From Evidence to Practice: Promoting Continued and Exclusive Breastfeeding in Rural Eastern Uganda

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From Evidence into Practice: Promoting Continued and Exclusive Breastfeeding in Rural Eastern Uganda.

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Background

- Malnutrition is responsible for about one third of deaths globally among children under the age of five.
- Over 65% of these deaths, often associated with inappropriate feeding practices, occur during the first year of life and disproportionately affect those living in resource poor countries.
- Breastfeeding has been established as one of the most protective and effective measures in providing young infants with the nutrients they need for healthy growth and development.
- Despite global trends of increased exclusive and continued breastfeeding practices, according to the World Health Organization (WHO) Global Data Bank on Infant and Young Child Feeding, families living in resource poor countries have been left behind from these development goals.
- Mothers and other caregivers require active support for establishing and sustaining appropriate breastfeeding practices.
- According to Ugandan demographic surveys (2016), less than 43% of infants age 4-5 months are breastfed.

Objective

- The aim of this project was to equip Community Health Educators (CHEs) with evidence-based practice guidelines for the promotion of continued and exclusive breastfeeding to postpartum women living in the rural eastern Ugandan district of Bududa.
- The overarching objective was to increase the number of infants exclusively breastfed.

Methods

- This project was implemented through the Foundation for International Medical Relief of Children (FMRC) clinic in Burumalukani, Uganda.
- WHO validated educational training video, sourced from Global Health Media, was disseminated among CHEs.
- Quantitative surveys evaluated the meaningfulness of intervention.
- Cultural barriers were assessed by interviews conducted with clinical staff members.

Results

- The educational training video was disseminated to 42 health workers.
- Video efficacy was established by pre- and post-surveys.
- Results showed strong community understanding of breastfeeding and improved CHE comfort helping women breastfeed; no statistical difference was found in pre- and post-survey results.
- Barriers to breastfeeding identified through qualitative interviews included: return to work, lack of potable water, lack of storage for expressed breast milk, and pain associated with breastfeeding.

Discussion

- Limitations included: inability to directly measure impact of education on post-partum women, cholera outbreak, and language barrier.
- Improving quality of care for mothers and newborns is at the forefront of global health initiatives (WHO, UNICEF, IMF, MSF).
- This project increased the awareness and knowledge regarding breastfeeding and nutrition, fostered local relationships, and empowered women to make their own evidence-based decision.
- Supporting women who are breastfeeding to make informed decisions about lactation benefits the entire community and more broadly works toward sustainable socioeconomic development and poverty reduction.

References