

Feeding practices in Guatemalan infants: Adherence to the WHO recommendations and barriers to their implementation.

No registrations found.

| | |
|------------------------------|----------------------------|
| Ethical review | Positive opinion |
| Status | Recruiting |
| Health condition type | - |
| Study type | Observational non invasive |

Summary

ID

NL-OMON20693

Source

NTR

Brief title

XELA-BABIES

Health condition

Early feeding practices, exclusive breastfeeding, morbidity, stunting

Sponsors and support

Primary sponsor: Center for Studies of Sensory Impairment, Aging and Metabolism (CeSSIAM)

Vrije Universiteit, Amsterdam, Department of Health Sciences

Source(s) of monetary or material Support: Nestle Foundation, Switzerland

Intervention

Outcome measures

Primary outcome

Self reported feeding practices and morbidity incidence (collected by face-to-face interviews)

and growth (based on measurements of mother and child).

Secondary outcome

Rates of exclusive and predominant breastfeeding rates.

Study description

Background summary

The promotion of adequate feeding practices is essential to achieving optimal infant and child health, growth, and development. The WHO recommends initiation of breastfeeding in the first hours after birth and exclusive breastfeeding for the first 6 months of age.

Guatemala's high prevalence of childhood chronic malnutrition may be related to suboptimal early infant feeding practices. Between 2000 and 2007 only 51% of Guatemalan infants were exclusively breastfed for 6 months and only 67% of infants 6-9 months were partially breastfed. In low-income peri-urban Guatemala, 42% of the children under 3 years of age are chronically malnourished, most mothers (79%) did not initiate breastfeeding in the first hour and only 14-23% of infants were exclusively breastfed for the first 6 months of life. Additionally, by 2 months of age, 39% were exposed to bottle feeding, which may lead to microbial contamination.

The proposed study aims to monitor the adherence to the WHO recommendations in infants until 6 months in the urban areas of Quetzaltenango, the second largest city of Guatemala located in the highland region. Half the population is of Mayan origin and the other half is Ladina, and both groups are undergoing rapid urban and economic development.

We shall determine if mothers are adhering to the WHO early feeding practices, and examine the barriers to this recommended behaviour. Length of exclusive breastfeeding, predominant breastfeeding and any breastfeeding and the determinants for the changes in intensity will be examined. Quantitative methods will be used to identify the feeding practices most related to poor child health outcomes, whereas qualitative methods will be used to explore reasons for these behaviours. Lessons from "successful mothers" will be derived to improve adherence to the WHO early feeding recommendations according to the Positive Deviance approach.

Study objective

1. That adherence to the WHO recommendations (2003) for early child feeding among low-income Quetzaltenango mothers, specifically exclusive breastfeeding up to 6 months, is associated with higher growth attainment and greater disease resistance;
2. That a combination of quantitative and qualitative data on early infant feeding practices of

mothers in Quetzaltenango can provide evidence on which to base public action to eliminate barriers to appropriate feeding and to base counselling guidance and public action to generalize the determinant variables of “successful mothers” across the sector, with a high probability to increase adherence in the low-income community of Quetzaltenango.

Study design

A cross-sectional sample of 300 mother-infant dyads will be interviewed once and anthropometric measurements of mother and infant will be collected on a single occasion.

In addition, 80 infants will be interviewed and measured on 3 separate occasions with a 2 month time interval.

Intervention

N/A

Contacts

Public

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Eligibility criteria

Inclusion criteria

1. Aged 0 to 5 months;
2. Full-term infant;

3. No congenital anomalies or chronic illness;
4. Mother willing to sign the study consent form;
5. Currently breastfeeding.

Exclusion criteria

1. Pre-mature infant (defined as born more than four weeks pre-term);
2. Had siblings who were already participants;
3. Had congenital anomalies or chronic illness;
4. Failed to sign the study consent form.

Study design

Design

| | |
|---------------------|----------------------------|
| Study type: | Observational non invasive |
| Intervention model: | Parallel |
| Allocation: | Non controlled trial |
| Masking: | Open (masking not used) |
| Control: | N/A , unknown |

Recruitment

| | |
|---------------------------|-------------|
| NL | |
| Recruitment status: | Recruiting |
| Start date (anticipated): | 01-01-2011 |
| Enrollment: | 380 |
| Type: | Anticipated |

Ethics review

Positive opinion

Date: 30-01-2012
Application type: First submission

Study registrations

Followed up by the following (possibly more current) registration

No registrations found.

Other (possibly less up-to-date) registrations in this register

No registrations found.

In other registers

| Register | ID |
|----------|--|
| NTR-new | NL3123 |
| NTR-old | NTR3273 |
| Other | METC VU University Medical Center : 2010/264 |
| ISRCTN | ISRCTN wordt niet meer aangevraagd. |

Study results

Summary results

N/A