

### **Barriers and Facilitators to Optimal Infant and Young Child Feeding Practices in the Central Region of Ghana: Perceptions of Health Care Providers**

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**Objectives:** This qualitative study sought to describe provider's perspectives on barriers and facilitators to optimal infant and young child feeding (IYCF) practices (primarily exclusive breastfeeding (EBF), meal frequency, and diet diversity) among caregivers in Central Region of Ghana.

**Methods:** Qualitative data were collected through audiotaped in-depth interviews with care providers from three districts within the Central Region of Ghana: Gomoa East, KEEA, and Assin South (N = 18). Interviews were conducted in English, were audio taped, and transcribed. Transcripts were read and coded independently by two authors, consensus was reached about emerging domains and themes, and a final codebook was developed. The socioecological model was used to map barriers and facilitators for EBF and complementary feeding (CF) practices.

**Results:** Preliminary findings showed that several barriers and facilitators were similar for EBF and CF within each level. Individual level barriers included returning to work, poor maternal hygiene and ill health, limited maternal IYCF knowledge. Additional EBF barriers included not recognizing early hunger signs, breast problems, perceived breastmilk insufficiency while additional CF barriers were related to food access, time for preparation, and food safety. Interpersonal barriers/facilitators included family/provider support, family cultural beliefs/practices, family influence on practices, provider IYCF knowledge/education delivery, role modeling. Community level barriers/facilitators were related to the built environment including access to health facility and sanitation as well as community-level characteristics such as illiteracy and traditional beliefs. Societal barriers/facilitators included industry advertising, and IYCF policies/guidelines. Poverty was identified as a cross-cutting barrier. Providers recommended intensifying IYCF counseling, home visits to address barriers and training IYCF counseling.

**Conclusions:** Providers were aware of challenges caregivers face when trying to practice optimal IYCF. Multi-level interventions are needed, including IYCF counseling to address identified barriers.

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