Abstracts of oral presentations

Conference 'Nutrition Disparity and Equity: From differences to Potential'

Friday, 8 November 2019 – WICC Wageningen

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Qualitative, longitudinal exploration of factors influencing infant feeding practices among the socioeconomically disadvantaged mothers in rural Muhanga District, Rwanda

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Background

Optimal infant and young child feeding practices are critical to child's survival, health, nutrition and development. Little is known about what influences socioeconomically disadvantaged mothers' infant feeding practices in Rwanda. This study aimed to explore the factors that facilitate breastfeeding and complementary feeding practices over the first year of a child's life in Muhanga district, Rwanda.

Methods

A qualitative, longitudinal cohort study was conducted between December 2016 - April 2018. A purposive sample of 39 mothers attending prenatal consultations was recruited into the study during their last trimester of pregnancy. They were interviewed within the first week, at four, six, nine and twelve months postpartum to explore actual practices and the factors that facilitate breastfeeding and complementary feeding practices. Interviews were recorded, transcribed verbatim and thematically analyzed using Atlas.ti software.

Results

Despite mothers encountered challenges along the way, factors that enabled mothers to adhere to the recommended practices included: maternal self-efficacy, persistency in overcoming barriers, behaving in a anticipating way, balancing work and child feeding, knowledge about the benefits of breastmilk, infant satiety cues, belief in God, social support and advice from health and social professionals.

Conclusion

A number of factors from individual to group and societal level enabled mothers to adhere to the recommended infant feeding practices. Tapping into the strengths of mothers who follow the recommended practices and creating supportive environments may be helpful in supporting the socioeconomically disadvantaged mothers to adopt recommended practices and surmount breastfeeding and complementary feeding challenges.

Keywords: Rwanda, Infant and young child feeding practices, Exclusive breastfeeding, Complementary feeding, qualitative.





Edema-Steernberg Foundation