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Maternal and Child
Survival Program

Addressing Challenges to Immediate and Exclusive Breastfeeding in the First Months of Life- Findings From Egypt



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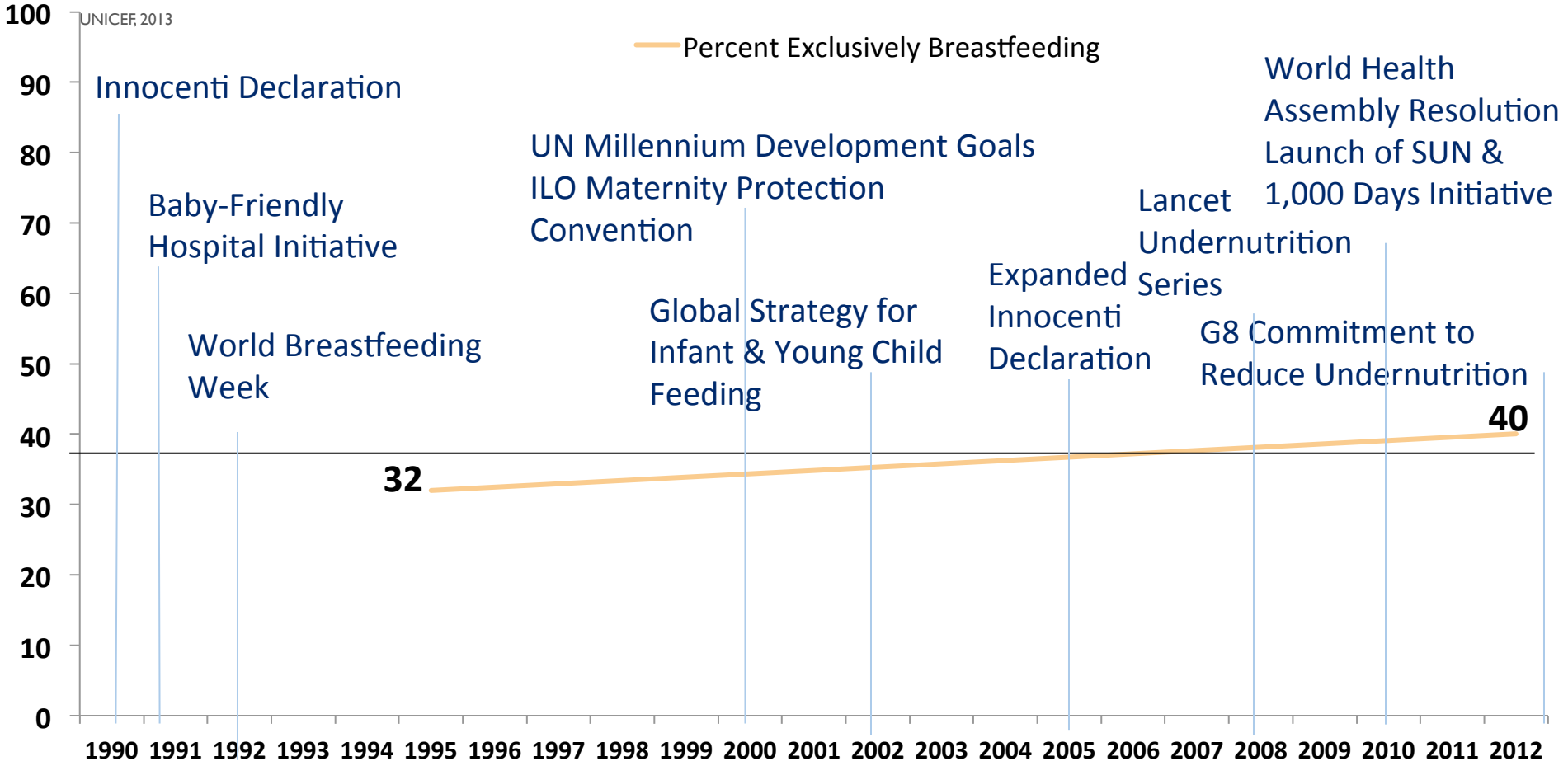
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Outline

- Global progress on exclusive breastfeeding, within the context of SDGs and the World Health Assembly goals
- Key barrier to exclusive breastfeeding – insufficient breastmilk
- Findings from Egypt
- Top 3 strategies to improve exclusive breastfeeding

Sustainable Development Goal (SDG) Target: Ending All Forms of Malnutrition by 2030

- **Malnutrition affects all countries** and 1 of 3 people on the planet.
- Malnutrition takes many forms: children and adults who are skin and bone, children who do not grow properly, people who suffer from imbalanced diets and those that are overweight and obese.
- Tackling barriers to exclusive breastfeeding is one key in meeting SDG targets

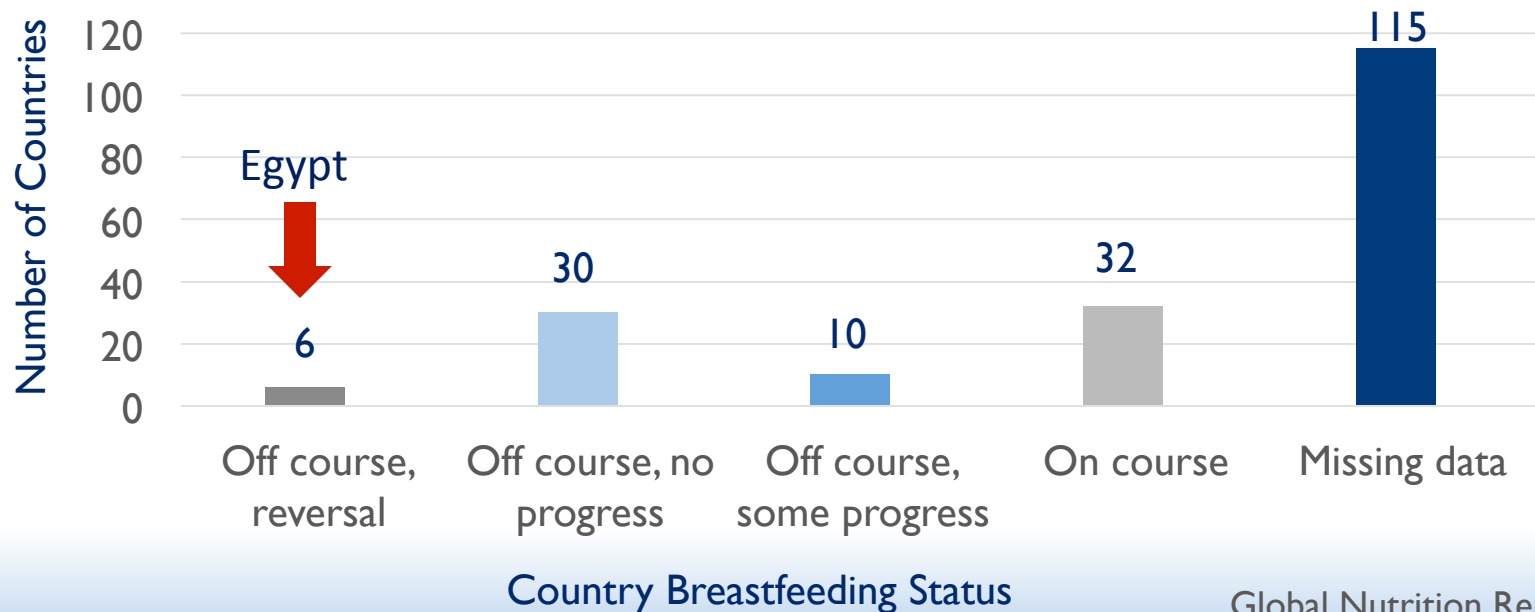


Little Progress in Exclusive Breastfeeding Rates Since 1990

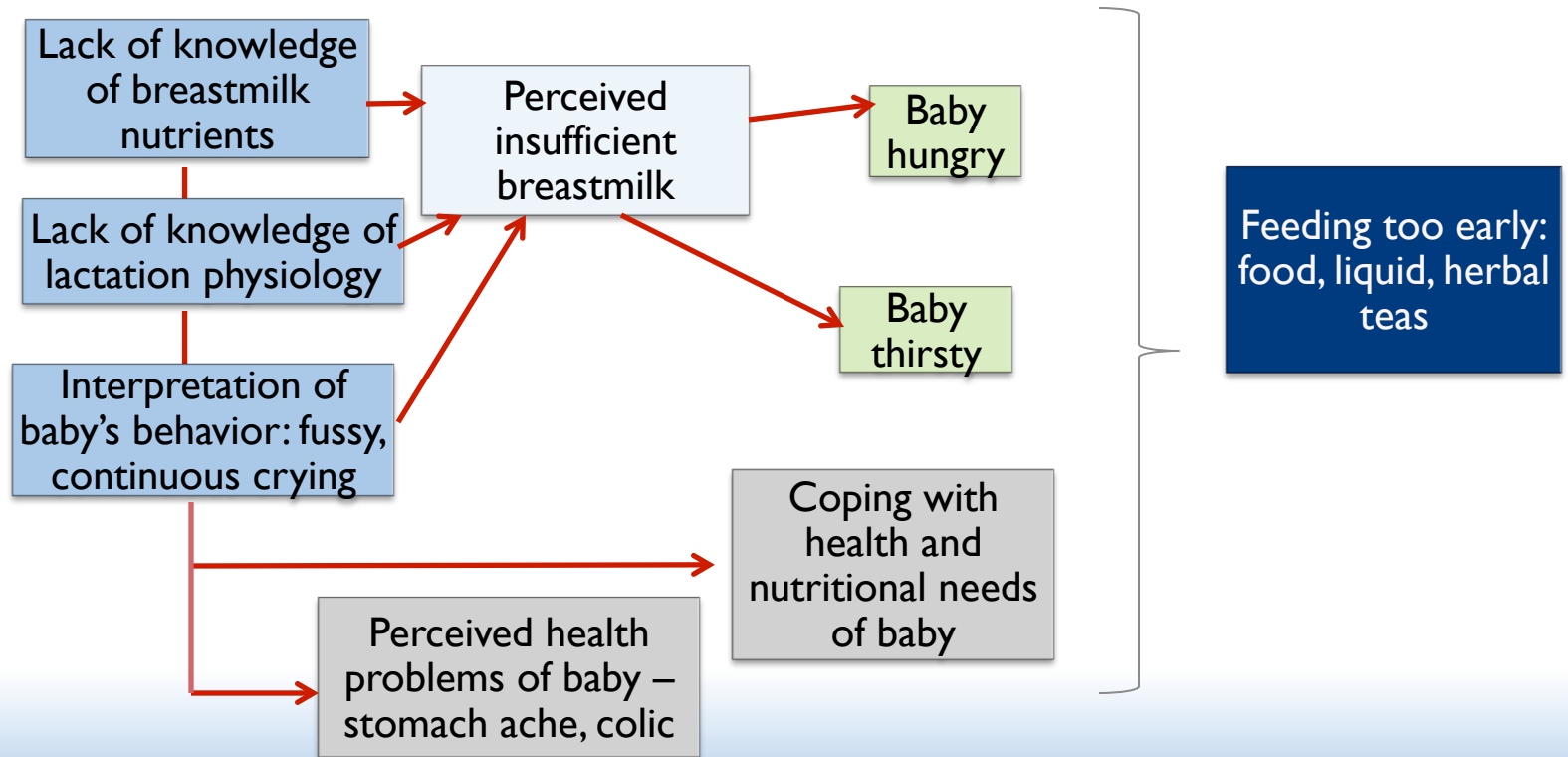
Tracking Countries' Progress on Exclusive Breastfeeding

Global Nutrition Report, 2015

World Health Assembly Global Target by 2025: Increase the rate of exclusive breastfeeding to 50%



Perceptions of Insufficient Breastmilk is a Major Barrier to Exclusive Breastfeeding



Egypt Study: Objective and Methods

Primary Objective: Understand cultural beliefs, perceptions, behaviors in relation to infant and young feeding practices and stunting in Lower Egypt and Upper Egypt

Methods:

- 120 in-depth interviews - mothers of children 0-23 months of age, using Trials of Improved Practices (TIPs) methodology
- Conducted in Arabic, audio-recorded, transcribed, translated into English
- Dominant themes identified and a coding scheme developed
- Qualitative analyses carried out using NVIVO 10.0

Mothers are **committed**
to breastfeeding and understand its benefits. Yet, only
25% of Egyptian mothers were exclusively
breastfeeding in the first 6 months of life.

Breastfeeding is Valued, Yet Prelacteal Feeding is Common

“I had a natural delivery at a private doctor’s clinic. The first breastfeeding session was 2-3 hours after birth. When I went home my mother gave my baby herbal drink using a syringe as prescribed by my doctor. I gave her herbal drink for about two days, once in the morning and once at night until my milk came in and the baby was able to latch on.”

- Mother, Lower Egypt

Herbal Drinks and Teas Delay Initiation of Breastfeeding.

Continued use makes Exclusive Breastfeeding Difficult in the First 6 Months

- Prescribed herbal drinks in first days of life
- Believed to stop child from crying -mother initiates breastfeeding or until milk “comes in”
- Separation from infants after birth is common
- Continued use of herbal drinks to “help babies sleep at night”, sooth “cries of hunger”
- Breastmilk is “not enough” - supported by grandmothers



Examples of baby herbal drink

“I knew he was ready to eat when he kept crying at four months. I told the mother - your breastfeeding is not nourishing him, and the child is a human like us who needs to eat - what will your milk do for him?”

- Grandmother, Lower Egypt



Breastfeeding is Valued as a Natural Choice Only if Mothers Have Enough, Good Quality Breastmilk – “Thick and Heavy, Not Weak and Light, or Little”

- Infants “not nourished enough” by breastmilk alone and are “still hungry” – main reason for introducing food and liquids early
 - Some combine breastfeeding with infant formula
 - Feed “light and simple” foods as early as 2 months
 - Initial screening of foods to assess readiness to eat
 - Encouraged by some doctors and grandmothers

Strategies to Improve Immediate and Exclusive Breastfeeding - Learnings from Egypt

- Provide guidance to health providers and community health workers
 - Stop prelacteal feeding
 - Dispel misperceptions of insufficient breastmilk
 - Not prescribe herbal drinks for children < 6 months of age
 - Not separate mother and newborn after childbirth – delays initiation
- Use community support groups to strengthen knowledge at the community level, involve grandmothers and fathers
- Engage lactation consultant associations to work with health providers to ensure initiation, duration and exclusivity of breastfeeding for the first 6 months of life

For more information, please visit
www.mcspprogram.org

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