

COUNTRY BRIEF: **MOZAMBIQUE**

# Advancing the Baby-Friendly Hospital Initiative in facilities and communities

## Introduction to IYCN in Mozambique

The US Agency for International Development's (USAID) Infant & Young Child Nutrition (IYCN) Project contributed to enhanced community- and facility-based nutrition services in Mozambique, improving the way mothers feed their infants and young children. The project supported the Ministry of Health (MOH) to advance the country's Baby-Friendly Hospital Initiative (BFHI) by training providers to promote improved breastfeeding practices and align national nutrition policies with international standards. IYCN then developed tools and job aids reflective of those standards, helping to spread consistent messages about infant and young child feeding and maternal nutrition to nutrition programs, providers, and caregivers across Mozambique. Because many Mozambicans live far from health facilities, which are often ill-equipped to meet the health needs of the surrounding population, IYCN built the capacity of community-based infant and young child feeding counseling services. In the provinces of Inhambane, Nampula, Gaza, and Sofala, IYCN sponsored training-of-trainers workshops to prepare government and nongovernmental organization (NGO) staff to train community activists in infant and young child feeding. Finally, through a collaboration with the International Baby Food Action Network (IBFAN) and local NGOs, the project piloted linkages between health facilities and community agents, enabling mothers and caregivers

to regularly access infant feeding information from trained health workers and volunteers.

## Context for nutrition programming

Almost 44 percent of children younger than five years of age are stunted in Mozambique,<sup>1</sup> a condition that can result from poor feeding practices during a child's first 1,000 days of life. Although 98 percent of mothers breastfeed, only 37 percent exclusively breastfeed for the first six months,<sup>1</sup> instead supplementing their children's diets with water, traditional medicine, and liquid porridge. Little more than half of mothers continue breastfeeding through their baby's first 24 months of life. When children begin to eat solid foods at six months of age, many families do not know how to prepare local foods in a way that will meet the needs of their young children. As a result, most Mozambican children do not consume a sufficient diet when they begin eating solid foods.<sup>2</sup> In addition, 12.5 percent of adults are HIV-positive in Mozambique,<sup>3</sup> and the United Nations Children's Fund (UNICEF) estimates that each day, 90 Mozambican children are infected with HIV through maternal-to-child transmission.<sup>3</sup> Exclusive breastfeeding is usually the safest way for HIV-positive women in Mozambique to feed their infants to reduce the risk of transmission through breastmilk; however, harmful feeding practices arise from a belief in unsafe traditional feeding

<sup>1</sup> Multiple Indicator Cluster Survey, 2008, Summary.

<sup>2</sup> 2003 Mozambique Demographic and Health Survey.

<sup>3</sup> UNAIDS/World Health Organization, 2008.



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practices and a lack of information offering consistent, effective messages to health workers and caregivers.

## Project activities and accomplishments

IYCN worked in Mozambique to ensure that health workers have the information, communication skills, and tools to effectively support improved nutrition among mothers and their children at the facility and community levels. The project collaborated with the MOH, IBFAN, UNICEF, the World Health Organization (WHO), and other partners supported by the US President's Emergency Plan for AIDS Relief (PEPFAR), including Food and Nutrition Technical Assistance Project, Helen Keller International, CARE, World Vision, International Training and Education Center for Health, and FHI 360.

### *Clarified the context for improving nutrition services*

IYCN conducted a literature review on policies, strategies, and programs addressing infant and young child feeding and found that the activities of the MOH and other implementing agencies did not reach health workers throughout the country, leaving many of them ill-informed about evidence-based best practices. Additionally, weak monitoring and evaluation systems have prevented an effective follow-up system from being established for community- and facility-based nutrition activities, and inadequate funding streams for nutrition programs make it difficult to mobilize community volunteers in support of improved nutrition. The project also created an inventory of curricula, materials, and job aids on infant and young child feeding, which revealed a dearth of these materials across Mozambique.

Additionally, IYCN conducted a rapid assessment of nutrition assessment, counseling, and support services to identify staff training needs at hospitals supported by PEPFAR partners in three areas: Nampula, Inhambane, and Maputo Provinces. The findings, which were presented to nutrition stakeholders

during an MOH meeting in September 2011, revealed that the health facilities were not providing sufficient nutrition and infant feeding counseling to mothers because they lacked updated information (especially on HIV and infant feeding), visual materials, and adequate human resources to conduct the counseling sessions. The project also found that health professionals spent considerable time providing curative nutrition services and little time on prevention of maternal and child malnutrition. IYCN used the findings to develop an action plan to address staff training on counseling and support for new mothers.

### *Updated a national policy to support improved nutrition*

Upon initiation of its activities in January 2011, IYCN worked with the MOH and a range of stakeholders to update a national infant and young child nutrition policy and to incorporate the 2010 WHO guidelines on HIV and infant feeding. To ensure the expansive reach of the policy, the government and its partners will disseminate it to health workers in all provinces, and include the guidelines in future staff training.

### *Operationalized the Baby-Friendly Hospital Initiative*

The project assisted the MOH in advancing the BFHI, a global program sponsored by WHO and UNICEF to encourage and recognize hospitals and birthing centers that offer an optimal level of care for infant feeding. As a first step, IYCN helped to develop tools for rapid assessment of breastfeeding counseling and support at José Macamo and Mavalane Hospitals, two major health facilities in Maputo which were already working toward certification as Baby Friendly. The project created a strategy to address the gaps in BFHI services, train nurses and doctors, and impart counseling skills to auxiliary hospital staff.

To operationalize the initiative, the project adapted training manuals, social and behavior change communication materials, and monitoring and supervision tools, to address the needs of health facility workers. This included assessing the current skills and needs of staff, and developing a training curriculum for clinical hospital personnel, as well as non-clinical personnel who have regular contact with mothers. In Mavalane and José Macamo Hospitals, IYCN, along with MOH focal points, used the materials to train 166 health providers according to BFHI standards and conducted 14 supportive supervision visits to hospital health workers following the training.

During the supervision visits, IYCN learned that hypoglycemia and hypothermia among babies born at the two hospitals had dropped significantly as a consequence of early initiation of skin-to-skin contact between mother and newborn and



improved breastfeeding practices. In addition, health workers improved their ability to help mothers position their babies for breastfeeding and practice on-demand breastfeeding instead of teaching mothers to breastfeed every three hours as they did previously. Following the training, health talks during patient discharge were more focused on key behaviors rather than covering a long menu of public health topics. IYCN's activities also resulted in improved counseling skills for non-traditional hospital staff, who have more time to spend with mothers, and increased knowledge of breastfeeding within the context of HIV among medical staff.

### *Expanded baby-friendly services to communities*

Because community support is an essential part of the Baby-Friendly approach, the project supported the MOH to develop a unique community component to expand the BFHI. Integrating community interventions into the existing health facility-focused initiative, IYCN improved linkages between Mavalane and José Macamo Hospitals and their surrounding communities, as well as created linkages between facility-based nutrition services and community-based follow-up. As a result, 100 pregnant and lactating mothers received nutritional services and counseling through an integrated

system of approaches encompassing both community support and facility-based services.

Training community activists—who already provide breastfeeding advice to mothers in communities and at health facilities—to integrate expanded infant and young child feeding counseling and mother support group activities into their existing outreach activities, was a key aspect of the community approach. Based on IYCN's training packages created for Malawi and Zambia, which were adapted from the UNICEF Community Infant and Young Child Feeding Counselling Package, the project created a package of materials for training community volunteers and pre-tested the tools with 20 community activists working with IBFAN. Training materials include:

- A trainer's manual for a five-day course for community activists on maternal, infant, and young child nutrition.
- An accompanying participant manual.
- A set of counseling cards with discussion questions to prompt dialogue about the child's nutritional issues and prompt negotiation to try recommended feeding or health practices.
- A trainer's manual for community activists on conducting improved health talks in health facilities and the community.
- A trainer's manual on promoting maternal, infant, and young child nutrition in mother support groups.
- An accompanying participant's manual and discussion guide on promoting maternal, infant, and young child feeding during mother support groups.

At the two hospitals, which have embraced the community component of their BFHI activities, community activists will conduct infant and young child nutrition outreach activities,

### **Learning together**

Julia, a community activist, has visited the Antonio family in Marracuene village regularly for the past two months—ever since she completed an IYCN training workshop. Under the shade of a large tree outside the family's home, she sits with two young mothers and their mother-in-law, Martha, who helps care for each of their youngest children (a five-month-old and a two-month-old). As Martha shells ground nuts and the babies sleep on a mat nearby, Julia offers feeding advice and asks questions about the babies' growth and health since her last visit.

Since Julia's visits began, Martha says, the mothers have learned how to properly position their babies for breastfeeding and what foods to offer once they reach six months. The family has also changed their traditional practices of giving water and traditional medicines to children younger than six months of age. Thanks to Julia's support, the two-month-old baby is growing especially well and the family is happy to have new knowledge about healthy feeding for their children.

“We are learning together,” said Martha.



including health talks at clinics and hospitals and hospital visits, with pregnant women and mothers who have recently given birth. In addition, trained activists will regularly engage mothers in learning about and discussing infant and young child nutrition issues by leading mother support groups established by IYCN.

Following the pre-test, IYCN revised and finalized the training package for the government to roll out in communities across the country. The project kicked off the process by working with three supervisors employed by the MOH and NGOs from several provinces to train 45 trainers during three workshops.

## Lessons learned

*Promoting nutrition counseling in health facilities and communities using evidence-based approaches is essential to improving the nutrition of mothers and their babies.* To make the BFHI as effective as possible, community support and community referrals are a crucial component to improve breastfeeding practices more widely. Training should cover effective counseling, mother support group facilitation, and strengthening health talks in facilities and communities. Activities to involve men and grandmothers also have the potential to greatly expand support for infant and young child nutrition.

*For health facilities seeking certification as Baby Friendly, it is essential that staff receive follow-up support to develop their breastfeeding counseling and support skills.* BFHI should be expanded to include more in-depth communication skills-building for health workers. When staff turnover is high, it is important to be innovative in training new hospital staff to enable them to complete their 20 hours as an in-service at their place of work instead of conducting off-site training. With MOH focal points and trained senior medical staff at the hospitals, IYCN conducted several three-day trainings at one hospital each month to strengthen the skills of new staff.

*Doctors and other hospital staff should be trained separately because doctors may be reluctant to participate in broader training workshops.*

## Looking ahead

Mavalene and José Macamo Hospitals expect to receive BFHI certification in 2012. IYCN's approach at these two facilities has contributed to increasing support for BFHI at hospitals

“I thought that salty food would help the baby to walk early. It was normal at that time... Now I left what I did in the past and I am advising them [her daughters-in-law] on what to do... I didn't know in the past but now I know. I am encouraging them now.”

—Martha, grandmother in Marracuene

throughout the country. The BFHI training materials will be used by the government and partners to roll out training for health providers across the country. Similarly, the government will use the community training package to train more community activists in collaboration with other partners. IBFAN intends to use the community training resources to expand its community activities with activists and continue collaborating with health facilities. IYCN recommends that nutrition stakeholders continue to work together to develop a plan for integrating community health worker activities into the national strategy for prevention of malnutrition among mothers and infants and for rolling out the BFHI.

### Available resources

#### Portuguese

- BFHI Counseling Training Package (2012)
- Community Infant and Young Child Feeding Package (2012)
  - Trainer's manual
  - Participants' manual
  - Counseling cards
- Engaging Grandmothers to Improve Nutrition (2012)
  - Trainer's Manual for Dialogue Group Mentors
  - A Guide for Dialogue Group Mentors
- Infant and Young Child Feeding and Gender (2012)
  - Trainer's manual
  - Participant's manual for male group leaders
- Mother-to-Mother Support Groups (2012)
  - Trainer's Manual
  - Participant's Manual for Group Leaders with Discussion Guide
- Strengthening Health Talks: Training Manual (2012)

#### English

- Literature review on policies, strategies, and programs addressing infant and young child nutrition in Mozambique (2012)

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## ABOUT THE INFANT & YOUNG CHILD NUTRITION PROJECT

The Infant & Young Child Nutrition Project is funded by the United States Agency for International Development. The project is led by PATH and includes three partners: CARE, The Manoff Group, and University Research Co., LLC. For more information, please contact [info@iycn.org](mailto:info@iycn.org) or visit [www.iycn.org](http://www.iycn.org).