Complementary Feeding Practices and Associated Factors among Infants and Young Children 6-23 Months in Fort Portal Kabarole District Uganda

Background: Evidence has shown that inappropriate complementary feeding practices lead to stunting. The minimum acceptable diet among infants and young chilren 6-23 months in Uganda is at 14% while in tooro region it is at 8.8%. Complementary feeding practices have been neglected in the implementation of the infants and young child feeding policy.

Objective: The main objective of the study was to determine the prevalence of appropriate complementary feeding practices and associated factors among infants and young children 6-23 months in fort portal Municipality Kabarole Uganda.

Methods: A community based cross-sectional study was conducted among 206 mothers/caretakers of infants and young children 6-23months using both quantitative and qualitative methods. Probability proportionate to population size sampling technique was used to select the study subjects. A pretested standard WHO questionnaire for assessing infant and young child feeding indicators was adopted for assessing complementary feeding practices. Appropriate complementary feeding was defined as attaining both minimum meal frequency and minimum dieatry diversity in the last 24hours. Prevalence ratios and there 95% confidence intervals were generated. Modified poisson regression model was used to generate factors associated with appropriate complementary feeding. Five Focus Group Discussions were conducted to capture participants' perceptions on appropriate complementary feeding practices.

Results: The prevalence of appropriate complementary feeding was found at 21.4%. Having a formal employment (PR: 7.05: CI: 1.69-29.36), Cohabiting (PR: 2.15; CI: 1.10 – 4.18), and having no child illness (PR: 1.85; CI: 0.88 – 4.35) were associated with appropriate complementary feeding. Qualitative results showed inadequate information and low income as major challenges towards appropriate complementary feeding.

Conclusion: Low appropriate complementary feeding practices of infants and young children 6-23 months was observed. Unless interventions such as; health services access and enterprises for women are put in place the inappropriate complementary feeding practices are unlikely to change.