Observations of infant feeding in Kenya

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About the Infant & Young Child Nutrition (IYCN) Project

• USAID’s flagship project on infant and young child feeding.
• Aims to improve nutrition for mothers, infants, and young children during the critical time from pregnancy until two years of age.
• Implemented by PATH in collaboration with CARE, The Manoff Group, and University Research Co., LLC.
Cessation of breastfeeding: a time of high risk

- Lack of continued breast milk may negatively impact infant health.
- Lack of immune protection and introduction of antigens.
- Increased risk of malnutrition, stunting, diarrhea, serious gastroenteritis.
- Increase in breast milk viral load during weaning.
- Too much time on the when not the how to stop breastfeeding.
Assessment of infant feeding among HIV-infected mothers

Goal: To assess HIV-infected mothers’ and their infants’ experiences during the time they stopped breastfeeding.

Objectives

• Assess the clinic-based counseling practices regarding HIV and infant feeding.
• Describe the infant feeding practices and infant health of HIV-exposed infants during the time they were stopping breastfeeding.
• Identify the experiences of HIV-infected mothers during the weaning period.
Study design

- Descriptive study to collect formative research data
- May-Sept 2008
- Eastern Province
  - Food insecure
  - HIV prevalence: 4.1
- Western Province
  - Food secure
  - HIV prevalence: 5.1
Methodology

- Post-counseling exit interviews
- Direct observations of counseling sessions
- Cross sectional survey – in-depth interviews
- Stakeholder interviews with nutritionists and nursing officers

Photo: Wendy Stone

USAID’s Infant & Young Child Nutrition Project
Key observations

• This presentation will share observations taken during data collection concerning provider practices.

• Formal findings from this assessment will be available in a report from IYCN later this year.

Photo: Wendy Stone
Observations from practice

- Individualized counseling, essential for appropriate infant feeding counseling, is not happening.

- The individualized counseling that does take place occurs immediately after the mother receives her HIV test result in ANC.
Observations from practice

• Lack of harmonization and continuity across services results in confusing messages for mothers.

• Confidential means to identify HIV-exposed infants/children do not exist, resulting in lost opportunities for infant feeding counseling and for entering infected infants into appropriate care.
Observations from practice

- Lack of adequate training results in inappropriate information being given to mothers.

- Mothers do not receive the support they need to implement their feeding choices.
Recommendations

- Train all providers who conduct infant feeding counseling to ensure accurate and uniform messages.
- Conduct refresher trainings for all counseling personnel on the ethical obligation to ensure complete client confidentiality.
- Develop IEC materials on infant feeding for health care workers and mothers.
- Revise ANC & PNC/CWC cards to a combined MCH card allowing identification/follow-up of HIV-exposed infants at any entry point.
- Provide comprehensive counseling during follow-up visits.
- Implement community level activities to support infant feeding.
Next steps: IYCN activities in Western Province

• Train additional facility-based counselors on infant feeding.
• Integrate infant feeding support into ongoing community-based HIV activities.
• Print IEC materials for dissemination in facilities and communities.
• Facilitate provincial advocacy meeting with ministry and facility staff.
• Pilot the integration of PMTCT content into men’s groups.
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Thank you

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