

**Factors associated with low utilization of modern contraceptives among postnatal mothers at Entebbe Regional Referral Hospital, Wakiso district.**

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**Abstract**

**Background**

Globally, it is estimated that about 41.2% of women in the postpartum period use modern contraceptives worldwide. The study assessed the utilization of modern contraception and associated factors among postnatal mothers at Entebbe Regional Referral Hospital.

**Methodology**

Adopted a facility-based quantitative cross-sectional research design in Entebbe Regional Referral, located in the central business district of Entebbe town, in Wakiso District. The study included postnatal mothers who were at the postnatal ward of Entebbe Regional Referral Hospital at the time of data collection, and a sample of 50 respondents.

**Results**

(48%) were Catholics. (46%) had attended secondary level. (90%) were married. (65%) knew that the main purpose of using modern contraceptives was to prevent pregnancy. (80%) had resumed their menses. (88% had resumed sexual activity. (68%) noted that postnatal mothers were not safe to use modern contraceptives during breastfeeding. (60%) were not using modern contraception. (60%) were not using modern contraceptives at the moment. (52%) were encouraged to use contraceptives by the health workers. (70%), Their culture did not advise them to use contraceptives during breastfeeding. (64%) lived between 0-119km away from the health facility. (76%) delivered by spontaneous vertex delivery. (92%) delivered from the health facility. (72%) rated the attitude of the health workers as welcoming. (82%) had access to family planning services from the health facility. (54%) spent a long time at the health facility.

**Conclusion**

Utilization of modern contraceptives was very low, and these factors were: parity, having resumed sexual intercourse, resumption of menses, normal vaginal delivery, poor perception of modern contraceptives, and lack of counselling on modern contraceptives during postnatal visits.

**Recommendation**

The Hospital administration of Entebbe Regional Referral should consider intense counselling about modern contraception, especially when mothers come for YCC and ANC services.

**Keywords:** Utilization of Modern contraceptives, Family planning, Postnatal mothers, Entebbe regional referral hospital.

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**Background**

Globally, it is estimated that about 41.2% of women in the postpartum period use modern contraceptives worldwide. In addition, the global prevalence of unmet need for contraception among postpartum mothers is 48.5%. In many low- and middle-income countries (LMIC), an overwhelming 91% of women who have recently given birth express a strong desire to avoid becoming pregnant again for at least a year following childbirth (Pasha et al., 2015). However, in East Africa, about 39.5% of postpartum women

use modern contraceptives, with about 73.7% of those in Uganda (Dev et al., 2019). At Entebbe Regional Referral Hospital (ERRH), the use of modern contraceptives among postnatal mothers is 17.9% of the total mothers who delivered, according to the hospital records.

Family planning is the practice of spacing children that are born using both natural (traditional) and modern (artificial) birth control methods (UNFPA, 2018). On the other hand, postpartum

contraception is defined as the initiation of contraceptive methods within the first 12 months following delivery. It is crucial for the attainment of Sustainable Development Goal (3). Ensuring access to all people's preferred family planning methods advances several human rights, as well as bringing significant health and other benefits (WHO, 2020).

The use of modern contraception among postnatal mothers is crucial to prevent unintended pregnancies and to space births. Child spacing for at least 2 years reduces infant mortality by 50%. It has been observed that closely spaced pregnancies within the first year postpartum are the riskiest for mothers and children, resulting in increased risks for adverse outcomes. It is therefore important to initiate modern contraception for postnatal mothers as early as possible.

However, in Uganda, the current prevalence of modern contraception use among postnatal mothers is at 15.4%. Literature suggests a vast number of factors associated with the utilization of modern contraception among women in the postpartum period. They include past use of family planning methods, parity, cesarean delivery, age, level of education, and marital status, among others (Nakiwunga et al., 2022). According to the Uganda Demographic and Health Survey 2016, approximately 39% of women in Uganda reportedly used family planning. However, only 28% of those were using postpartum family planning methods in Uganda (U.B.O.S, 2016). The Government of Uganda, through the Ministry of Health and its development partners, has come up with different initiatives to ensure improved distribution, access, and utilization of modern contraception. In Wakiso district, it is evident that women are less likely to use modern contraceptives, and there is plausibility of data concerning contraceptive use among postnatal women (Arunda et al., 2023). To ensure improved maternal and child outcomes, it is crucial to understand the predictors of modern contraception utilization among postnatal mothers. Thus, the study assessed the utilization of modern contraception and associated factors among postnatal mothers at Entebbe Regional Referral Hospital.

### **General objective**

To assess the factors associated with low utilization of modern contraception among postnatal mothers at Entebbe Regional Referral Hospital.

### **Specific objectives**

To determine the individual factors associated with the low utilization of modern contraception among postnatal mothers at Entebbe Regional Referral Hospital.

To examine the community factors associated with the low utilization of modern contraception among postnatal mothers at Entebbe Regional Referral Hospital.

To assess the health facility-related factors associated with the low utilization of modern contraception among postnatal mothers at Entebbe Regional Referral Hospital.

## **Methodology**

### **Study design**

The study adopted a facility-based cross-sectional research design to collect data from many different postnatal mothers at a single point in time, which quickens the data collection process.

The study adopted a quantitative study approach.

### **Study area**

Entebbe Regional Referral is located in the central business district of Entebbe town, in Wakiso District, approximately 31.45km from Kampala District, which is a public hospital funded by the Uganda Ministry of Health. It has a total bed capacity of 254, and it provides family planning services, outpatient services, Immunization services, laboratory services, maternity services, and antenatal care services. The young child clinic at ERRH offers immunization services from Monday to Friday from 8:00 am to 3:00 pm, and they receive approximately 40 mothers in a day.

### **Study population**

The study included postnatal mothers who were at the postnatal ward or the young child clinic of Entebbe Regional Referral Hospital at the time of data collection.

### **Sample size determination**

The sample size was determined using the formula below;  
 $N = a^2bc / x^2$  (Keish and Leslie, 1967)

Where;

N=desired sample size.

a= standard normal deviation usually set at 1.96 which corresponds to 95% confidence level.

b = proportion of survey population with particulars under investigation and where it's unknown, 50% is used.

c = probability that the researcher will get a certain amount of error. 50% is considered to cater for that.

x = degree of accuracy which ranges from 0.01-0.1

Therefore, its:  $(1.96)^2 \times 0.5 \times 0.5 / (0.09)^2$   
118.57

~119 respondents.

However, due to financial and time constraints, a sample of 50 respondents was used

### **Sampling technique**

In this study, simple random sampling was used to recruit study participants. The simple random technique was chosen because of its simplicity and a reduced percentage of researcher bias.

### **Sampling procedure**

The study adopted a simple random sampling technique whereby numbers were written on pieces of paper and distributed to the mothers. Mothers who picked odd numbers were left out, and those who picked even numbers were included in the study.

### **Data collection**

Data was collected using the survey method in the form of semi-structured questionnaires since the goal was to obtain data from a targeted group of respondents at one point in time. One-on-one physical interviews were conducted with each of the participants.

### **Data collection tool**

A semi-structured researcher-administered questionnaire was used to collect data from postnatal mothers. The questionnaire consisted of a set of standardized numerical closed-ended questions with a fixed scheme, wording, and order of gathering information, owing to the limited time of data collection. The questionnaires were written in English; however, the data collection was interviewer-administered in English and also in the local language for Luganda Speakers. The tool was chosen because the study is quantitative and involved the use of numerical data and the expression of numerical results. It was also cheap and time-saving.

### **Data collection procedure**

The researcher went to ERRH, most especially to the young child clinic and postnatal ward through the staff, and postnatal mothers were identified and briefed about the research. It was highlighted that the sole purpose of the study was for academic purposes, and no payments or extra benefits of any kind were given to anyone. Participants' questions concerning the study were addressed, including briefing them about the inclusion and exclusion criteria of the study. The participants were then screened for eligibility, and those who met the criteria were included in the study and interviewed. Data was collected by the researcher herself, and she interviewed participants in designated clinical rooms and assured them of confidentiality.

### **Quality control**

Validity of the study was ensured by ensuring that only postnatal mothers who were present at the study site at the

time of data collection, and those who met the inclusion criteria and had fully answered the questionnaires, were accepted for result verification. In addition, participants were randomly included in the study to avoid researcher bias. Revised findings and questions from existing pieces of literature concerning the topic of study were carefully and precisely adapted into the questionnaire, and the questionnaire was thoroughly cross-checked by the supervisor for any errors. The researcher was trained in data collection methods before going into the field.

Reliability was ensured by pre-testing 10% of the sample size, Kajjansi HCIV, and their results were analyzed with the guidance of the supervisor and the methods and tools accordingly.

Regarding selection criteria, postnatal mothers who were at the postnatal ward or the young child clinic of Entebbe Regional Referral Hospital at the time of data collection were included. Those who were very ill and those who had postpartum mental illness were excluded from the study.

### **Data analysis and presentation**

Data was entered, cleaned, and analyzed using the Statistical Package for Social Sciences version 26 software. During analysis, descriptive statistics were used to summarize findings into means and standard deviations for numerical variables, and frequencies and percentages for categorical variables. The prevalence of modern contraceptive use was computed as a proportion. Binary logistic regression was used to assess the factors associated with low modern contraceptive use among postnatal mothers. Variables with p-values less than 0.05 were deemed significant at a 95% level of confidence.

### **Ethical Considerations**

The study was presented to the Kampala School of Health Sciences research committee for approval, and administrative clearance was obtained from the office of the director of Entebbe Regional Referral Hospital. The study participants answered the questionnaires from a specifically designated area at the study site and not in public places. Participation in the study was extremely voluntary, and participants were given enough time to decide whether or not to participate in the study, and they were informed that there would be no payments or extra benefits for participation. Participants signed a written informed consent form after a thorough explanation of the study to them to ascertain their voluntary participation in the study. Participants' names were not included on the questionnaire; instead, they used their initials to guarantee confidentiality.

**Results**

**Socio demographic characteristics of the participants**

**Table 1: Socio demographic characteristics of postnatal mothers at ERRH, Wakiso District**

Variables	Frequencies (n=50)	Percentages (%)
<b>Age.</b>		
17-30	37	74
31-41	13	26
<b>Tribe</b>		
Muganda	41	82
Others	9	18
<b>Religion</b>		
Anglican	18	36
Catholic	24	48
Islam	2	4
Others	6	12
<b>Marital status</b>		
Married	45	90
Single	3	6
Divorced/ widowed	2	4
<b>Education level</b>		
Primary level	16	32
Secondary level	23	46
Tertiary level	10	20
No formal education	1	2
<b>Mother's occupation</b>		
Housewife	16	32
Self-employed	21	42
Government employed	6	12

Subsistence farmer	7	14
<b>Husband's occupation</b>		
Self-employed	25	50
Government employed	14	28
Subsistence farmer	6	12
No husband	5	10

Table 1 shows that 50 participants were recruited with a 100% response rate. The mean age of the respondents was 27.26 years ( $\pm 5.11$ ), but about three-quarters (74%) were aged 17-30 years, and a few (26%) were aged 31-41 years. (82%) Of the participants were Baganda, and almost half (42%) of the participants were self-employed, and only 18%

belonged to other tribes. (48%) Of the participants were Catholics, and a few (4%) were Muslims. (46%) had attended secondary level, while only 2% had no formal education. (50%) of the spouses were self-employed, and only 10% had no spouses. (90%) were married, whereas only 4% were divorced/widowed.

### **Individual factors associated with the low utilization of modern contraception among postnatal mothers**

In narrative perspective all of the respondents (100%) had ever heard about modern contraceptives.

**Figure 1: Shows the distribution of respondents according to the main purpose of using modern contraceptives by postnatal mothers**

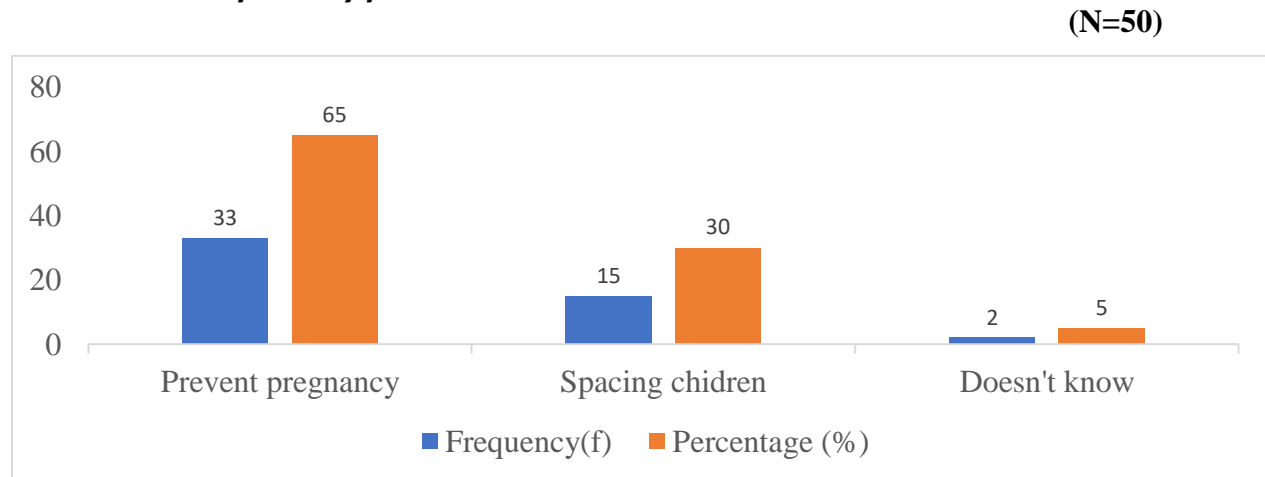


Figure 1 shows, (65%) knew that the main purpose of using modern contraceptives was to prevent pregnancy whereas the least of the respondent (5%) did not know.

**Figure 2: Shows the distribution of respondents according to whether they had resumed menses**

N=50

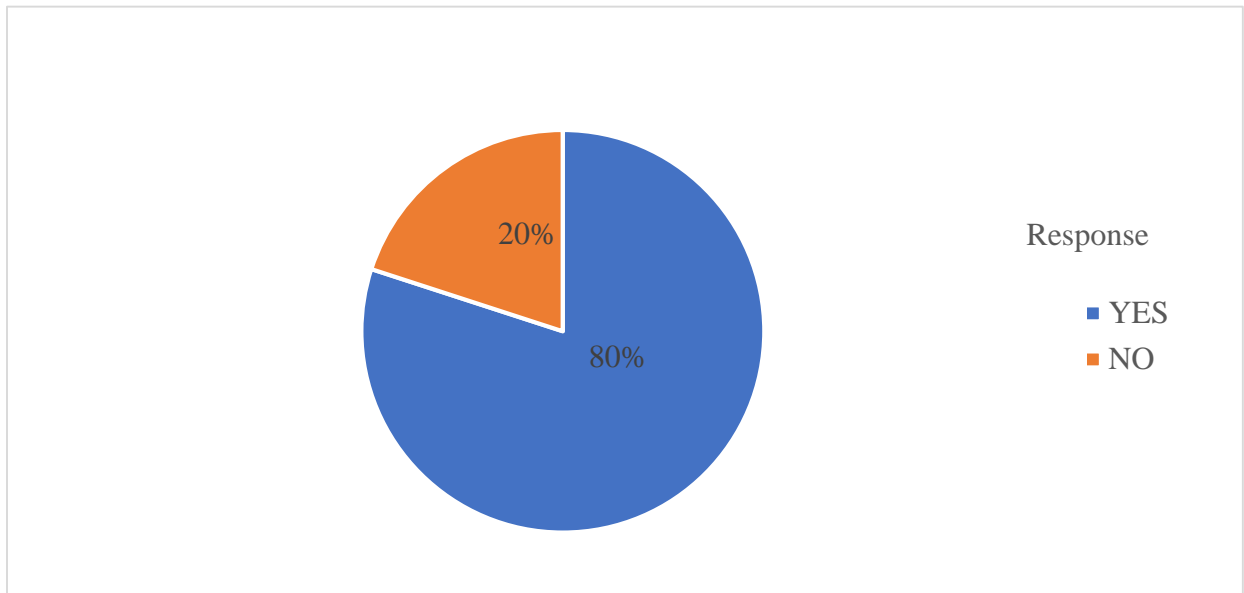


Figure 2: (80%) of the respondents had resumed their menses, whereas the minority (20%) had not resumed menses.

**Table 2: Shows the distribution of respondents according to whether they had resumed sexual activity (N=50)**

Response	Frequency (f)	Percentage (%)
Yes	44	88
No	6	12
<b>Total</b>	<b>50</b>	<b>100</b>

Table 2, (88% had resumed sexual activity whereas the minority (12%) had not resumed sexual activity.

**Figure 3: Shows the distribution of respondents according to their perception about the safety of using modern contraceptives during breast feeding (=50)**

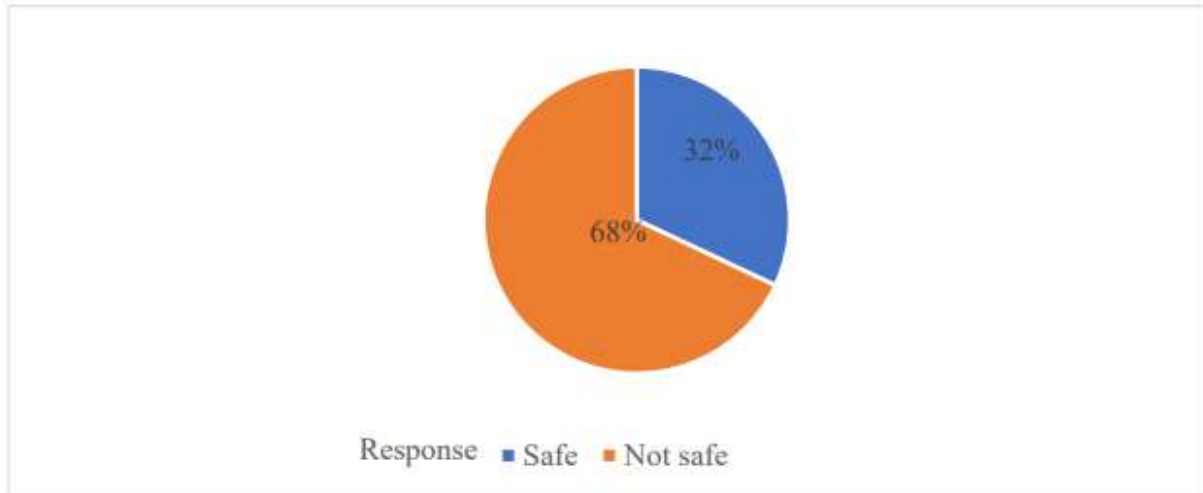


Figure 3, (68%) noted that postnatal mothers were not safe to use modern contraceptives during breastfeeding, whereas a minority (32%) noted that it was safe for postnatal mothers to use contraceptives.

**Figure 4: Shows the distribution of respondents according to whether they had ever utilized modern contraceptives**

(N=50)

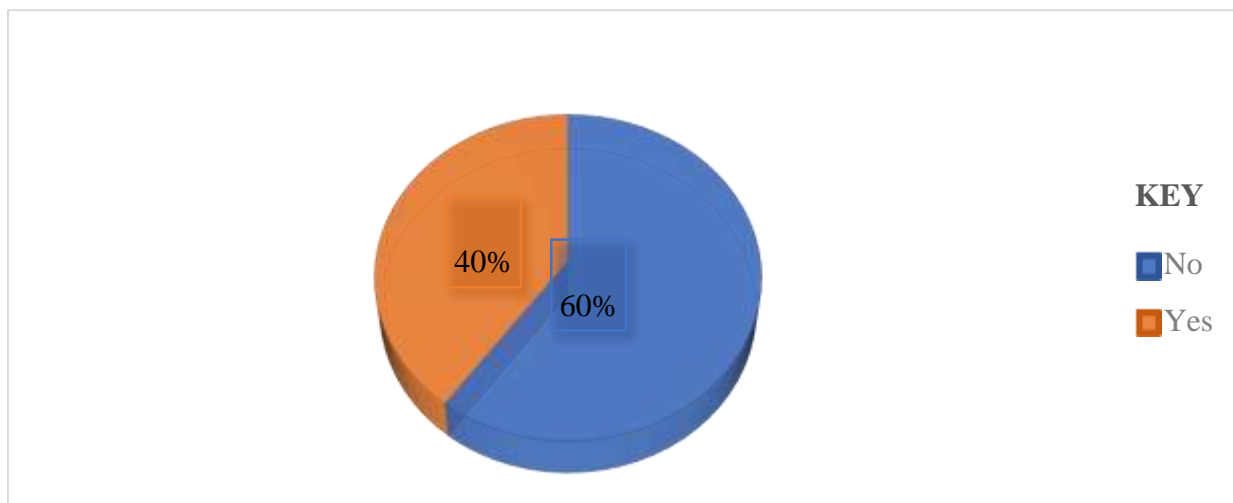


Figure 4, (60%) of the participants were not using modern contraception, whereas the least (40%) were using modern contraceptives.

**Figure 5: Shows the distribution of respondents who had ever used contraceptives according to the methods of modern contraceptives they had ever used**

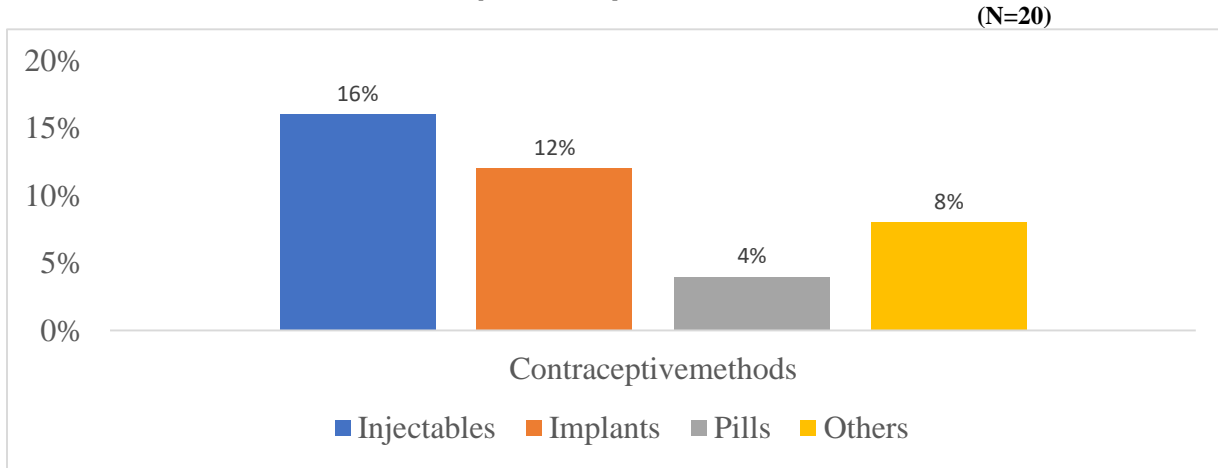


Figure 5, 60% were not using modern contraceptives at the moment, whereas the least (4%) used pills.

**Table 3: Shows the distribution of the respondents according to the reasons for not using modern contraceptives**

Reason	Frequency(f)	Percentage (%)
I don't like them	10	33.33
Husband disapproval	20	66.67
<b>Total</b>	<b>30</b>	<b>100</b>

Table 3 shows that 66.67% did not use them because of their husbands' disapproval, whereas the minority (33.33%) did not use contraceptives because they didn't like them.

### Community factors associated with the low utilization of modern contraception among postnatal mothers

**Table 4: Shows the distribution of respondent according to source of information about modern contraceptives**

Source	Frequency(f)	Percentage
Friends/Family	28	56
Media	22	44
<b>Total</b>	<b>50</b>	<b>100</b>

Table 4 indicates, (56%) got information about contraceptives friends and peers whereas the least (44%) got it from the media.

**Figure 6: Shows the distributions of respondents according to the respondents of use modern contraceptives**

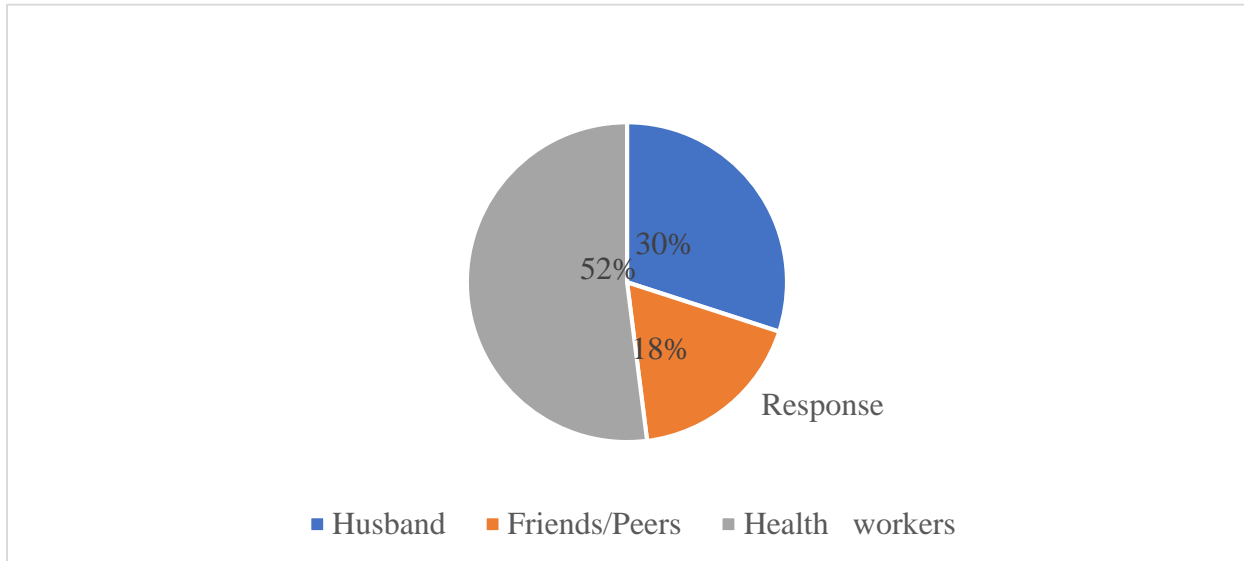
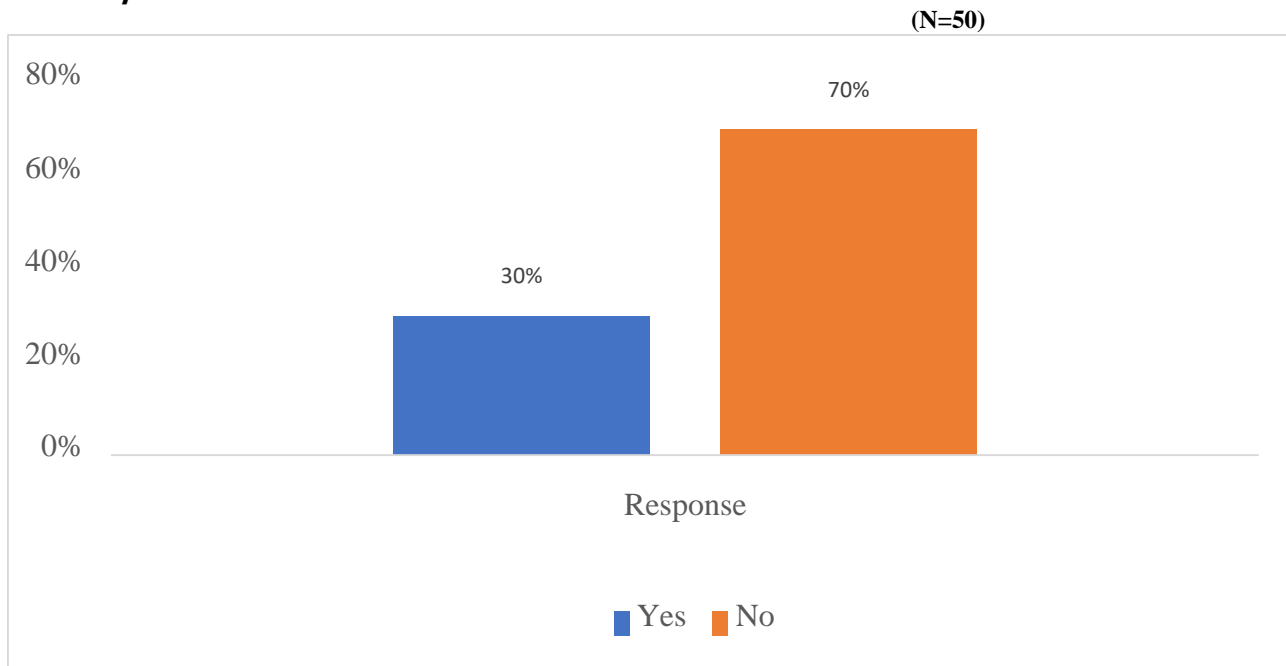


Figure 6, (52%) were encouraged to use contraceptives by the health workers, whereas the minority (18%) were encouraged by friends/peers.

**Figure 7: Shows the distribution of the respondents according to whether using modern contraceptives is advisable after birth in their culture**



In figure 7 (70%), their culture did not advise them to use contraceptives during breastfeeding, whereas a few of them (30%), their culture supports the use of modern contraceptives.

**Table 5: Shows the distribution of the respondents according to where they stay (N=50)**

Location	Frequency	Percentage (%)
Rural	12	24
Urban	38	76
<b>Total</b>	<b>50</b>	<b>100</b>

Table 5 shows 76% were from urban areas, whereas the minority (24%) were from rural areas.

**Health facility-related factors associated with the low utilization of modern contraception among postnatal mothers**

**Table 6: Shows the distribution of respondents according to their distance to the facility (N=50)**

Response	Frequency(f)	Percentage (%)
0-119	32	64
120 and above	18	36
<b>Total</b>	<b>50</b>	<b>100</b>

From table 6, 64% lived between 0-119km away from the health facility, whereas the minority (36%) lived beyond 120Km away from the health facility.

**Figure 8: Shows the distribution of respondents according to the mode of delivery (N=50)**

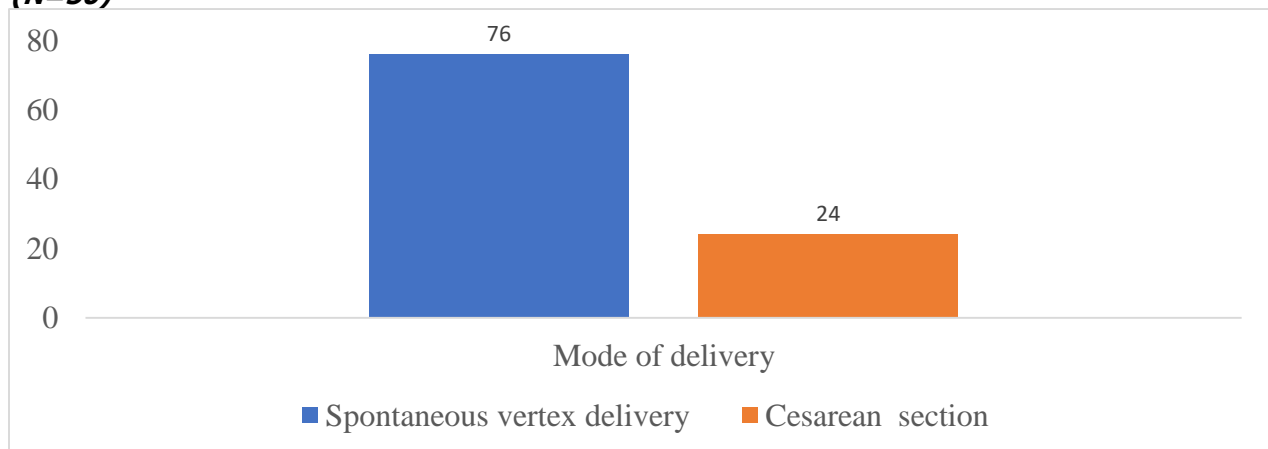


Figure 8 shows that 76% delivered by spontaneous vertex delivery, whereas the minority (24%) were delivered by cesarean section.

**Table 7: Shows the distribution of respondents according to their distance to the facility (N=50)**

Place	Frequency	Percentage (%)
Health facility	46	92
Home	4	8
<b>Total</b>	<b>50</b>	<b>100</b>

In Table 7, 92% delivered from the health facility, whereas the minority (8%) were delivered from home.

**Figure 9: Shows the distributions of respondents according to their perception of the attitude of health workers while receiving family planning services (N=50)**

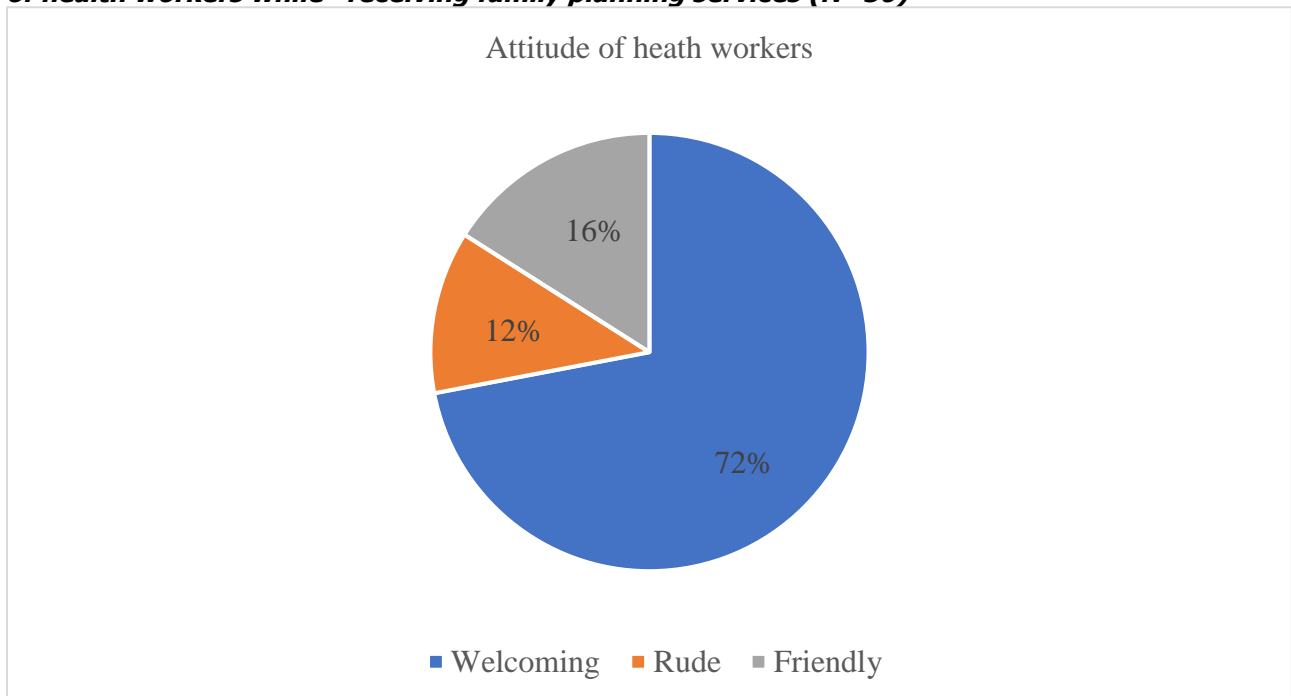


Figure 9, (72%) rated the attitude of the health workers as welcoming, whereas the minority (12%) found the health workers' attitude to be rude when they went for family planning services.

**Table 8: Shows the distribution of respondents according to their distance to the facility (N=50)**

Response	Frequency(f)	Percentage (%)
Yes	41	82
No	9	18
<b>Total</b>	<b>50</b>	<b>100</b>

Table 8, (82%) had access to family planning services from the health facility, whereas the minority (18%) never had access to family planning services from the health facility.

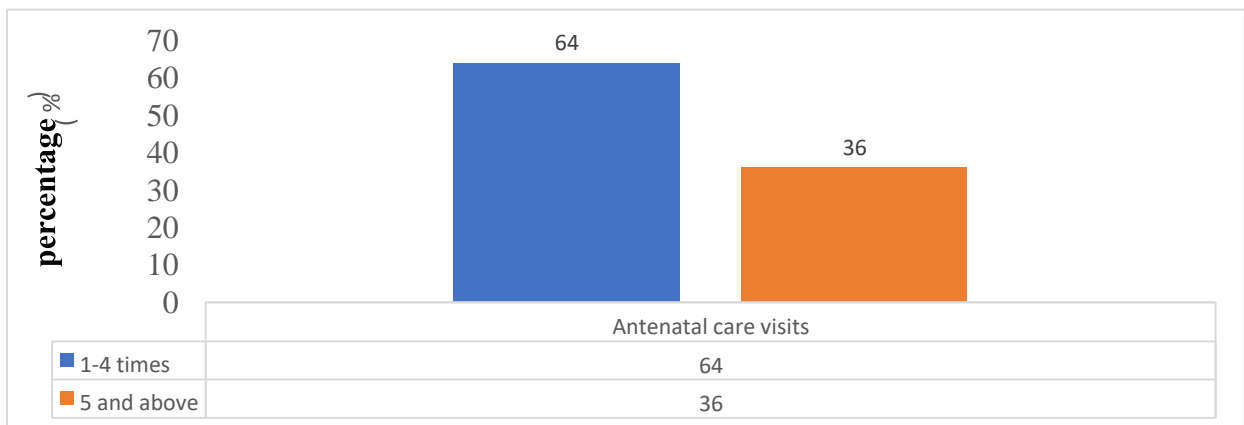
**Table 9: Shows the distribution of respondents according to the time spent at the health facility accessing family planning services (N=50)**

Response	Frequency(f)	Percentage (%)
Long	27	54
Short	23	46
<b>Total</b>	<b>50</b>	<b>100</b>

From table 9, 54% spent a long time at the health facility, whereas the least (46%) spent a short time at the health facility.

**Figure 10: Shows the distribution of respondents according to the antenatal visits they attended**

(N=50)



In figure 10, (64%) attended 1-4 antenatal visits whereas the minority (36%) of the respondents attended more 5 antenatal visits.

**Table 10: Shows the distribution of respondents according to whether they went for postnatal checkups**

(N=50)

Response	Frequency	Percentage (%)
Yes	15	30
No	35	70
<b>Total</b>	<b>50</b>	<b>100</b>

From table 10, (70%) of the respondents never went for postnatal whereas the minority (30%) went for postnatal checkups.

## Discussion

### **Individual factors associated with low utilization of modern contraceptives**

In this study, all of the participants (100%) had ever heard about modern contraception, but more than 60% of the respondents were not using modern contraceptives at the moment. This indicates that there's low utilization of modern contraceptives among postnatal mothers. This study was in line with a study done by Joseph et al (2022), where all respondents were aware of a minimum of one method.

In addition to the above, the majority of the respondents (65%) were using modern contraceptives to prevent pregnancies, and 30% wanted to space their children. This indicates that most of the postnatal mothers wanted to use modern contraceptives, but they may have many other limitations. These study findings were in agreement with those of Abebe (2023), where findings revealed that (41.8%) of the postpartum women wanted to space their next pregnancy and (33.7%) wanted to limit their family size. The study also showed that (88%) had resumed sexual activity and (80%) had resumed menstruation. This indicates that mothers resumed sexual activity early following resumption of menstruation. Besides that, utilization was low because most may not have felt the need for modern contraceptives or were using natural methods. These findings were not in line with the study done by Abebe et al. (2023), where most mothers who resumed menstruation and sexual activity were using modern contraceptives. Furthermore, the majority of the respondents (70%) were not approved to use modern contraceptives by their partners. This implies that mothers did not use modern contraceptives because their husbands did not approve. The study findings were consistent with the study done by Tesfu (2022), where the results showed that (56%) of postnatal mothers sought approval from their partners before using contraception.

### **Community factors associated with low utilization of modern contraceptives**

Interestingly, more than half of the participants (56%) received information on modern contraceptives from friends and family. This implies that respondents had inadequate sources of information about modern contraceptives. The study findings were not consistent with the study done by Adugna (2023), where findings revealed that (10.7%) from friends, and (10.4%) from family. Results also revealed that (70.0%) of the participants reported that contraceptive use is not culturally acceptable. This indicates that culture and beliefs shape the thinking and perceptions of the people towards the use of contraceptives, thus leading to low utilization. Services, and since most thought it was in line with the study done by Dasanayike (2018), where 10% of mothers believed cultural beliefs were unacceptable to use modern contraceptives, utilization was low. The study findings were not a deciding factor for contraception.

Nevertheless, most of the respondents (76%) lived in urban areas. This indicates that they could access modern contraceptives in nearby facilities. The study was in disagreement with a recent study done by Mahande(2020), where 21% of mothers from urban areas were most likely to use family planning methods during the postpartum period.

### **Health facility factors associated with low utilization of modern contraceptives**

In this study, (64%) of the participants lived within 119km from the health facility, and (54%) reported long waiting hours at the facility. This indicates that participants were near the facility and could spend more time waiting for services at the facility. This explains the fact that most women didn't utilize contraceptives because of the long waiting time, despite being near the facility. The study findings were in disagreement with the study done by Okech, Wawire, & Mburu (2019), where 10% of the respondents were living near, and a short waiting time favored utilization. Furthermore, most of the participants (72%) revealed that health workers were welcoming, and 82% reported that contraceptives were available at the facility. This indicates that the health workers were willing to provide the available modern contraceptives to clients. The study findings were not consistent with a study by Afolabi et al. (2015), where 51% of mothers reported increased availability of modern contraceptives.

Regarding ANC and PNC visits at the facility, (64%) attended 1-4 antenatal visits, and (70%) had never gone for Utilization of modern contraceptives among postnatal mothers at ERRH, Wakiso district, was very low. Factors associated with low utilization of modern contraceptives were: parity, having resumed sexual intercourse, resumption of menses, normal vaginal delivery, poor perception of modern contraceptives, disapproval by culture, place of residence, number of antenatal visits, and lack of counselling on modern contraceptives during postnatal visits. Addressing individual, community, and health facility barriers to modern contraceptive use is key to improving utilization.

### **List of Abbreviations and acronyms**

**ANC:** Antenatal Care

**BMC:** Biomedical

**ERRH:** Entebbe Regional Referral Hospital

postnatal checkups. This implies that few mothers attended routine antenatal checkups and were not counselled on modern contraceptives during postnatal visits. The study findings were in disagreement with the study done by (Mahande et al., 2020), where (74.4%) were informed on contraceptive methods during their antenatal visit, and (50.1%) of them were counseled on family planning during postnatal care. Furthermore, the majority of the respondents (64%) had delivered spontaneous vaginal delivery. This indicates that the delivery and healing process was fast, favoring a perception of good health among these mothers and thus could not have used contraceptives because they felt less at risk. The study findings were in line with the study done, supported by Dasanayake& Dilhani, et al (2018), where 68% of the participants had poor perception regarding contraceptive use after delivery and during breastfeeding, leading to low utilization. Half of the participants were afraid of using modern contraceptives due to side effects.

### **Conclusion**

Utilization of modern contraceptives among postnatal mothers at ERRH, Wakiso district, was very low. Factors associated with low utilization of modern contraceptives were: parity, having resumed sexual intercourse, resumption

### **Recommendations**

The Ministry of Health should consider increasing staffing to reduce the waiting time of clients when they come for modern contraceptives. The Ministry of Health should consider bringing the services to village health centers in order to increase the availability of the services. The Hospital administration of Entebbe Regional Referral should consider intense counselling about modern contraception, especially when mothers come for YCC and ANC services. Qualitative research should be carried out to clearly explore in-depth reasons as to why postnatal mothers are still hesitant about using modern contraception.

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### Conflict of interest

There is no conflict of interest reported.

### Author biography

Rebecca Nakityo, a diploma student in clinical medicine and community health at Kampala School of Health Sciences. Sharifah Nabukenya is a tutor at Kampala School of Health Sciences

### Data availability

Data was received upon request.

### Author contribution

Rebecca Nakityo, participated in data collection and compiling of the study report  
Sharifah Nabukenya, supervised all levels of the research project.

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