Prevalence and Contributing Factors to Malnutrition Among Children Aged 6 To 24 Months Attending Well-Baby Clinic at Mbagathi District Hospital, Nairobi

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ABSTRACT: Despite the generally observed declining levels of malnutrition globally, it remains a challenge in developing countries of Sub-Sahara Africa where estimated 45% of children below five years are stunted. In Kenya, levels of stunting have declined from 35% in 2009 to 26% in 2014 (GOK, 2014).This follows the implementation of multiple initiatives by the Kenya Government as envisaged in the Vison 2030, embedded in the Kenya constitution 2010 and spelled out in the   National Nutrition Action Plan 2012-2017 adapted to scale up high impact nutrition initiatives and provides a framework for operationalization of feasible and cost effective interventions to curb malnutrition in children below five years. However, there still exist large disparity on the prevalence of malnutrition with less developed counties and most populace areas still positing high prevalence rates. Previous studies have shown increased rates of malnutrition in the informal settlements. Nairobi where the study is focused has over 60% of the population residing in the informal settlements with limited resources. Mbagathi Hospital draws most of the clientele from the neighboring informal settlement of Kibera, Dagoretti and Embakasi and therefore an ideal place to undertake the study to assess the prevalence of malnutrition, identify associated factors with an aim of expanding the understanding and recommend potential interventions. A total of 300 mother/guardian and child pairs were enrolled in the study. Height and weight measurements were taken for every child and socio-demographic data obtained from mothers/guardians using interviewer administered semi-structured questionnaires. Anthropometric data was analyzed using WHO Anthro2006 software and socio-demographic data using Statistical Package for Social Scientists (SPSS) version.20. The prevalence of wasting (WHZ <-2SD) was 15.3%, underweight (WAZ <-2SD) was 22.0% and stunting (HAZ <-2SD) was 14.3%. Prevalence of underweight was significantly higher among boys (28.1%) than girls (15.6%) (χ^2 *8.056,* p=0.018). Low birth weight, child illness two weeks to study and mothers' perception of child health status were significant predictors of malnutrition (p=<0.05). In addition, poor maternal education and family income ≤Ksh. 20,000 were strongly associated with high rates of malnutrition (p<0.000). Emphasis on maternal education and nutritional interventions targeting children attending Well- Baby Clinics would have significant impact on malnutrition among the study population.

Key words: Malnutrition, prevalence, wasting, underweight, stunting.