

**Factors associated with meal frequency among children aged between 6 to 23 months in
Kiryandongo refugee settlement, Uganda**

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Abstract

Introduction: Inadequate meal frequency for infants and young children among refugees is high, which is a risk factor for under nutrition, increasing morbidity and mortality among children. The study was to establish meal frequency and factors associated with minimum meal frequency for children aged 6 to 23 months in Kiryandongo refugee settlement, Uganda.

Methods: The study was a community based cross section among 412 children aged 6 to 23 months. Mothers/caregivers were interviewed using a structured questionnaire. Data was entered in Epi-Data and exported to Stata SE version 12 computer software for cleaning and analysis. Frequencies and percentages were computed and bivariable and multivariable logistic regression used to determine factors associated with meal frequency.

Results: Out of 412 children, 40.0% of children had inadequate meal frequency in Kiryandongo. Factors associated with meal frequency in the adjusted analysis were child health status (AOR:1.8; 95% CI: 1.04, 2.93), maternal education level (AOR: 3.4; 95% CI: 1.62, 7.24), young child clinic attendance (AOR:0.5; 95% CI: 0.29, 0.85), knowledge of minimum meal frequency (AOR:3.4; 95% CI: 1.64, 6.91), and source of household food (OR:2.4; 95% CI: 1.01, 5.60).

Conclusion and Recommendations: Inadequate meal frequency was high among children. Factors associated with meal frequency included child health status, maternal education levels, maternal knowledge of minimum meal frequency, attendance of young child clinic and household source of food. Focused behavior change communication should be intensified to mothers in order to increase knowledge of minimum meal frequency. Community outreach be increased to influence caretakers to attend young child clinics. Stakeholders including WFP should scale up cash distribution for food to more households on cash distribution.