**Background**: Breast cancer is cancer that develops from breast tissue. Breast cancer is Public Health Problem in the world, and it is the most leading cause of death in both developed and developing countries; it's also the most frequented cancer among middle age with estimated 1.38 million new cases diagnosed in 2011, (ACS, 2011). Early detection of breast cancer is based on the observation that treatment is more effective when the disease is detected earlier in its natural history, prior to development of symptoms, than in an advanced stage. However, According to National Cancer institute (2010). About 17% of Ugandan women go for breast cancer screening. The overall objective of this study was to identify influence of Andersen's Model on utilization of breast cancer screening among university students in KIU, Kampala-Makindye Division Uganda.

**Methodology**: A descriptive cross-sectional study design using structured and researcher-administered questionnaire was used to a sample size of 219 respondents. The study employed both Simple Random Sampling and convenient methods.

**Results**: The study showed that only 50 (23.0%) had ever gone for breast cancer screening whereas majority of the participants had never gone for breast cancer screening. This shows that prevalence of breast cancer screening services is still low among the female students. Anderson's Model factors including; age, marital status, religion, employment status, monthly household income, knowledge about the breast cancer screening facilities, perception about the breast cancer screenings, health insurance status, accessibility and afford ability of breast cancer screening were strongly associated with utilization of breast cancer screening among university students in KIU, Kampala-Makindye Division Uganda.

**Conclusion and Recommendation**: The study showed prevalence of breast cancer screening services utilization is still low among the university students. Therefore the researcher recommends the following in order to improve the utilization of BCS: breast cancer screening education, promotion, provision of accessible and affordable breast cancer screening services and lastly more attention should be given to underrepresented groups, particularly those with low income, education and those with negative perception about the breast cancer screening services through health education campaigns.