

SOLENZO, NOUNA, BOROMO

Background



The Boucle du Mouhoun region, outlined in purple on the map, is situated in the northwest of the country. It covers 12% of the national territory. The 2014 population numbers 1,771,896 people. The Boucle du Mouhoun is traditionally organized, in villages led by elder chiefs representing the oldest established lineage. Three ethnic groups dominate the region: Bwaba, Samo and Marka. The Mossi are also present in increasing numbers.

The majority of the population is involved in agriculture; a big portion does so at the subsistence level. The region hosts much small-scale market gardening and is a major cotton producer but cultivable land is degrading and this, alongside water shortage, adds to a situation where a sizable portion of the population is poor.

Research studies

A baseline survey and baseline qualitative research (on all maternal, neonatal and child health –MNCH– health issues) was carried out in 2011 to gather data on knowledge and preventive and curative behaviours of relevance to child health. A quantitative baseline survey was administered in all of DMI’s intervention and control areas to a sample of about 5,000 women. Baseline qualitative research through focus groups, individual interviews, and key informants was conducted in all DMI’s intervention areas: this included 163 women (84 grandmothers; 79 mothers) and 149 men (68 grandfathers; 81 fathers), as well as key informants (district medical officers, health centre staff, community health workers, pharmacy manager, village chiefs, and traditional health practitioners). Please note, this research focused on all child health issues not just breastfeeding.

Other research activities in Solenzo included:

- three rounds of formative research (1/2012, 4/2012, 2/2013), focusing on hygiene, illness causation, and low birth weight babies: 149 mothers and 81 fathers (villages: Koma, Yasso, Yéréssoro, Darsalam)
- one round of feedback research (5/2013,), focusing on message retention and appreciation, barriers and facilitators of behaviour change: 172 mothers and 145 fathers (villages: Leoura, Djonfriga, Sambalgou, Mouadougou, Komonga, Dapili, Bantoini, Mantchagou).
- three rounds of pretesting spots on breastfeeding (1/2012, 6/2012, 11/2013): Koma, Yasso, Dio, Gassingo, Masso, Dira.

Key Findings

Baseline survey

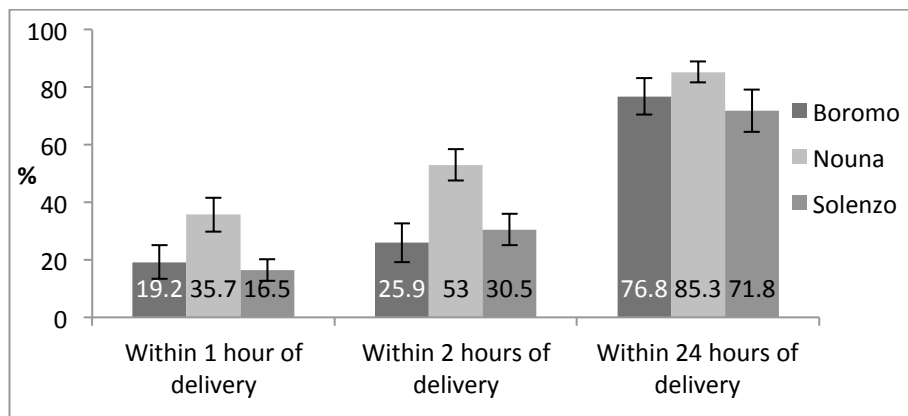
Our baseline survey was conducted between December 2011 and February 2012 (by the London School of Hygiene and Tropical Medicine and Centre Muraz), before the media intervention was launched. In total 5,000 mothers of a child under 5 years were interviewed about maternal and child health behaviours, from several regions across Burkina Faso, so our data provides a representative sample of mothers throughout the country. For the East region, we have grouped the data of Solenzo (an intervention zone), Nouna and Boromo (two of our controls):

Boucle du Mouhoun Region: Solenzo, Nouna, Boromo

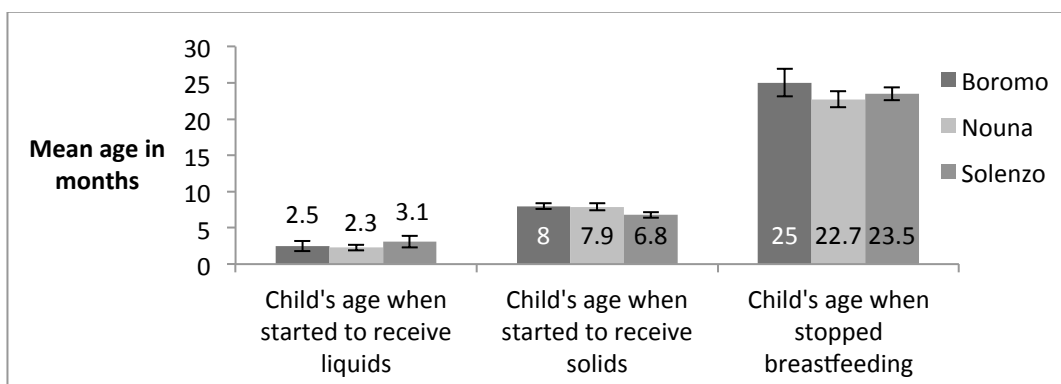
Demographic Information

Most women in all three areas were married - 98.3% in Solenzo, 97.9% in Nouna and 94.7% in Boromo. The population of the Moucle du Mouhoun includes a wide range of ethnic groups. In Solenzo 45% of women interviewed were of Mossi ethnicity, 24% were Dioula and 17% were Bobo. In Nouna 40% were Dioula, 36% were Bwaba and 10% were of Peulh ethnicity. In Boromo 31% of those interviewed were of Gourounssi ethnicity, 19% were Mossi, 16% were Dioula and 12% were of Peulh ethnicity. The mean age of mothers interviewed at baseline was 29 years. The mean number of children aged less than 5 years living with women in Solenzo and Nouna was 1.6, in Boromo the mean was 1.3 children.

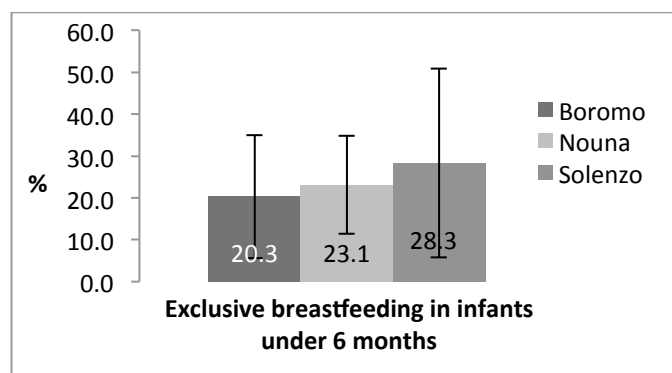
Initiation of breastfeeding



Breastfeeding duration



Exclusive breastfeeding in infants under 6 months



The majority of new-borns receive colostrum. About 28% of infants between 0-5 months are exclusively breastfed in Solenzo, slightly higher than the 25% national average (2010 DHS). Exclusive breastfeeding until 6 months is not the norm in the Boucle du Mouhoun region, as mothers introduce water and herbal brews in infant feeding.

QUALITATIVE FINDINGS

Breastfeeding Initiation

Giving the first milk is generally accepted by new mothers in Solenzo. Older women acknowledged that they discarded colostrum in the past, under pressure from previous generations of women, but nowadays they no longer recommend this to new mothers. One reason for discarding colostrum was that women believed that only then would the ‘true’ milk be produced.

In our interviews and focus groups, only one mother stated that she had discarded the first milk with her first child. The advent of health centre deliveries and sensitisation by health workers, reinforced by the DMI radio campaign, has led to wide-spread acceptance of exclusive breastfeeding among the current generation of new-borns: *“The radio and health agents say that it is the best milk that protects infants against illnesses”* (focus group, Dira). Radio has played an important role: *“It’s the first time that we learn that the first milk is good and that we should not discard it; we used to throw it away because they said it was dirty; we gave the milk that comes afterwards”* (pretest focus group, Koma).

Exclusive breastfeeding

The number of women who exclusively breastfeed is still low in Solenzo. This is because elder women in a household are the key decision-makers when it comes to infant feeding practices, and because they strongly believe in traditional feeding ways—which includes giving water, herbals brews and solid foods before the age of 6 months, young mothers feel compelled to follow their advice, even if they may be inclined to try exclusive breastfeeding. The pressure of elder women is strong: *“Once a mother returns from the health centre after delivering her baby, they will give brews to the child. At 4 months, they’ll introduce porridge in the diet”* (pretest focus group, Solenzo) or *“Here, mothers may refuse brews, but the grandmothers, when they are in the house, will insist and often, their ideas rule”* (41-year-old father, Solenzo).

Brews are considered essential supplements for a new-born's healthy development, and many women will start giving these after 1-2 months. They often give these brews when a baby is bathed (and washed with the brew). Mothers will also give brews during illness episodes, even if they also seek modern health services: *"A baby might have a severe case of malaria. They'll bring him to a health centre but they will also make the baby drink a brew alongside the healing process"* (25-year-old father, Dira).

As elsewhere, water is given early in life. It is considered a necessary liquid, one that helps to calm a crying baby. Once again, the influence of elderly women is key: a baby is like any other human being and needs water to survive. Many elderly women do not understand that breast milk suffices: *"when you tell them to not give water to a baby, they'll accuse you of being a witch. And they'll give water anyway. Men will help their mother and they'll also give water: they'll say you want to kill the baby. They themselves drank water when they were infants"* (30-year-old mother, Dira).

Many mothers and their entourage lack a correct understanding of the true nutritional value of breast milk. There is a persistent belief that breast milk alone will not suffice to help a baby grow and that is why people will insist on introducing solid food even in the first months of life. It is a tradition in Solenzo to do so, and there is plenty of resistance to change this: *"What I don't like, is telling people to only give breast milk during the first 6 months of life, because will that not weaken the baby? Here, we see babies at 4 months drinking porridge and eating other foods. It frequently happens"* (father, Koma).

Slowly, tradition is changing. Young mothers try and sometimes succeed to convince their elders to accept new ideas about infant feeding. A few women met during the research trips testified that they managed to exclusively breastfeed their lastborn babies. Their example can convince others: a 38-year-old father in Dira was impressed by his neighbour, who tried exclusive breastfeeding, and witnessed that up to now, that child is healthy. Men appreciate the practice of exclusive breastfeeding because they then no longer have to gather herbal ingredients and prepare the herbal brews. The influence of elder women also diminishes as more mothers give birth at health centres.

Communication and Key Influencers

In the Boucle du Mouhoun, tradition rules and is carried forward by the respected members of households, foremost by the elderly women in charge of childcare and feeding practices. Husbands as household heads also carry a great responsibility for all household matters. This entourage is key in reaching positive behavioural changes. Health centres and radio are considered trusted sources of information and are presenting the possibility of alternate healthy infant feeding practices. They need to continue their efforts because of the strongly traditional organisation of rural life.

Conclusions

The benefits of colostrum are well-accepted in the Boucle du Mouhoun but exclusive breastfeeding is far from being achieved. In a region characterised by tradition and chieftaincy, it is however possible to change. A quarter of mothers demonstrate that it is feasible to raise healthy babies on only breast milk and to resist the pressures of a strong entourage.