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Utilization of Contraceptives and Associated Factors among Students of Kampala International University-Western Campus Ishaka, Bushenyi District, Uganda

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ABSTRACT

The aim of this study was to determine the utilization of contraceptives and associated factors among students of Kampala International University-Western Campus Ishaka, Bushenyi District, Uganda. A descriptive crosssectional study design was used. A structured questionnaire was used to collect data from 136 final-year students from the School of Allied Health Sciences, School of Engineering and Applied Sciences and Faculty of Business and Management. The majority 112 (82.4%) of the respondents reported that they had ever used contraceptives and 95 (69.9%) reported that they were currently using contraceptives. The majority 118(86.6%) of the participants have ever had sex and among them, half 59(50.0%) had their first sex when they were above 20 years. The majority 81(68.6%) reported that they first used contraceptives when they were above 20 years and the type of contraceptives they used was condoms (52.5%). Most 66(48.5%) of the participants always use contraceptives while 59 (43.4%) seldom use and 56 (41.1%) of them stated that they use contraceptives when their partners are in their unsafe days. Concerning the knowledge about contraceptives, most 51(37.5%) reported that contraceptives are important to prevent pregnancies, and STDs and to promote child spacing. Most 51(37.5%) of the participants preferred to use condoms while 37(27.2%) preferred to use safe day methods. Regarding their reasons for their preferred contraceptives, 55(40.4%) said because they were affordable and 15(36.6%) indicated that their reason for not using contraceptives is to enjoy sex. Stakeholders should design, launch and implement inclusive youth-friendly services, adolescent sexual and reproductive health programs prioritizing the use of contraceptives, students' empowerment in regard to sexual rights and reproductive health, behavioural change communications, and create an enabling environment for contraceptive use.

Keywords: Sexual intercourse, Unintended pregnancy, Contraceptives, Condoms.

INTRODUCTION

Over 100 million acts of sexual intercourse take place each day in the world, resulting in around 3 million conceptions of which 50% are unplanned and 25% definitely unwanted [1]. The proportion of young women reporting unintended pregnancy and unmet need for contraception remains high in developing countries. Unintended pregnancies are associated with increased risk of unsafe abortions, maternal morbidity and mortality [2, 3]. According to the World Health Organization (WHO), the lifetime risk of death due to pregnancy is 1:22 in sub-Saharan Africa, with adolescents facing a higher risk of morbidity and mortality than older women. Apart from various social and psychological challenges, unplanned pregnancies affect students' objectives of achieving academic success [4]. In order to avert unintended pregnancies and consequent adverse outcomes, contraceptive use has been prioritized as a key intervention [5]. Improving the universal access to sexual and reproductive health services including contraceptives was a key target of the Millennium Development Goals [6]. Contraceptives are methods

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or devices used to prevent pregnancy. There are two types or methods, of contraceptives, modern and traditional methods. Modern methods include clinic and supply methods such as the pill, intrauterine device (IUD), condom and sterilization while traditional methods include periodic abstinence (rhythm), withdrawal and folk methods [7]. In 1960s, the hormonal oral contraceptives were introduced and since then, the oral contraceptive pills have been used by over 200million ladies worldwide. More than half of the world's population is less than 25 years old and approximately 85% of this demographic segment live in low- or middle-income countries. The sexual behavior of young people within this age bracket has become a crucial, social and public health concern, especially with regard to unintended pregnancies and sexually transmitted diseases [8]. The World Health Organization (WHO) estimated an annual total of 333 million new STD infections in adults [9]. Globally, it is estimated that; 34 million people are living with HIV worldwide with a greater burden in sub-Saharan Africa and especially in young women [10-13]. An estimated 536 million (16.5%) sexually active adults between the ages of 15 and 49 years were infected with HSV-2 in 2003 [14]. Research studies conducted worldwide amongst university students, have shown several factors contributing to the non-utilization of contraceptives. These were, amongst others, lack of knowledge and awareness, age, culture, ethnicity, religion, poor access to contraceptive services, peer pressure, sources of information, alcohol and substance abuse and lack of partner support [15, 16]. In Uganda, the government created its first national population policy with the aim, amongst others, to ensure that family planning services were accessible to people. However, the total fertility rates (TFR = 6.2) still remains the highest in the world with the median age at first sexual intercourse being 16.8 years, an age which is considered to be vulnerable to sexual and reproductive health challenges. Persistent high fertility levels have partly been attributed to high proportion of adolescents starting child bearing at an early age [17]. This implies that on average women give birth to 7 children in their whole reproductive life span [14]. With the increasing number of unplanned pregnancies and sexually transmitted diseases reported among adolescents, it is important to investigate the factors that could influence the utilization of contraceptives. This study therefore determined the factors influencing the utilization of contraceptives among students specifically those studying at Kampala International University-Western Campus Ishaka, Bushenyi District, Uganda.

METHODOLOGY

Study design

The study design was a case study. It used both quantitative method in of data collection.

Area of Study

The study was conducted at selected schools and faculties in Kampala International University western campus located in Ishaka, Bushenyi district.

Study population

The study population consisted of students in their final year of study at Kampala international university-western campus.

Inclusion criteria

All students (male and female) who were pursuing a bachelor's degree and are in their final year of study in school of School of Allied Health Sciences (SAHS), School of Engineering and Applied Sciences (SEAS) and faculty of Business and Management (FB&M) and consented to participate in the study.

Exclusion criteria

- i. Students from other schools and faculties or not in their final year of study.
- ii. All students (male and female) who were in their final year of study in School of Allied Health Sciences (SAHS), School of Engineering and Applied Sciences (SEAS) and faculty of Business and Management (FB&M) who did not consent to participate in the study.

Sample size Determination

Total number of registered students pursuing bachelor degrees in each sampled faculty or school constituted the sample size. The students' number was obtained from the administrators of the faculties/schools.

Table 1: Showing the number of students enrolled for the study

S/N	School/Faculty	Number of finalists/school and faculty
1	SAHS	50
2	SEAS	48
3	FB&M	38
	Total (sample size)	136

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Sampling technique

The schools and faculties and Participants were purposively sampled. The schools and faculty were sampled to represent students of different study backgrounds or disciplines. The participants were mainly finalists pursuing backelor degrees at the various sampled schools and faculties.

Data collection team Pre-testing of questionnaires

Four research assistants were recruited help in the data collection. The questionnaires were pre-tested among 20 students of school of pharmacy who were not sampled for this study.

Data analysis and presentation

Data was edited, coded and checked for consistency. It was then processed and analyzed to generate useful information using Microsoft office Excel and Statistical package for social sciences (SPSS).

Ethical consideration

An introductory letter was obtained from the faculty of clinical Medicine & Dentistry KIU western campus was collected and presented to the various Deans of the sampled faculties for permission to access the students. Respondents were first informed of the research to get then their consent.

RESULTS Socio-Demographic Characteristics of the participants Table 2: Showing Socio-Demographic characteristics of students (participants)

Variable	Category	Frequency (n=136)	Percentage (%)
Age (years)	18-21	32	23.6
	22-25	79	58.0
	>25	25	18.4
Gender	Male	72	52.9
	Female	64	47.1
Marital Status	Single	92	67.7
	Married	12	8.8
	Cohabiting	32	23.5
School/Faculty	SAHS	54	39.7
	SEAS	42	30.9
	FB&M	40	29.4
Religion	Catholic	70	51.5
	Muslim	39	28.7
	Others	27	19.8

Majority 79 (58.0%) of the respondents were in the age bracket 22-25 years and were male (52.9%). Majority 92 (67.7%) of them are single, 70 (51.5%) were Catholics and most 54(39.7%) were in SAHS (table 2).

Prevalence of Contraceptives Use among Students of KIU-Western Campus Table 3: Showing the Prevalence of Contraceptives use among students of KIU-WC

Variable	Category	Frequency (n=136)	Percentage
Have you ever used	Yes	112	82.4
contraceptives	No	24	17.6
Do you currently use	Yes	95	69.9
contraceptives	No	41	30.1

Majority 112 (82.4%) of the respondents reported that they had ever used contraceptives and 95 (69.9%) reported that they were currently using contraceptives (table 3 & figure 2).

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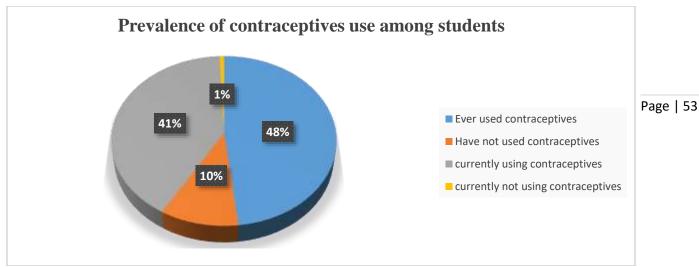


Figure 1: Prevalence of contraceptives use among students in KIU-WC

Behavioural factors influencing contraceptive use among students KIU-WC

Table 4: Showing the Behavioural factors influencing contraceptive use among students

Variable	Category	Frequency	Percentage (%)
Have you ever had sex? (N=136)	Yes	118	86.8
, ,	No	18	13.2
Age of first sex (n=118)	13-15	3	2.5
	16-18	20	16.9
	19-21	36	30.6
	>21	59	50.0
Age of first contraceptive use	13-15	-	-
(n=118)	16–18	8	6.8
	19-21	29	24.6
	>21	81	68.6
Type of contraceptives used at first	Condoms	62	52.5
sex (N=118)	Pills	17	14.4
	Injectable	-	-
	Safe Days	22	18.6
	Withdrawal	6	5.0
	None	11	9.3
Frequency of contraceptives use	Always	66	48.5
(n=136)	Sometimes	59	43.4
	I don't use	11	8.1
Condition for using contra-	When I have a new partner	36	26.5
ceptives (n=136)	When contraceptives is accessible	27	19.9
	During unsafe days	56	41.1
	When my partner insist we use	17	_12.5
Knowledge about contraceptives	Pregnancy prevention	35	25.7
use (N=136)	Prevention of STDs	27	19.9
	Promotion of child spacing	23	16.9
	All of the above	51	37.5

In table 4, results of the behavioural factors influencing contraceptives use among students shows that majority 118(86.6%) of the participants have ever had sex and among them, half 59(50.0%) had their first sex when they were above 20 years. Majority 81(68.6%) reported that they first used contraceptives when they were above 20 years and the type of contraceptives they used was condoms (52.5%). Most 66(48.5%) of the participants always use

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contraceptives while 59 (43.4%) seldom use and most 56 (41.1%) of them stated that they use contraceptives when their partners are in their unsafe days. Concerning the knowledge about contraceptives, most 51(37.5%) reported that contraceptives are important to prevent pregnancies, STDs and to promote child spacing.

Preference and Reasons for Contraceptives Use among Students KIU-Western Campus. Table 5: Showing distribution of the Preference and Reasons for Contraceptives Use among Students

Variable Category Frequency Percentage (%) Preferred Condoms 51 37.5 **Contraceptives** Pills 12 8.8 (n=136)Injectable Safe Days 37 27.2 Withdrawal 19 8.8 Others 13 9.6 None 11 8.0 Reason for: Affordability 55 40.4 Preferred Effective 21 15.4 Accessible contraceptives 27 19.9 Convenient 11 8.1 (n=136) Safe/Less Side Effects 13 9.6 None 9 6.6 Not To enjoy sex using 15 36.6 contraceptives Abstaining till marriage 8 19.5 Religion doesn't allow 6 14.6 (n=41)I trust my partner 4 9.8 My partner doesn't like 8 19.5 them.

Most 51(37.5%) of the participants preferred to use condoms while 37(27.2%) preferred to use safe day methods. Regarding their reasons for their preferred contraceptives 55(40.4%) said because they were affordable and most 15(36.6%) indicated that their reason for not using contraceptives is to enjoy sex (table 5 and figure 3).

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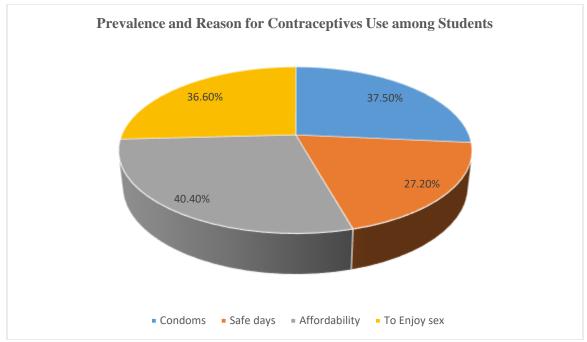


Figure 2: Preference and Reasons of contraceptives use among students in KIU-WC

DISCUSSION

Prevalence of Contraceptives use among students of KIU-WC.

In this study, the prevalence of contraceptives use among students in KIU-WC was 69.9%. These findings indicated that the use of contraceptives among students is encouraging considering the percentage of students who reported to be using them. Findings of this study is higher compared to findings from a study conducted in Ethiopia, where the prevalence of contraceptive use among the student was 20.9 % [18].

Behavioural Factors Associated with Contraceptives Use among Students in KIU-WC

Findings from this study shows that age of first sex, frequency of contraceptives use, type of contraceptives and knowledge about contraceptives are behavioural factors associated with contraceptives use among students. These findings agreed with the report of a study conducted among undergraduate students in South Africa, which found out that the knowledge of condom use to prevent sexually transmitted diseases was high at 91%. However, inadequate knowledge and awareness on some contraceptive methods was found [15]. The findings of the study showed that the respondents knew that contraceptives prevent pregnancies and this could compel them to use in fear of unwanted pregnancies and overwhelming early responsibilities.

Preference and Reasons for Contraceptives Use among Students KIU-Western Campus

In this study, most 37.5% of the participants preferred to use condoms and 40.4% of them said they preferred their preference because they were affordable. Findings of this study disagrees with report of a research done in Ghana including male respondents which stated their preference for pills as the main contraceptive methods to use other than condoms, vasectomy, IUD and Norplant [19]. About six out of 54 participants preferred a combination of two contraceptive methods, for instance, pills and condoms. The use of contraceptives like condoms, IUD, and other barriers not only prevent unintended pregnancies but also prevent HIV transmission [20, 21].

CONCLUSION

The prevalence of contraceptives use among students in KIU-WC was 69.9% which is higher than the national target of 50% in 2020. This implies that about 7 in every 10 students in their final year use one form of contraceptives or the other. Age of first sex, frequency of contraceptives use, type of contraceptives and knowledge about contraceptives are behavioural factors associated with contraceptives use among students. The most preferred contraceptives used by the students are condoms and their reason for the preference was because they were affordable.

RECOMMENDATIONS

Stake holders should Design, launch and implement inclusive youth friendly services, adolescent sexual and reproductive health programs prioritizing use of contraceptives, students' empowerment in regard to sexual rights

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and reproductive health, behavioral change communications, and create enabling environment for contraceptive use. Knowledge & awareness creation programs should engage religious leaders; exploit peer groups, magazines, media and schools as suitable platforms to increase contraceptive use among students of tertiary institutions.

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