

Resource insecurity, mental health and uptake of sexual and reproductive health services among urban refugee adolescent girls and young women in Uganda: What role does motherhood status play?

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Introduction

Adolescent girls and young women (AGYW) are at dual risk of HIV infection and unintended pregnancy. This risk is compounded for refugee youth living in informal settlements, where poverty is prevalent and access to sexual and reproductive health (SRH) services is constrained. Being a young mother in informal settlements could aggravate existing conditions of resource scarcity and poor access to SRH services. To explore this, we analysed the factors associated with motherhood among refugee AGYW in Kampala, Uganda.

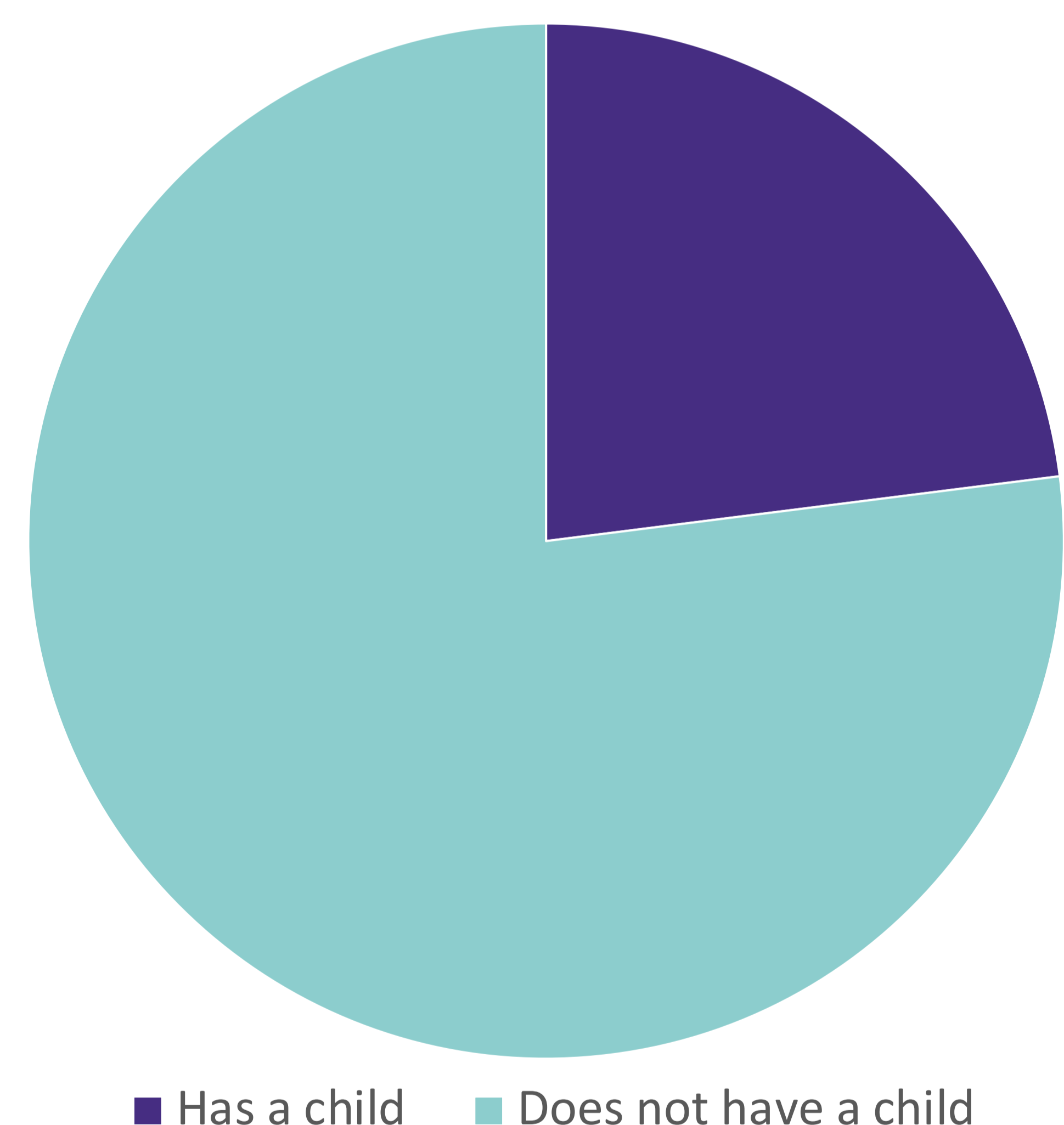
Methods

We conducted a cross-sectional study with refugee youth aged 16-24 in five informal settlements in Kampala. Peer research assistants administered questionnaires collecting information on sociodemographics (age, education), resource insecurity (employment, food insecurity), mental health (depression), and uptake of SRH services in the past three months. The SRH services examined were HIV counselling and testing; STI testing; and contraception (condoms, contraceptive pills, injections, intrauterine device, emergency pill, emergency patch). We used a generalised linear log binomial regression to test the factors associated with motherhood. Our multivariable model adjusted for age and generated adjusted prevalence ratios (aPR) with 95% confidence intervals (CI).

Results

We included 313 AGYW with a median age of 19 (interquartile range: 17-22), 23% (n=76) of whom had children. Having children was associated with greater likelihood of reporting food insecurity (aPR: 1.96, 95% CI: 1.07-3.61), depressive symptoms (aPR: 2.03, 95% CI: 1.09-3.80), and contraception uptake (aPR: 2.37, 95% CI: 1.58-3.56) compared to not having children.

Prevalence of Motherhood (N=333)



Conclusion

Having a child was associated with higher uptake of contraception and higher likelihood of depression and food insecurity. Mental health and resource insecurity interventions are required for AGYW with children in informal settlements. SRH services should be promoted to refugee AGYW without children to prevent HIV and unplanned pregnancy.