

Abstract

Introduction: The study sought to investigate the factors affecting adherence to IFA among pregnant women aged between 20 and 40 attending ANC at Kapchorwa Hospital.

Main objective: To investigate the factors affecting adherence to IFA supplements among pregnant women attending ANC at Kapchorwa Hospital.

Methodology: A descriptive cross sectional study using convenient sampling method was used to collect data from 384 pregnant mothers. Qualitative and quantitative data was collected using a questionnaire that had questions on socio-demographic characteristics, predisposing, reinforcing and enabling factors was administered to the eligible mothers. The raw data was entered into epidata and exported into SPSS for analysis. Descriptive, bivariate and multivariate logistic regression statistical analyses were used.

Results: Of the 326 pregnant women interviewed, 195/326 (60%) were adherent to IFA supplements. Parity of 4 or less (OR=2.1, CI=1.06-3.70, p=0.02), four or less previous ANC visits (OR=0.31, CI=0.13-0.73, P=0.004) and mothers who had social support (OR=3, CI=1.7-4.78, P<0.001) were significantly associated with adherence to IFA supplements.

Conclusion: The overall level of adherence was higher than the national estimates although lower than recommended level. Mothers with low parity of less or equal to 4, four or more previous ANC visits and social support from family members were likely to adhere to IFA supplements among women attending ANC in Kapchorwa Hospital.

Recommendations: Continuous sensitization of the mothers on the importance of adherence to IFA coupled with improved nutrition; need for early ANC attendance and at least 4 ANC visits during every pregnancy for continuous monitoring on adherence and follow up; ANC cards should be modified by MOH to enable monitoring of adherence to IFA so that defaulting mothers can be identified and supported accordingly; and health workers should provide the appropriate support to mothers of high parity (more than 4 children) to avoid complacency and improve adherence to IFA.