## FACTORS AFFECTING UTILISATION OF REPRODUCTIVE HEALTH SERVICES BY THE YOUTH IN INTERNALLY DISPLACED PEOPLES CAMPS IN KITGUM DISTRICT

## $\mathbf{BY}$

## OWOT FRED BSc. EDUCATION (MUK)

Registration Number: 2001/HD15/114U

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### **ABSTRACT**

This study basically looked at the factors affecting the utilisation of reproductive health services by the youth in IDP camps. The study was designed on the basis of the following objectives: - to identify reproductive health problems faced by the youth in the IDP camps, to examine the manner in which reproductive health services are utilised by the youth in IDP camps, to assess the attitudes of the youth towards reproductive health services and to determine the proportion of the youth in IDP camps that utilises reproductive health services.

The study used a cross-sectional survey design. Palabek Kal, being a subcounty comprising of four parishes, meant that the youth were already clustered according to the parish they come from. It was then believed that each cluster was representative of the entire youth population of the camp. A simple random sample of youth in two selected clusters was undertaken using a table of random numbers. This approach was considered cost-effective since the population of camp was big.

The study found out that sex, age, marital status, level of education attained and employment status were the main determinants of the level of utilisation of reproductive health services in IDP camp. It was found that male youth in Palabek Kal IDP camp utilised reproductive health services as much as their female counterparts did. On the other hand, the higher the level of education attained by an IDP youth, the more possibilities that he or she will utilise reproductive health services. It is therefore imperative that, inorder to make utilisation of reproductive services more effective in IDP camps, policies have to be geared towards promoting education. The study also found out that disparities in marital status did not significantly affect the level of utilisation of reproductive health services by the youth in IDP camp. Employment status did not affect utilisation of reproductive health services in IDP camps. This meant that those who are employed utilise RHS as much as those who are not employed.

The study recommended that both formal and informal sex education programs should be increased. IDP youth need to be provided with basic information on sexuality and reproductive health. In an IDP setting, formal education was found to be limited and so information about reproductive health must be communicated in creative ways such as sports, video shows and drama. Vocational training should be encouraged to increase the productivity of IDP youth and enable them earn some income. This will in turn make them engaged in doing something more productive than getting involved in early sexual activities.