PREVALENCE AND FACTORS ASSOCIATED WITH STUNTING AMONG CHILDREN AGED 6-59 MONTHS IN KABALE DISTRICT, UGANDA

BY MUSA KASAJJA 2013/HD07/726U

SUPERVISORS: DR. ELIZABETH NABIWEMBA MR. KAMUKAMA SAUL

A DISSERTATION SUBMITTED TO THE COLLEGE OF HEALTH
SCIENCES IN PARTIAL FULFILLMENT OF THE REQUIREMENTS
FOR THE AWARD OF A MASTERS OF PUBLIC HEALTH
NUTRITION OF MAKERERE UNIVERSITY

NOVEMBER, 2015

ABSTRACT

Introduction: While global progress has been made in improving nutrition, malnutrition continues to unfold in a complex way. Malnutrition in the form of stunting has been identified as one of the most significant impediments to human development. Stunting is a well-established risk marker of poor child development.

Objective: The overall objective of this study was to assess the nutritional status of children aged 6–59 months born in rural communities of Kabale district and to determine factors associated with stunting among children aged 6–59 months of age.

Methodology: The study used a cross sectional study design. A total of 640 households were visited in the sub-counties of Ikumba and Hamurwa. Simple random sampling and systematic random sampling techniques were used to obtain villages and households respectively. One child aged 6–59 months was randomly sampled from each selected household. The data collection tools used included; an interview administered questionnaire, a height board and weighing scales as well as adult Mid Upper Arm Circumference (MUAC) tapes. The questionnaire administered to the mother of the child was used to collect household data. Anthropometric data including age, weight and height was collected from each selected child. The collected data was sorted, coded and entered into a computer using EpiData software, then analyzed using STATA version 12.0. A modified Poisson regression model was used to determine associations and prevalence odds ratios and their 95% confidence Intervals.

Results: The prevalence of stunting among children 6-59 months was 41.1%. Children more likely to be affected by stunting included; those in the age categories of 36-47 months (APOR=0.38; 95% CI 0.18-0.79) and 24-35 months (APOR=0.42; 95% CI 0.19-0.88), those from households in which mothers indicated market as the major source of food (APOR=0.67; 95% CI 0.48-0.94), those whose stool was put and or rinsed in a latrine (APOR= 0.41; 95% CI: 0.23-0.74) as well as those that whose stool was thrown in garbage (APOR= 0.29; 95% CI: 0.12-0.72).

Conclusion and recommendations: The prevalence of stunting among children aged 6-59 months in Kabale district was high, that is at 41.1%. The practices and or factors independently associated with stunting among children aged 6-59 months were; age of the child, major source of food for the household and disposal of child stool. There were no feeding practices associated with stunting.

In order to further reduce the prevalence of stunting among children under five years in Kabale district, there needs to be a proper mix of both community and health based interventions so as to help improve child health. Kabale district health office (in partnership with development partners) needs to strategically conduct community based interventions such as sensitization on enriching complimentary foods like pumpkins, amaranth, iron rich beans and many others thus encouraging families to grow those foods for purposes of feeding their children. The district health office also needs to strengthen on other strategies for the causes of stunting like sanitation (households having toilets and proper disposal of fecal matter for children), diarrhoea management and control, deworming, immunization and supplementation of vitamin A.