

## **Introduction**

Despite increasing contraceptive availability, unintended pregnancy remains a global problem, representing as many as 30% of all known pregnancies. Various strategies have been proposed to reverse this disturbing trend, especially increased use of long-term FP methods.

Uganda is one of the countries with the highest TFR in the world and in the Sub-Saharan Africa. This high birth rate is largely caused by high prevalence of unmet need for contraception. The prevalence of long-term contraceptive utilization in Uganda is very low (14%) yet they are cost-effective compared to other contraceptives. This study was aimed at assessing the knowledge, attitudes and practices associated with the uptake of long-term FP methods.

**Methods:** This study was Cross-sectional study was conducted involving 222 women (15-49) years attending Kamuli General Hospital. Questionnaires were used to measure knowledge, attitudes and practices towards uptake of long-term FP methods; Intra-Uterine Devices and Implants. Prevalence Risk Ratios for associations between current long-term use and independent factors were used to obtain the significant at 95% Confidence Interval with be used  $P < 0.05$ .

**Conclusion:** This study revealed a relatively low level of current use of long-term family planning methods among women of reproductive age attending postnatal care in Kamuli General Hospital. Strategies to strengthen client education may be integrated within reproductive health programs in Kamuli District in order to dispel possible myths about long-term family planning methods. Involving males in the decision making process of contraceptives may also be integrated into strategies to promote family planning methods.

This study suggested a need to strengthen client education about long-term FP methods to dismiss possible myths that these women had which would help them to consider participation of male partners' decision making in contraceptive choices for women.

**Significance:** This study generated information that was used to improve long-term method uptake and therefore deal with rapid population growth, maternal morbidity and mortality.

**Potential Limitations:** Being a responsive bias study, there may be reporting bias.

