

**Introduction:**

Exclusive breastfeeding provides ideal nutrition for infants and is sufficient to support optimal growth and development for approximately the first six months after birth (American Academy of Pediatrics, 2007). World Health Organization confirmed the importance of exclusive breastfeeding for the first six months. Breastfeeding offers many advantages for growth while bringing both short term and long term health benefits for both the infant and mother (WHO, 2001).

**Objectives of the study:**

To assess the factors influencing exclusive breast feeding among women of the reproductive age group (18-49) in the formal sector in Mbarara Municipality, specifically focusing on the sociodemographic, different approaches to breast feeding and institutional factors influencing exclusive breastfeeding.

**Methodology:**

A cross sectional study of 376 women of the reproductive age group in the formal sector with children was conducted at the 25 Institutions in Mbarara Municipality from July to August 2015.

Quantitative methods of data collection using a self-administered questionnaire and qualitative methods using focus group discussion were utilized.

Poisson regression model was used to estimate the incidence risk ratios (IRR) and their 95% confidence interval for exclusive breast feeding comparing with the independent variables.

**Results:**

The proportion of women in the formal sector exclusively breast feeding was 37%. A total of 51.1% supplemented breast feeding with formula. Only 2 out of the 25 institutions had breast feeding rooms. The socio-demographic factors associated with exclusive breast feeding were marital status, number of children and education level. The Institutional factors that affected exclusive breast feeding were; number of working hours, presence of a breast feeding room, distance to work place.

**Conclusion and recommendations:**

The proportion of women of the reproductive age group in the formal sector that exclusively breast fed their babies was 37% much lower than the national success rate of exclusive breast feeding.

The socio-demographic factors associated with exclusive breast feeding among women in the formal sector were marital status, education level and number of children. The different approaches to breast feeding were supplementing breast milk with formula, giving breast milk but compressed in feeding bottles, breast feeding babies directly from the breast and feeding babies on cow milk. Majority of the respondents supplemented breast milk with formula.

The institutional factors that influenced breast feeding among the women of the reproductive age group were number of working hours per day, presence of a feeding room at work and distance from

residence to workplace.

The employment act should be revised to cater for breast feeding female employees since the maternity period given cannot last for 6 months. Sensitization campaigns should not only target women of low level of education but include women of a high level of education.

All institutions planning or employing female staff should have provisions for feeding rooms to enable working mothers continue exclusively breast feeding their babies when they resume working. They should also give mothers some breaks during working hours to enable them attend to their babies or reduce their working hours for the few months after their maternity leave so that they continue with exclusive breast feeding.

Breast feeding mothers in the formal sector should plan on how to care for their babies, if staying close to the work place will help them continue breastfeeding their babies then they can look for accommodation close by.