Determinants of Long Acting Reversible Contraception Utilization among Women (15-49) in Uganda: Analysis of 2016 PMA2020 Uganda Survey

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Abstract: Background: The Ugandan national health policy and the national population policy all recognize the need to increase access to quality, affordable, acceptable and sustainable contraceptive services for all people but provision and utilization of quality services remains low. Two contraceptive methods are categorized as long-acting temporary methods: intrauterine contraceptive devices (IUCDs) and implants. Copper-containing IUCDs, generally available in Ministry of Health (MoH) family planning programs and is effective for at least 12 years while Implants, depending on the type, last for up to three to seven years. Uganda's current policy and political environment are favorable towards achieving national access to quality and safe contraceptives for all people as evidenced by increasing government commitments and innovative family planning programs. Despite the increase of modern contraception use from 14% to 26%, long acting reversible contraceptive (LARC) utilization has relatively remained low with less than 5% using IUDs & Implants which in a way explains Uganda's persistent high fertility rates. Main question/hypothesis: The purpose of the study was to examine relationship between the demographic, socio-economic characteristics of women, health facility factors and long acting reversible contraception utilization. Methodology: LARC utilization was investigated comprising of the two questions namely are you or your partner currently doing something or using any method to delay or avoid getting pregnant? And which method or methods are you using? Data for the study was sourced from the 2016 Uganda Performance Monitoring and Accountability 2020 Survey comprising of 3816 female respondents aged 15 to 49 years. The analysis was done using the Chi-squared tests and the probit regression at bivariate and multivariate levels respectively. The model was further tested for validity and normality of the residuals using the Sharipo wilks test and test for kurtosis and skewness. Results: The results showed the model the age, parity, marital status, region, knowledge of LARCs, availability of LARCs to be significantly associated with long acting contraceptive utilization with p value of less than 0.05. At the multivariate analysis level, women who had higher parities (0.000) tertiary education (0.013), no knowledge about LARCs (0.006) increases their probability of using LARCs. Furthermore while women age 45-49, those who live in the eastern region reduces their probability of using LARCs. Knowledge contribution: The findings of this study join the debate of prior research in this field and add to the body of knowledge related to long acting reversible contraception. An outstanding and gueer finding from the study is the non-utilization of LARCs by women who are aware and have knowledge about them, this may be an opportunity for further research to investigate the attribution to this.

Keywords: contraception, long acting, utilization, women (15-49)

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