Title: The socio-cultural context of postpartum practices of rural Swazi women: implications for elimination of mother-to-child transmission of HIV

Background: Values and beliefs tend to influence health behaviour and practices of women and how they care for their infants postnatally. This is of particular interest in Swaziland a country with a high prevalence of HIV above 22% (DHS 2007). UNICEF (2013) records that mother-to-child-transmission (MTCT) of HIV has raised the infant mortality rate in Swaziland by almost 50% since 1995. There are presently no documented studies that have focused on the socio-cultural context of rural Swazi women in order to inform prevention strategies related to infant feeding in the fight to eliminate mother-to-child transmission of HIV. This study sought to explore and describe the beliefs and practices of rural Swazi women when caring for their young during the postpartum period.

Methods: The study was conducted in a rural village in Northern Swaziland, using an ethnographic enquiry. A networking sampling method was used to recruit 15 multiparous women aged between 18 and 40 years. Face-to-face audio-taped interviews were conducted using an unstructured questionnaire in SiSwati. Field notes detailing researcher observations were also made during interviews. Themes were identified using MAXQDA software after transcribing and translating data to English. An independent experienced researcher listened to audio tapes and viewed translated manuscripts to confirm validity.

Results: Themes uncovered were health belief dualism postnatally, exclusive breastfeeding culturally defined to include traditional supplementary feeds (*inembe*), cultural rituals performed to initiate the baby to feeds (*kumngcemlisa*), regular enemas given to baby postnatally, consistently taking the baby for immunisations, and the common use of traditional contraception rather than modern contraception.

Conclusion: Rural Swazi women were found to adhere to strongly cultural beliefs and practices whilst also exercising biomedical practices postnatally. Cultural beliefs underpin postpartum practices of these women some of which may increase the risk of HIV transmission from mother to baby. This raises the significance of the socio-cultural context of health care related to infant feeding that biomedical practitioners must be aware of in order to tailor prevention messages to mothers in the fight to eliminate transmission of HIV to their babies.

Key words: culture, rural Swazi women, prevention mother-to-child-transmission of HIV, postpartum care, infant feeding