

ABSTRACT

WHO suggests that all pregnant women begin antenatal care (ANC) in the first three months of pregnancy. This would enable early detection and management of any health complications (WHO, 2015). However, 85% of pregnant women access ANC once and 58% receive the recommended visits is low attendance. This study assessed the social demographic, mother related and health facility factors that influenced uptake of ANC among mothers attending Murchison Bay Hospital in Luzira. The study used a descriptive and cross sectional research design where 196 respondents were selected by simple random sampling and interviews were used to gather information from them.

Social demographic factors included; 121(62%) respondents were married, young mothers who 102(52%) were housewives, 78(40%) had primary of education. Culturally 135(69%) it was believed TBAs were the best people to give ANC as they used local herbs which were less costly.

Individual factors were; majority 167(86%) had knowledge about ANC and 137(82%) got it from health workers, 161(82%) were aware of the health complications they were likely to face during pregnancy. It was the first pregnancy 85(43%), 125(64%) they never regularly attended ANC and 159(81%) did not know that pregnancy was a risk of death. There was less husband involvement 145(74%) because they were busy with work and 131(67%) did not have anybody at home to help them with domestic chores.

Health facility factors were; 127(65%) long distance to the hospital, 143(73%) lack of drugs, 26(64%) low price drugs at the local pharmacies, 131(67%) language barrier, extortion of money from patients, 139(71%) unavailability of health workers, inadequate privacy, 125(65%) inadequate seats, unfriendly health workers.

In conclusion, irregular ANC uptake socially was due to much trust in TBAs, low levels of education and income. Individually mothers were ignorant that pregnancy is a risk for death, less husband involvement and much domestic chores. Health facility factors were; long distance, lack of supplies and facilities in the hospital, language barrier and long waiting time. The study suggests that, massive education sensitization should be given to mothers, husbands should participate more in reproductive health, more health facilities be built and facilitated and recruit more health workers to minimize waiting time.