ABSTRACT

**Well established:** Frequent contact with breastfeeding counselor and standardized health education increases the rate of exclusive breastfeeding (EBF). The rates of exclusive breastfeeding in Kenya and much of sub Sahara Africa are low despite the known benefits of reduced child morbidity and mortality.

**Newly expressed:**
Phone based infant feeding counseling is feasible in resource constrained setting, and resulted in high EBF rates and reduced neonatal deaths.

**Background:**
Frequent infant feeding counseling is one of the most effective methods of increasing exclusive breastfeeding (EBF) rates. In resource constrained settings phone based counseling maybe a viable strategy for providing frequent breastfeeding support. The objectives of this study were to determine the efficacy of phone-based breastfeeding counseling (PBCS) for EBF.

**Methods:**
Primiparous mothers of well term newborn infants at Kenyatta National Hospital who gave informed consent were randomly assigned to standard breastfeeding education (SBE) delivered at the facility or SBE plus PBCS through weekly calls in the first month and fortnightly in the second and the third month. Infant feeding practices was documented using a standard tool at 6, 10 and 14 weeks post delivery.

**Results:**
A total of 180 mother-baby pairs were enrolled, 91 in the intervention arm and 89 controls. Of these 78%, 67% and 58% were interviewed at 6, 10, and 14 weeks respectively. EBF rates in the PBCS study arm were 93%, 90% and 87% of 71, 57 and 50 women interviewed at 6, 10 and 14 weeks postpartum and 72%, 58% and 45% in 70, 63, and 54 women in the control arm. There was a significant difference in the rates of exclusive breastfeeding.