Body Image Perceptions and Breastfeeding Practices among HIV-Positive Malawian Women with Young Children

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Introduction

Previous research has found that a woman who is overweight is perceived as healthy whereas a woman who is thin may be perceived as being unable to exclusively breastfeed due to her size and HIV status. Body image perceptions and their relationship to breastfeeding practices have not been explored in the context of the Malawian Option B+ prevention of mother-to-child transmission (PMTCT) program, which offers lifelong antiretroviral therapy and recommends exclusive breastfeeding until 6 months and continued breastfeeding until 24 months.

Methods

We conducted in-depth interviews with 32 HIV-positive women enrolled in PMTCT and 32 HIV-positive women who had dropped out of the PMTCT program in Lilongwe District, Malawi. Women were asked about current, preferred, and healthy body size perceptions using nine body image silhouettes of varying sizes. Vignettes of two HIV-positive characters, one underweight and one overweight, were used to elicit discussion of breastfeeding practices.
Results

More than 80% of participants preferred a figure that was overweight, obese, or morbidly obese, and about half of participants selected a morbidly obese figure as healthy. While about half of participants thought that an HIV-positive underweight woman could exclusively breastfeeding, nearly all participants believed that an HIV-positive overweight woman could exclusively breastfeed.

Conclusion

The preference for large body sizes and the perception that morbidly obese sizes are healthy may influence perceptions about a woman’s ability to breastfeed. We recommend that counseling and health education for HIV-positive Malawian women focus on healthy weight messaging and its relationship with breastfeeding practices.