

Background: Over 500,000 women die during pregnancy and childbirth – related complications annually on a global scale. Most of these cases occur within sub-Saharan Africa; with 99% of the cases occurring in developing countries. The biggest burden of maternal deaths are witnessed within the sub-Saharan Africa (46%) and Asia (50%). There are many Somali refugees in Uganda who have intergraded in the Ugandan community, and we do not know how they are utilizing the maternity care services as they are now intergraded into Uganda’s community.

The Main Objective: To assess the utilization of skilled maternity care services among the Somali women in Kisenyi, Kampala district.

Methods: The study was conducted using a descriptive cross sectional study in which the researcher administered questionnaires on a total of 262 respondents within the Somali community. The data was analyzed using SPSS version 16.0 and Microsoft excel and presented the findings in pie charts, bar graphs and frequency tables.

Results: The highest proportion of the respondents, 102 (38.9%) were within the age group of 30-34 years while the least proportion 15 (5.7%) were above 34 years. Majority of the respondents, 251 (95.8%) were married as compared to 9 (3.4%) who were widowed and 2 (0.8%) who had been divorced. The highest proportion of the respondents, 125 (47.7%) had secondary level of education while only 24 (9.2%) had never gone to school.

The highest proportion of respondents, 126 (48.1%) had 2-3 children while 14 (5.3%) had more than 5 children. Majority of the respondents, 199 (76.0%) were house-wives while 9 (3.4%) were civil servants. The highest proportion of the respondents, 105 (40.1%) reported to have moderate average monthly incomes while 74 (28.2%) had high incomes.

Those who reported to have low incomes were 83 (31.7%). Majority of the respondents, 194 (74%) reported to have been attended to by a health worker who is skilled during their last pregnancy. However, 68 (26%) of the respondents had not been attended to by a skilled birth attendant. Factors such as marital status ($p=0.019$); level of education ($p=0.001$); occupation ($p=0.000$) and average monthly income ($p=0.020$) were found to have a statistically significant association ($p<0.05$) with the utilization of skilled delivery services. Factors of age ($p=0.172$) and number of children born ($p=0.281$) did not show a statistically significant association ($p>0.05$) with the utilization of skilled delivery services.

Conclusion: The socio-demographic factors associated with the utilization of skilled birth services were marital status of the woman, level of education, occupation and average monthly income while factors such as age and number of children were not associated with the utilization of skilled birth services.

Recommendation: There is an urgent need for the government and development partners to sensitize Somali women on the need and benefits of utilizing skilled delivery services as well as the dangers of not utilizing such services especially on the mother's and baby's lives.