

FACTORS ASSOCIATED WITH OCCURRENCE OF DIARRHOEA IN CHILDREN AGED LESS THAN 5 YEARS IN UGANDA: A CASE STUDY OF SEVEN TOWNS ON THE SHORES OF LAKE VICTORIA

BY OKUA, W. BOB B.A. (SS) (Mak) 2008/HD15/12950U

A DISSERTATION SUBMITTED TO THE GRADUATE SCHOOL IN PARTIAL FULFILMENT OF THE REQUIREMENTS FOR THE AWARD OF THE DEGREE OF MASTER OF ARTS IN POPULATION AND DEVELOPMENT OF MAKERERE UNIVERSITY

ABSTRACT

This study assessed the socio-demographic, environmental and behavioural factors associated with the occurrence of childhood diarrhoea using already existing cross-sectional data from the 2006/07 Uganda Urban Inequities Survey (UIS) for Water and Sanitation obtained from Uganda Bureau of Statistics (UBOS) on 7 secondary towns along the shores of Lake Victoria in Uganda namely; Bugembe, Ggaba, Kyotera, Masaka, Mukono, Mutukula, and Nyendo. The study analysed 4228 children aged less than 5 years at the time of the survey of who 2149 (50.8%) had diarrhoea in the 2 weeks preceding the survey.

At the bivariate level, the results showed that the association between occurrence of diarrhoea and age of child, mothers'/caretakers' level of education, type of toilet facility, sharing toilet facilities with other households, presence of a hand washing place in or near the toilet, treating drinking water and disposal of household solid wastes were all statistically significant (p < 0.05). On the other hand, the association between occurrence of diarrhoea and age of the mother/caretaker and between occurrence of diarrhoea and source of drinking water were not statistically significant (p>0.056).

At multivariate level, the odds of a child aged less than 5 years in a household not sharing toilet facilities having diarrhoea is about 0.7 times the odds of a child in a household sharing toilet facilities having diarrhoea (p = 0.006). The odds of a child aged less than 5 years in a household that treats their drinking water to make it safer having diarrhoea are reduced [OR: 0.56, p = 0.004]. The odds of a child aged less than 5 years whose mother/caretaker has primary level education having diarrhoea increased [OR: 1.14, p = 0.567] while the odds for a child whose mother/caretaker has secondary level education are reduced [OR: 0.89, p = 0.596].

Interventions targeting control of diarrhoeal diseases need to be promoted through inter-sectoral collaboration rather than isolated ventures.