J Nutr Food Sci 2018, Volume 8
DOI: 10.4172/2155-9600-C11-084

Causal analysis of under-nutrition in Jeju and Melka Belo districts of Oromia region of Ethiopia

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Statement of the problem: Under-nutrition has been one of the main health problems in Ethiopia. The poor nutritional status in children and women is a consequence of multiple factors. These are due to factors related to inadequate nutrient intake and illness as well as underlying conditions, which are in turn shaped by factors related to economic, social and governance conditions. World Vision Ethiopia has been working in Jeju and Melka Belo Woredas for decades in implementing various emergency relief and development projects. However, the districts faced concurrent malnutrition problems over the past years and often classified as hotspot priority 1 or 2. Therefore, the present study was designed to identify the root causes of malnutrition so as to draw relevant conclusion and recommendation having a local causal model of malnutrition in these two Woredas.

Objective: To assess the magnitude of acute and chronic malnutrition in children 6-59 months and to identify the contributing factors affecting nutritional status as well as generate evidence-based response plan to address determinants of under-nutrition.

Methodology & Theoretical orientation: Nutrition causal analysis (NCA) methods employed using quantitative and qualitative data collection. The quantitative NCA household questionnaire was used to collect information on key risk factors. Standardized monitoring and assessment of relief and transition methodology (SMART) used for cluster selection and anthropometry data entry and analysis. A total of 640 households were included. In addition, 20 key informant interviews and 13 focused group discussion as well as secondary data and literature reviews were performed.

Result: The result of the SMART study showed that the assessed areas presented a high prevalence of malnutrition. The prevalence of global acute malnutrition (GAM) was estimated at 16.4% (95% C.I: 11.6- 22.7%) for all the study area (Jeju and Melka Bello), with SAM 4.1 % (1.8 - 9.0 95% C.I.). The prevalence of stunting was 33.2% (29.3 - 37.3 95% C.I). In regarding with the predisposing factors for under-nutrition, 54.8% of mothers expressed and disposed colostrum thinking that not good for the child. More than 77.5% of children introduced complementary feeding late and 42.5% of mothers reported that they reduced the frequency of breastfeeding during illness. The mean dietary diversity score found to be 4.9 out of the 12 food groups in 24 hours preceding the survey. More than 94% of children never consumed meat and meat products. Similarly, the consumption of vegetables and fruits were among the least, 30% and 23.4%, respectively. More than 35% of participants' drinking water from unprotected sources and 62.5% reported that they did not treat the water. About 56% of the surveyed households reported that they had farmland size less than 1 hectare.

Conclusion & Significance: In the current study, the factors that are significantly related with wasting and stunting are economic and care factors such as farm land size, source of food through own production and livestock ownership and feeding of colostrum and complementary feeding and access to clean water and sanitation facilities which need to be given due attention to define priorities for action.

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