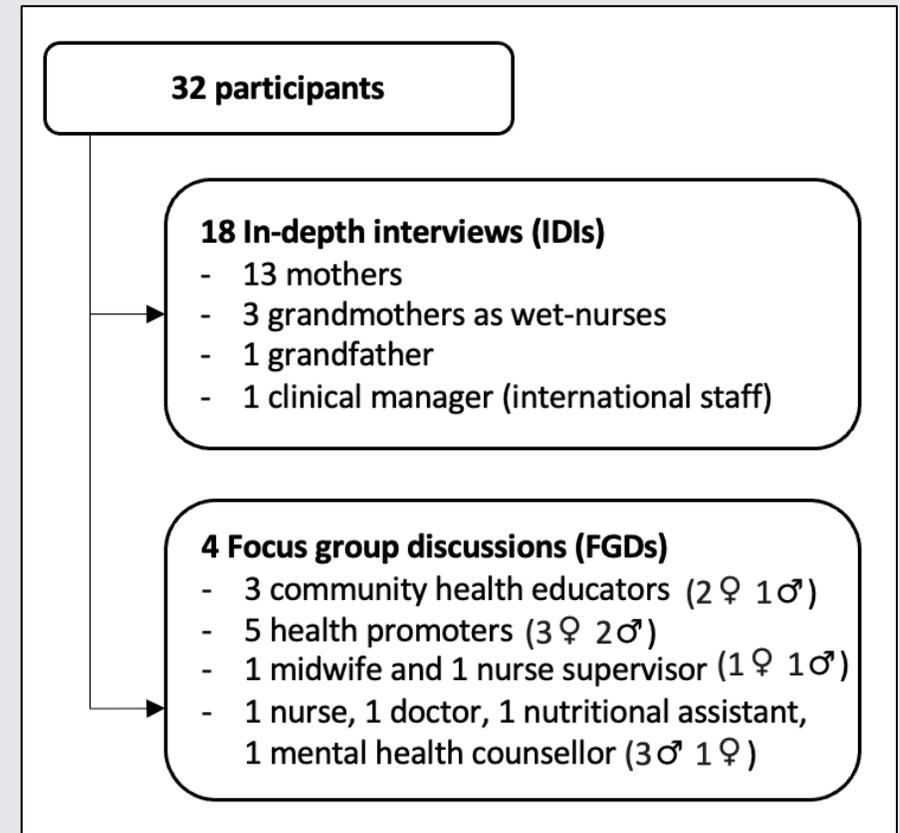
ATFC
ITFC
IDP support

- ✓ **BF promotion** as part of the general HP strategy
- ✓ **BF support** at ITFC



METHODS

- Qualitative study using **in-depth interviews, focus-group discussions and non-participant observations**
- Participants recruited at MSF facility (**ATFC and ITFC**) and **IDP camp**
- Data analyzed using **reflexive thematic analysis** (Braun & Clarke, 2006)



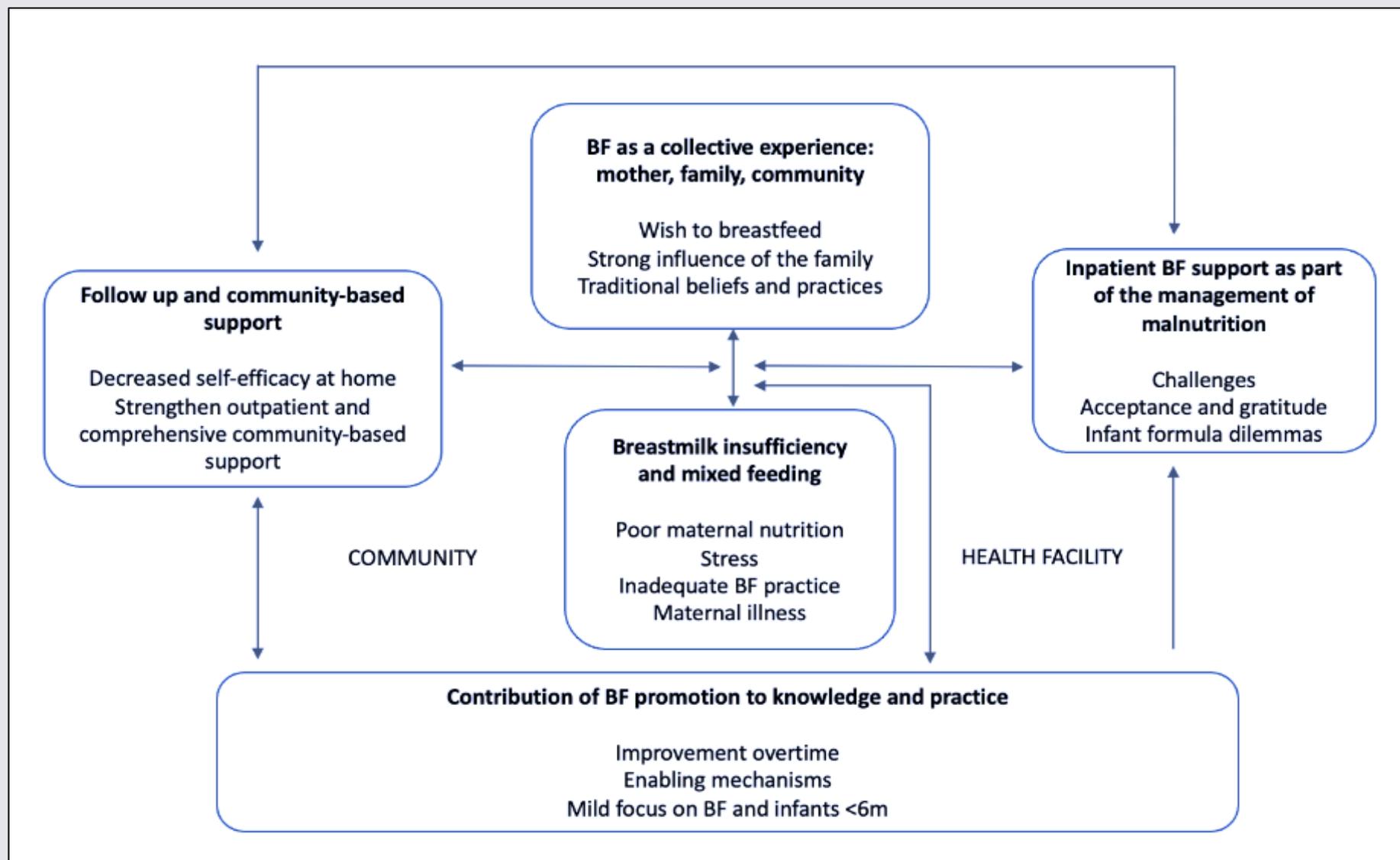


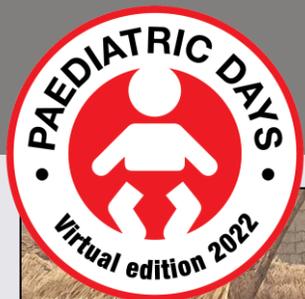
PARTICIPANT CHARACTERISTICS

Participant	Age	IDP status	Education level	No. children	Interview setting	Days ITFC	Feeding practice
Mother 1	30-35	Non-IDP	Illiterate	5-7	ITFC	6	EBF (inadequate)
Mother 2	30-35	Non-IDP	Basic education	8-10	ITFC	19	BF + powdered milk (cup)
Mother 3	25-30	IDP	Illiterate	4-6	ITFC	4	BF + formula with cereals (cup+spoon)
Mother 4	35-40	Non-IDP	Illiterate	8-10	ITFC	17	BF + powdered milk (cup)
Mother 5	35-40	Non-IDP	Illiterate	5-7	ITFC	6	BF + powdered milk (cup)
Mother 6	25-30	Non-IDP	Basic education	2-4	ITFC	19	Powdered milk (cup)
Grandmother 1 (wet-nurse)	40-45	Non-IDP	Illiterate	5-7	ITFC	4	BF + fresh cow milk (bottle)
Mother 7	30-35	Non-IDP	Illiterate	5-7	ITFC	6	BF + infant formula (bottle)
Mother 8	35-40	IDP	Illiterate	8-10	ATFC		BF + powdered milk
Mother 9	20-25	Non-IDP	Basic education	2-4	ATFC		BF + infant formula
Grandmother 2 (wet-nurse)	45-50	IDP	Illiterate	8-10	ATFC		BF + powdered milk + Porridge
Grandmother 3 (wet-nurse)	45-50	IDP	Illiterate	8-10	ATFC		BF + powdered milk + Porridge
Mother 10	35-40	IDP	Illiterate	5-7	IDP camp		EBF (inadequate)
Mother 11	20-25	IDP	Illiterate	2-4	IDP camp		EBF
Mother 12	35-40	IDP	Illiterate	5-7	IDP camp		BF + water
Mother 13	30-35	IDP	Illiterate	5-7	IDP camp		EBF
Grandfather	50-55	IDP	Primary level	5-7	IDP camp		-



RESULTS





RESULTS



'Giving the breastmilk only is the best way but most of the women are not able to produce enough breastmilk for the baby, so that's why they decide to introduce formula.' *Mother*

'Some do have breastmilk, but the method, the way they position, or they latch the baby or the times they take to breastfeed are normally the issues' *Health worker*



'When I was in the facility, they gave us food (...) so it helped the breast to start producing breastmilk. But immediately when I went back home, because I can't afford to buy this kind of food and eat, the supply of the milk is going down.' *Grandmother, wet-nurse*



CONCLUSIONS

- BF practice is strongly influenced by household and contextual factors
- BF promotion messages should be tailored to specific BF barriers. Particular focus on **perceptions on breastmilk insufficiency**
- Creating an enabling environment and providing comprehensive inpatient care for caregivers and infants can lead to acceptance and effectiveness of BF support
- More emphasis should be placed in the follow up and the management of malnourished infants and their mothers in the community



THANK YOU!

Merci!

¡Gracias!

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