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Postnatal care service utilisation and associated factors among multiparous women in Buyamba County, Rakai District Uganda: a community-based cross-sectional study

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Abstract

Background Despite advancements in the use of maternity care services, certain nations in sub-Saharan Africa continue to record unacceptable rates of maternal and perinatal morbidity and mortality, particularly in the postnatal period. This study aimed to assess the level of postnatal care service utilisation and associated factors among multiparous women in Buyamba County, Rakai District, Uganda.

Method A community-based cross-sectional study involving women who had two or more children was conducted in four sub-counties of Buyamba County. Study participants were recruited using a systematic sampling technique. A structured and pre-tested questionnaire was used to gather data. Descriptive, bivariate and modified poisson regressions were computed using STATA version 14. Statistical significance was considered at $p < 0.05$ and the strength of statistical association was assessed by prevalence ratios with 95% confidence intervals.

Result Out of 321 women who participated in the study, (81.9%) were married, (30.8%) were aged 35–44 years, (71.0%) attended antenatal care (ANC) during their previous pregnancy, (94.7%) delivered normally, and (94.4%) utilised postnatal care (PNC) services of which (67.2%) received immunisation for the children, (26.2%) acquired family planning counseling and (70.3%) had four or more PNC visits. Attending antenatal care (aPR = 1.750; 95% CI: 1.029–2.981), being aware of PNC services (aPR = 1.380; 95% CI: 1.016–1.875), receiving PNC education (aPR = 1.421; 95% CI: 1.048–1.923), having a normal delivery (aPR = 1.538; 95% CI: 1.055–2.241), and residing within 5 km of a health facility (aPR = 1.282; 95% CI: 1.006–1.632) were significantly associated with a higher likelihood of utilising postnatal care services. In contrast, being younger in age (aPR = 0.511; 95% CI: 0.347–0.752) and having a husband without formal education (aPR = 0.622; 95% CI: 0.454–0.853) were significantly associated with a lower likelihood of postnatal care services utilisation.

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