Determinants of complementary feeding practices and nutritional status of children 6-23 months old in Korogocho slum, Nairobi County, Kenya

Korir, Jacob Kipruto

Abstract:

Scientific evidence on infant and young child feeding practices from developing countries show that progress is possible when effective strategies and sufficient resources are applied. However, significant gaps in complementary feeding continue to undermine child health. There is limited scientific data on complementary feeding practices and its relation to nutritional status of children aged 6-23 months old in Kenya’s urban slums. The study therefore investigated complementary feeding practices in relation to the nutritional status of children aged 6-23 months old in Korogocho slum in Nairobi. The study used cross sectional analytical design and targeted 322 mothers with children 6-23 months old. Proportionate stratified sampling was used to select children in different age categories and two stage cluster sampling was used to select households with mothers/caregivers and children 6-23 months old. A researcher-administered questionnaire and focus group discussion guide were used to collect information from the respondents. Weight and length measurements were used to assess the nutritional status of children based on the weight and length indices. All (100%) the children 6-8 months old had received solid, semi-solid or soft foods. The minimum meal frequency was attained by 88.3% (95% CI 84.3-91.4) whereas the minimum dietary diversity was attained by 17.9% (95% CI 14.1-22.5). In addition, the minimum acceptable diet was attained by 15.4% (95% CI 11.9-19.8). Maternal knowledge on: importance of breastfeeding (87.3%); age of introduction of complementary foods (85.4%) and correct meal frequency for age (74.5%) was high. On the contrary, knowledge on the importance of enriching complementary foods (34.5%) was low. Under nutrition was high among the children: wasting (8.4%, 95% CI 5.6-11.9); underweight (9.8%, 95% CI 7.1-13.6) and stunting (20.1%, 95% CI 16.1-24.8) respectively. The prevalence of morbidity among the children was also high with 54.3% having diarrhoea, 33.8% vomiting, 45.7% fever and 34.6% ARI.s. Mothers who knew the importance of a diverse diet were likely (chi-square test; p=0.001) to feed their children on a diverse diet. On the other hand, mothers who knew the importance of enriching complementary foods were likely to feed their children on a minimum acceptable diet (chi-square test; p=0.007). Children who had diarrhoea episodes were less likely to consume vitamin A rich foods (chi-square test; p=0.036) and to achieve minimum dietary diversity (chi-square test; p=0.033). Lack of minimum acceptable diet was a significant predictor of nutritional status of the children based on the wasting (ODDS Ratio [OR]=2.56, p=0.038). Absence of diarrhoea in the past 2 weeks (OR=1.77, p=0.040), younger mothers (OR =1.77, p=0.030) and maternal knowledge on enriching complementary foods (OR=3.41, p=0.040) were significant predictors of consumption of Vitamin A rich foods, minimum meal frequency and minimum acceptable diet respectively. Behaviour change and communication involving all the stakeholders in infant and young child feeding should
be emphasized. Messages on appropriate feeding practices should include importance of dietary diversity. A longitudinal study should be conducted to effectively link feeding practices and individual growth patterns.