Engaging men to increase support for optimal infant feeding in Western Kenya

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Background

Over the past 20 years infant and under-five mortality rates have been on the rise in Kenya, with current poor infant feeding practices contributing to more than 10,000 deaths each year.1 Recent data indicate that exclusive breastfeeding for the first six months of life is the most effective preventive intervention for ensuring child survival; it is estimated that universal coverage of exclusive breastfeeding could save 13 percent of all under-five deaths, and appropriate complementary feeding could prevent an additional 6 percent of all under-five deaths.2

A combination of complex factors influence infant feeding decisions, including knowledge, attitudes, traditions, societal norms, and support from partners, family members, and the wider community.3,4 In order to improve these practices, it is essential that mothers, caregivers, and family members have accurate information, as well as support to overcome barriers. When mothers receive proper counseling and support they are able to exclusively breastfeed for the first six months.5

Engaging male partners in breastfeeding promotion and education, as well as providing fathers with knowledge and skills for optimal breastfeeding practices, has been shown to positively impact exclusive breastfeeding rates.6,7

Pilot activities

In order to address poor infant feeding practices, the Infant & Young Child Nutrition (IYCN) Project is integrating infant and young child nutrition into current community-level male involvement activities. IYCN and APHIA II Western conducted pilot activities with men’s group leaders in Western Province, Kenya in August 2009, as part of a larger community-based optimal infant feeding intervention.

Thirty men’s group facilitators participated in a two-day workshop. Participants were selected from existing men’s groups that were formed by APHIA II Western to provide an opportunity for men who are living with HIV to educate, encourage, and support each other. These men’s groups are unique in Kenya, where women traditionally form support groups, but men do not.

During the workshop, male leaders explored gender norms around infant feeding and caregiving practices, learned about the importance of exclusive breastfeeding and appropriate complementary feeding, discussed ways to better support their partners to exclusively breastfeed, and developed action plans to integrate infant feeding content into their current activities with their group and community members (see box on reverse). These learning activities encouraged men to view infant feeding as a family issue, and not solely a woman’s issue.

“We learned more about infant feeding which most of us did not know.”

“[The training was] very relevant ‘cause these are things in every household.”

—workshop participants

Infant Feeding and Gender Workshop in Western Kenya, August 2009: (left to right) A workshop participant shares notes from a group discussion about the benefits of gender equity; men engage in a group discussion about gender distinctions in family meals; and participants form a men’s supportive circle as part of a warm-up exercise.

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IYCN developed a draft training manual, based on adult learning theory, to guide workshop activities. This workshop both tested the manual and learning activities, and whether men would be willing to be engaged in discussing and promoting infant feeding. The learning activities appeared to increase men’s sensitivity to the nutrition concerns of women and children and increase their level of comfort discussing the topics. There were lively discussions and active participation throughout the workshop.

The men reported that the training helped them reflect on their own homes and their roles as fathers, husbands, brothers, uncles, friends, colleagues, and community leaders. As men, they felt their responsibilities were to provide shelter, food, security, and education. However, they felt they could be more involved in infant feeding by sharing responsibility with their partners to ensure a child is fed well, being more involved and aware of how their children and other family members’ children are fed, assisting with related costs, sharing information with and supporting their extended families, and serving as a role model to the community.

Next steps

IYCN is preparing to conduct operations research, building on this experience, to evaluate the impact of male engagement on infant feeding practices in Western and Eastern Provinces. This research will involve 450 men and their families using training materials and community mobilization tools from the pilot phase. These community-based activities targeting men will be implemented along with activities to engage grandmothers and other elder women as part of ongoing maternal and child health activities. The findings from this research will be used to develop much-needed recommendations for proven community-level approaches to strengthen infant feeding practices.

Acknowledgements

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References

8 The AIDS, Population, and Health Integrated Assistance (APHIA II) Western project is a USAID-funded project implemented by PATH in Kenya’s Western Province.

Learn more about the IYCN Project at www.iycn.org.