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Knowledge, opinions and practices of healthcare workers related to infant feeding in the context of HIV

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ABSTRACT

Background: The importance of healthcare workers' guidance for women infected with human immunodeficiency virus (HIV) regarding infant feeding practices cannot be overemphasised.

Objective: To determine the knowledge, opinions and practices of healthcare workers in maternity wards in a regional hospital in Bloemfontein, Free State Province, South Africa, regarding infant feeding in the context of HIV.

Methods: For this descriptive cross-sectional study, all the healthcare workers in the maternity wards of Pelonomi Regional Hospital who voluntarily gave their consent during the scheduled meetings (n = 64), were enrolled and handed over the self-administered questionnaires.

Results: Only 14% of the respondents considered themselves to be experts in HIV and infant feeding. Approximately 97% felt that breastfeeding was an excellent feeding choice provided proper guidelines were followed. However, 10% indicated that formula feeding is the safest feeding option. 45% stated that heat-treated breast milk is a good infant feeding option; however, 29% considered it a good infant feeding option but it requires too much work. Only 6% could comprehensively explain the term "exclusive breastfeeding" as per World Health Organisation (WHO) definition. Confusion existed regarding the period for which an infant could be breastfed according to the newest WHO guidelines, with only 26% providing the correct answer. Twenty per cent reported that no risk exists for HIV transmission via breastfeeding if all the necessary guidelines are followed.

Conclusion: Healthcare workers' knowledge did not conform favourably with the current WHO guidelines. These healthcare workers were actively involved in the care of patients in the maternity wards where HIV-infected mothers regularly seek counselling on infant feeding matters.

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A B S T R A K

Agtergrond: Die waarde van die leiding wat gesondheidsorgwerkers aan vroue wat met menslike immuuniteitsgebrek virus (MIV) geïnfekteer is, ten opsigte van babavoeding praktyke verskaf, kan nie oorbeklemtoon word nie.

Doel: Om die kennis, opinies en praktyke van gesondheidsorgwerkers in kraamsale in 'n plaaslike hospitaal in Bloemfontein, Vrystaat Provinsie, Suid-Afrika, ten opsigte van babavoeding in die konteks van MIV te bepaal.

Metodes: Vir hierdie beskrywende dwarsnit studie was alle gesondheidsorgwerkers in die kraamsale van Pelonomi Streekshospitaal wat vrywillig gedurende afgespreekte vergaderings ingeligte toestemming verskaf het ($n = 64$), in die studie ingesluit en het die self-toegediende vraelyste oorhandig.

Resultate: Slegs 14% van die respondente het hulself as kundiges in MIV en babavoeding geag. Bykans 97% het gevoel dat borsvoeding 'n uitstekende voedingsopsie is indien gepaste riglyne gevolg word. Tog het 10% aangedui dat formule voeding die veiligste voedingsopsie is. 45% het verklaar dat die gebruik van hitte-behandelde borsmelk 'n goeie opsie is; terwyl 29% aangedui het dat dit 'n goeie opsie is maar dat dit te veel werk vereis. Slegs 6% kon die term “eksklusiewe borsvoeding” soos deur die Wêreld Gesondheidsorganisasie (WGO) gedefinieer, omvattend beskryf. Verwarring het bestaan rakende die periode wat 'n baba geborsvoed kan word volgens die nuutste WGO riglyne, met slegs 26% wat die korrekte antwoord verskaf het. Twintig persent het aangedui dat daar geen risiko van MIV oordrag via borsvoeding bestaan indien die nodige riglyne gevolg word nie.

Gevolgtrekking: Gesondheidsorgwerkers se kennis het nie gunstig met die huidige WGO riglyne vergelyk nie, inaggenome dat hierdie gesondheidsorgwerkers in kraamsale werk waar MIV-geïnfekteerde vroue op 'n gereelde basis advies rakende babavoeding soek.

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1. Introduction

A central role of healthcare workers is to provide effective counselling to their patients. This places the responsibility on them to ensure that their health knowledge is adequate and can be conveyed clearly. Many women in Sub-Saharan African countries accept the recommendations of healthcare workers as final, and the opinions and advice given by them are highly respected (Piwoz et al., 2006). Therefore, healthcare workers counselling HIV-infected mothers about infant feeding can play a major role in the outcome of the choice of feeding. Healthcare workers' inadequate knowledge regarding the newest guidelines for the prevention of mother-to-child transmission (PMTCT) of human immunodeficiency virus (HIV) can negatively impact the knowledge and practices of their patients (Vallely et al. 2013) to the detriment of the health of the infant. Some key challenges in the PMTCT programmes have been attributed to poor training of healthcare workers (Koricho, Moland, & Blystad, 2010) coupled by the poor counselling by these healthcare workers to the mothers (Mnyani & McIntyre, 2013).

1.1. Problem statement

One of the core features of any PMTCT programme is to assist HIV-infected mothers in their decision making process regarding the mode of infant feeding as well as to provide them with the necessary on-going support during infant

feeding. The choice of whether to formula feed or to breast-feed cannot be made without careful consideration of each woman's unique household, medical, socioeconomic and cultural circumstances. Mixed feeding is associated with a higher risk of mortality compared to exclusive breastfeeding (WHO, 2010a), however the practice of exclusive breastfeeding is not common in developing countries (Cai, Wardlaw, & Brown, 2012). Consequently, it is of the utmost importance that HIV-infected mothers understand exactly how to maximise the possibility of HIV-free child survival by adopting correct infant feeding practices.

The impact of counselling by healthcare workers cannot be overemphasised. Potential gaps in their knowledge can, however, interfere with its success. Therefore in order to plan effective interventions, it is important to determine the current status of HIV and PMTCT counselling in South Africa. The main aim of this paper is to describe the existing knowledge, opinions and practices of healthcare workers regarding infant feeding in the context of HIV; and, compare the same with the latest World Health Organisation (WHO) Guidelines on HIV and Infant Feeding (WHO, 2010a) as well as other relevant literature.

2. Research methods and design

In this case a descriptive cross-sectional study design was employed and 64 healthcare workers were enrolled from the

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