

FACTORS AFFECTING THE UTILIZATION OF ANTENATAL CARE SERVICES BY WOMEN IN KARAMOJA SUB-REGION IN UGANDA: CASE OF MOROTO AND KOTIDO DISTRICTS

ABSTRACT

Despite the government efforts to increase the access and use of essential maternal care services such as Antenatal care services, the number of women utilizing these ANC services has not increased most especially in the rural areas. The general objective of this study was to determine the factors affecting the utilization of ANC among women in Karamoja region, case of Kotido and Moroto districts.

Secondary data was used, which data was collected through a stratified two-stage cluster sampling design by monitoring and evaluation project of PEPFAR in Uganda 2016. In each of the districts, Moroto and Kotido, the sub-counties were treated as strata from which 19 mothers with children aged 0-11 months were randomly selected. Villages were selected using probability proportional to size sampling and households were sampled using a simple sample technique at the second stage. Overall, 228 mothers were selected from each district.

The data obtained was analyzed using STATA at two stages, the uni-variate and bivariate. In analysis, descriptive statistics, Pearson Chi-square, and ANOVA were used to find the relationship between the number of ANC visits and the various explanatory variables (age, marital status, distance to the health facility, partner involvement, education level, knowledge of HIV risk reduction towards baby and Antenatal care education).

Bivariate analysis revealed that the number of ANC visits a woman living in Karamoja made was highly influenced by education level of women ($p < 0.05$) except their age, distance to the health facility, marital status, partner involvement, knowledge of HIV risk reduction towards baby and Antenatal care education.

Multiple regression analysis was carried out with the logit as the link function.

Table 1: Results from the Logit model indicating the relationship between number of ANC visits and some selected explanatory variables

Explanatory variables	Odds Ratio	Standard error	$p > z$
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Whether the risk of transmitting the HIV virus from an infected mother to her child can be reduced				
Yes *	1.0000			
No	0.3494	0.1247		0.003
Whether mother received ANC education during visits				
Yes*	1.0000			
No	0.5206	0.2550		0.183
Marital status				
Cohabiting*	1.0000			
Married	3.3981	2.0629		0.044
Single	3.5684	2.7705		0.101
Distance to clinic				
Less than 1 km*	1.0000			
1 to 5 km	0.9526	0.3458		0.894
Over 5 km	0.4864	0.2700		0.194
Do not know	0.6027	0.3428		0.373
Education level				
Never attended*	1.0000			
Incomplete primary	0.2439	0.1926		0.059
Complete primary (and above)	1.4208	0.1651		0.037
Age				
15 – 29 years*	1.0000			
30 – 64 years	0.5078	0.1643		0.036

*Source: Secondary data and *implies the reference category*

As indicated in Table 1, there was a significant relationship between knowledge of HIV risk reduction towards the baby of a woman and the number of ANC visits with p-value = 0.003 at 5% level of significance. Women without knowledge of ways to reduce the risk of HIV transmission from mother to the baby were 65% less likely to attend at least 4 ANC visits as compared to women with the knowledge of ways to reduce the risk of HIV transmission from mother to the baby.

Marital status of a woman affects the number of ANC visits completed since the p-value(0.044) is less than 0.05. Women who were married were 3.4 times more likely to receive 4 or more ANC visits compared to women who were cohabiting.

The findings presented in Table 1 reveal that there was a significant relationship between education level of a woman with p-value = 0.037 and the number of ANC visits attended. Women who attained primary education and above were 1.4 times more likely to receive 4 or more ANC visits compared to those who attained any education.

There was a significant relationship between age of a woman and the number of ANC visits with p-value = 0.036 at 5% level of significance as shown in Table 1. The odds ratio of ANC for the older women (30 – 64 years) was 0.5078 which means that older women were 49.22% less likely to receive 4 or more ANC visits compared to the young women (15 – 29 years).

Some variable were statistically insignificant probably because their frequencies of ANC visits made don't vary across their various categories such as ANC education received by a woman, and distance to the health facility.

Based on the findings, the government should encourage Girl-child education to empower women to handle issues concerning their health as an urgent matter and also avail them with knowledge about the goodness that comes with them obtaining the maternal services. Further still, community leaders should encourage all women who are pregnant to attend ANC regardless of their age. This is because ANC will help the doctors discover any complications and be able to treat them before it's too late.