Examining Mothers’ Perceptions of Infant Feeding in Ghana through an Ecological Lens

Ashleigh LoVette, Michigan State University, Health and Risk Communication

Introduction
- Ghana: LMI Country in West Africa
- Fertility Rate: 4.10 births per woman (2011)
- Research completed in town of Larteh

Nutritional Issues
Infant feeding is a large component of maternal and child health. The consequences of malnutrition are long-term and shape children’s growth and development. Observing the different levels of influence on infant feeding practices in Ghana may help professionals learn how to decrease the prevalence of malnutrition in Ghana.

Methods
- Observation
  - Throughout hospitals and the town of Larteh
  - Visual and conversational components
- Focus Group
  - n=10
  - Held at a local church
  - Assisted by translator
- Semi-Structured Interviews
  - n=16
  - Convenience sampling
  - Held in interviewee homes and community health center
  - Assisted by translator

Results Continued
Feeding Behavior
- 14 out of 16 mothers reported exclusive breastfeeding
- Being unable to breastfeed led to 3 behaviors
  1. Change in Infant’s Diet (9)
  2. Additional Information Seeking (4)
  3. Change in Mother’s Diet (3)
Alternative Feeding Options
- Formula and cereal are accessible, but often costly
- Local dishes often used a substitute (e.g. banku, porridge)

Discussion
Intrapersonal
- Identity as a mother
- Motivations for feeding behavior
Interpersonal
- Perceptions of motherhood created and reinforced through interpersonal interactions
- Source of information for feeding practices
Institutional/Organizational
- Source of information for feeding practices
- Conflicting messages between institutions?
Community
- Relationships between community and health professionals play a role in message diffusion
Policy
- Global feeding policy not always reflected in the actual choices and resources of women
- How is policy communicated at the local level?

Conclusions
Results allow researchers to see the various social influences on mothers in regards to infant feeding. Information from the study can be used to inform future health campaigns and interventions through its designation as family and health professionals as gatekeepers and information sources. Additional research can help to clarify the implications of stigma towards women who cannot or do not breastfeed. Further research in this region is also needed to add depth to current literature.

Acknowledgments
Research Team
- Emily Batrow
- Khalil Beydoun
- Nichole Boland
Community Liaison
- Beatrice Owusu
Program Leaders
- Connie Currier
- Linda Gordon

Literature Cited


