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**Stakeholder perspectives on supplemental milk for infants under six months with growth faltering**

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**Background:** Growth faltering is a significant public health issue among infants aged <6 months (m). Supplemental milk is commonly used for infants with growth faltering, with variations in type and duration. We synthesized qualitative evidence on stakeholder perspectives about equity, feasibility, and acceptability of the type and duration of supplemental milk for infants aged <6m with growth faltering.

**Methods:** We conducted a comprehensive search of six electronic databases in addition to manual searches to identify all qualitative studies published during January 2000-June 2022. Identified articles were screened in two stages against an inclusion criteria with titles and abstract screened first followed by full-text screening. Included studies were quality appraised using the Critical Appraisal Skills Programme checklist. The primary outcome was equity, feasibility, and acceptability of various supplemental milk for infants <6m with growth faltering.

**Results:** Eighteen studies, reporting perspectives of mothers, fathers, grandmothers and healthcare providers were included. Studies were conducted in North America (9), Africa (5) and Asia (3) and South Australia (1). Donor human milk (DHM) (13) and infant formula(9) were the main supplementary milk reported followed by cow/goat milk (2). Key sub-themes derived were: education/awareness, socio-economic status (SES), race and religion, practicality, availability of

resources, sustainability, cost, affective attitude, perceived effectiveness and ethicality. Maternal/caregiver SES was a key sub-theme across all three supplemental milk feeds, acting either as a barrier or facilitator for uptake.

**Conclusions:** DHM and infant formula were the most commonly reported supplemental feed for infants aged <6m with growth faltering. Maternal/care giver factors were perceived as key to ensure equity, feasibility, and acceptability with respect to type and duration of supplemental milk for infants aged <6m with growth faltering.

**Key messages:**

- Stakeholders perceived donor human milk and infant formula as main supplemental milk for infants aged <6 months with growth faltering.
- Maternal/care giver factors are key to ensure equity, feasibility, and acceptability of supplemental milk for infants aged <6 months with growth faltering.