

**Introduction:** The study was carried out to assess the factors influencing women's decision making on uptake of SMC in Katanga slum which is found in Kawempe division. The specific objectives of the study were; to determine the socio-demographic factors that influence women's decision making on uptake of SMC in Katanga, to assess the individual factors that influence women's decision making on uptake of SMC in Katanga and also to establish the environmental factors that influence women's decision making on uptake of SMC in Katanga.

**Methodology:** A cross-sectional study was done in Katanga in September 2014. The study was carried out on female residents in the area who were above 18 years of age and were willing to participate in the study. Both quantitative (self and researcher administered questionnaires) and qualitative (focus group discussions) methods of data collection were used in the study. The questionnaires used were first translated to "Luganda" (which is the predominant language spoken in Katanga) and then translated back to English to ensure accuracy. The questionnaires were then pretested on 10 female residents who were above 18 years in Kasanvu slum in Namuwongo which resulted in making some small changes to the tool before data collection.

When collecting the data, the researcher stratified the study population into two according to the study area which has two zones. Then convenience sampling was used to obtain the 311 respondents that were required for the study. Convenience sampling was used because the study area is characterized with congestion and unplanned shanty structures.

Data was coded and put into Excel computer Programme, and then analyzed using the 16.0 version of Statistical Package for Social Sciences (SPSS).

Data was then run using percentages and frequencies, and results presented using bar graphs, pie-charts and frequency tables for univariate analysis.

At bivariate data analysis level, Chi square tests were run and results were presented in tables and used to show the levels of relationship between the dependent and independent variables.

**Results:** Generally, the study results showed that women are likely to positively influence SMC uptake for their sons, spouses and colleagues.

Results from the study on socio-demographic characteristics of the study population were; majority (55%) of respondents were aged between 18-24 years of age, majority (49.5%) were from the central region of Uganda, majority (41.2%) of respondents were Anglican/Protestants, majority (50.8%) of respondents were married and majority (47.9%) of them had at least attained tertiary/university education. 89.4% of respondents supported SMC and most (76.4%) of them perceived that SMC improves genital hygiene for men. Only 10.6% of the respondents did not support SMC and majority (53.1%) of them associated the practice with a lot of pain.

The major source of information about SMC in Katanga was media (radios, televisions, posters) and 54.3% of respondents had ever been sensitized about SMC. Majority (70.4%) of respondents

knew where to get SMC services from although still majority (72.2%) reported that the SMC services were not free of charge. Peer influence was found to strongly influence decisions women make as regards SMC uptake for their sons and spouses and majority (80.1%) of the respondents' peers/friends supported SMC while a few (15.1%) of the respondents reported that their peers/friends did not support it.

However 4.8% of the respondents had never discussed the issue with peers.

### **Conclusions:**

- The study revealed that majority of women support SMC and would positively influence its uptake.
- Socio-demographic factors such as religion, ethnicity, age and marital status were found to influence decisions women make on uptake of SMC for their partners and sons. However education level was found to have no influence on women's decision making on uptake of SMC.
- Individual factors such as attitude, perceptions and knowledge on benefits of SMC were found to play a big role in decisions women make on uptake of SMC.

### **Recommendations:**

- Women should be put to the fore front in programs aimed at scaling up uptake of SMC since they play a vital role in decision making on SMC uptake for their sons and partners and could serve as a gateway to scaling up SMC for men generally.
- HIV/AIDS prevention and SMC programs should emphasize scaling up sensitization of women on SMC and also encourage them to actively participate in its uptake.
- Just like many other health programs that emphasize cross gender participation, SMC programs should also emphasize active women involvement in uptake of SMC services.