

## ABSTRACT

On a universal scene, about 13 million children are characterized with severe acute malnutrition which continues to frighten populations in both the rural and urban areas. While about 50% of the 10-11 million children less than five years of age die due to avoidable causes, 99% are in the developing world. In Uganda alone, it is probable that 38% of children under five are stunted, 25% are under weight, 5% wasted and 40% die of problems linked to malnutrition.

Despite the fact that efforts in the health sector have witnessed support manifestations in terms of eradication of cost sharing and user fees to guarantee equitable access to good quality services, drug shortages are still evident which have affected the implementation of preventative approaches such as integrated management of childhood illness, immunization, health education, and promotion emphasizes control of communicable diseases. Knowing that malnutrition if unattended to, is bound to continue affecting the physical growth, morbidity, mortality, cognitive development, reproduction, and consequently future physical work capacity, human performance coupled with health and the survival of future generations, a study was undertaken to assess factors contributing to childhood malnutrition among children under five years.

The study design was a cross sectional descriptive study, using quantitative methods of data collection. A questionnaire was administered to 330 caretakers/ mothers of children less than 5 years in randomly selected households, which explored a variety of factors that could possibly contribute to childhood malnutrition in Manyogaseka Sub County Mubende District.

Findings indicate that while the age at which solid foods are introduced to a child, the types of solid foods introduced (P-Value 0.251) alongside information on child nutrition (P-Value 0.095) amongst the mothers to children less than five years of age are not contributing factors to malnutrition, breastfeeding (P-Value 0.005) coupled with the age at which additional foods (Pvalue 0.042) are introduced besides child sickliness (P-Value 0.039) are contributing factors to the malnourishment of children who were less than five years of age. The study with regard to sociodemographic factors also found out that while the sex of the child, the marital status of the mother, mother's education level, mothers age besides the mothers occupation and the number of people staying in the house are not contributing factors to malnourishment (P-Value 0.130), the age of the child and the type of house (P-Value 0.015) are contributing factors to the malnourishment of children less than five years of age.

The study as well established that though the distance to the nearest health facility from home is not a significant (P-Value 0.079) contributing factor to malnutrition, the waiting time spent at health facility while waiting to see a healthcare worker (Pvalue 0.027) and the health workers' attitude (P-value 0.012) are significant contributing factor to malnutrition amongst children aged less than 5 years.

Based on these findings the study recommends among others that mothers with children try as much as possible to breastfeed their child for a period long enough as a way of reducing the incidence of malnutrition through stunted growth amongst their respective children and that the government through its line ministry of health put in place mechanisms which promote good attitude amongst the healthcare workers towards mothers with child patients as to encourage such mothers to seek for nutrition services from the health practitioners.