

# CONTRACEPTIVE USE AMONG GIRLS AND WOMEN OF REPRODUCTIVE AGE 15-49 YEARS IN 9 HIGH-BURDEN DISTRICTS



**HEROES FOR GENDER TRANSFORMATIVE ACTION**

Supporting Community Solutions for Sustainable Health Outcomes

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## INTRODUCTION

Most abortions are the result of unintended pregnancy. In Uganda, 52% of pregnancies are unintended, and about a quarter of these unintended pregnancies end in abortion each year. The integrated sexual health program (Heroes4GTA) is a four-year program in 9 high burden districts that conducted a survey in December 2021 to provide insights on family planning knowledge among girls and women of reproductive age 15-49 years.

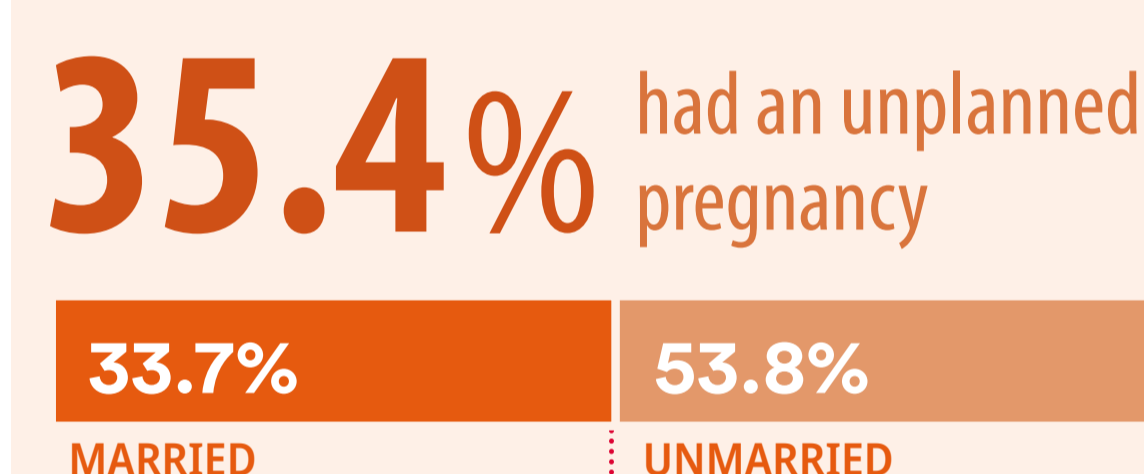
## OBJECTIVES

To examine the contraceptive uptake among married and unmarried girls and women of reproductive age 15-49 years in 9 high-burden districts

## METHODOLOGY

A cross-sectional mixed method design using quantitative and qualitative data collection techniques was conducted in 9 districts using a structured questionnaire administered using face-to-face interviews on 4,362 girls and women aged 15-49 years, identified through simple random sampling.

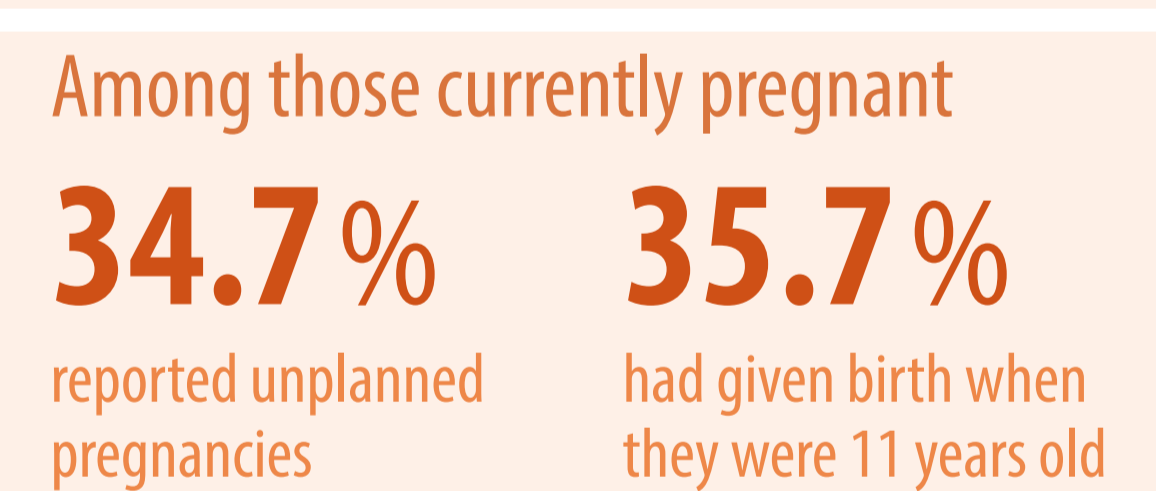
## KNOWLEDGE OF CONTRACEPTIVE USE



The sexually active unmarried were significantly less likely to plan a pregnancy  
**OR 0.436 | p-value 0.004 95% CI (0.246-0.772)**



The sexually active unmarried were significantly less likely to plan a pregnancy  
**OR 0.360 | p-value 0.000 95% CI (0.303-0.426)**



## ATTITUDES ON CONTRACEPTIVE USE

“Condoms are easily got and affordable.”

FGD, Women, Bugiri District

“Sometimes we may produce very fast, and we need to have some spacing in children.”

FGD, Women Kalangala

“A woman can also choose a condom because our husbands don't like our wives to use other family planning methods.”

FGD, Men, Bugiri

## PRACTICES TOWARDS CONTRACEPTIVE USE

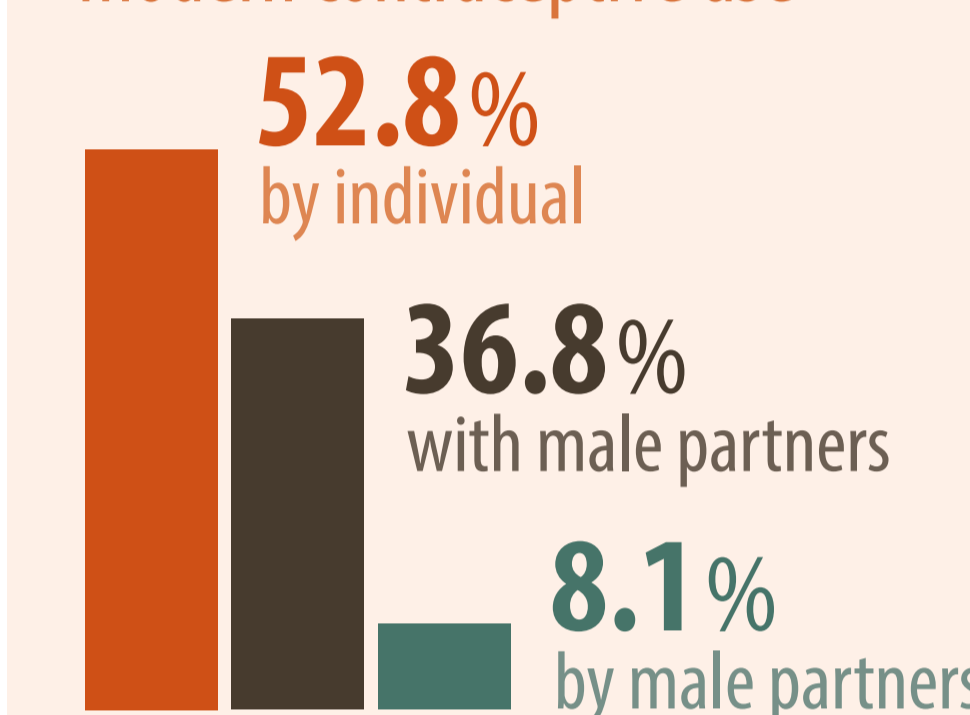
The survey found the proportion of girls and women demonstrating self-efficacy to negotiate safe sex is low



**ONLY 47.6%** of the sample have self-efficacy to use condoms



Male support for contraceptives in making decisions around modern contraceptive use



## BARRIERS TOWARDS CONTRACEPTIVE METHOD USE

Patriarchal norms and gender discriminatory community practices:

“I have a neighbor in our community, the moment his wife takes 5 months after delivery without conceiving again, it becomes a tug of war. He will beat her up daily until she conceives again. He will shout at the wife claiming she went in for contraceptives and yet he needs children. So, it's the men who are the biggest hindrance to their and their spouse's uptake of contraceptives.”

FGD, Mayuge

Misconceptions and myths in the community about the safety of contraceptives. There are misconceptions that modern contraceptives lead to the deformation of unborn children, barrenness, or infertility among others. Such misconceptions hinder some women to use these contraceptives.

“They are told that when you use contraceptives, you will have deformed children. So, the women just sit back and produce up to the end of time.”

FGD, Kalangala

## CONCLUSION

Meeting women's unmet contraceptive needs is established to be high. There need to help women avoid unintended pregnancies despite the barriers that continue to exist for adolescents and women adults when it comes to contraceptive use these include, but are not limited to access to awareness, and knowledge. The IUD remains the first-line contraceptive method accessible by communities. This study shows that despite awareness about modern contraceptives, support for decision-making by men, and choice of contraceptives, adequate knowledge is lacking among girls and women regarding its utility.

## RECOMMENDATIONS

The results of this study highlight the importance of committed and consistent comprehensive contraceptive education interventions for girls and women. Enhanced contraceptive options Counselling can help providers ensure that communities make well-informed decisions about contraceptive methods, by engaging men to support women thus improving their quality of life.

## ACKNOWLEDGMENTS

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