

**FACTORS ASSOCIATED WITH PLACE OF TREATMENT FOR
SEXUALLY TRANSMITTED INFECTIONS IN UGANDA: ANALYSIS OF
2006 AND 2011 UGANDA DEMOGRAPHIC HEALTH SURVEY**

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**A DISSERTATION SUBMITTED TO DIRECTORATE OF RESEARCH AND
GRADUATE TRAINING IN PARTIAL FULLFILMENT OF THE
REQUIREMENTS FOR THE AWARD OF A DEGREE OF
MASTER OF ARTS IN DEMOGRAPHY OF
MAKERERE UNIVERSITY**

NOVEMBER 2018

ABSTRACT

The objective of this study was to investigate factors associated with place of treatment for sexually transmitted infections in Uganda in the period 2006 and 2011. The study examined the association between demographic, socio-economic and behavioural factors with place of treatment for sexually transmitted infection. The differences in place of treatment for STIs were also decomposed into components attributed to variation in characteristics and variations in the effects of predictors in the two groups. The assessment was based on the 2006 and 2011 Uganda Demographic and Health Survey data sets; comprising of 8,531 and 8,674 records of women aged 15-49 years. Descriptive statistics and non-linear Oaxaca' Blinder multivariate decomposition of the logistic regression were used to achieve the objectives.

Decomposition changes in place of treatment reveals that 24.7% of the overall gap was due to variation in characteristics (endowment) while 75.3% was attributed to variation in the effects of characteristics (coefficients). The overall gap in place of treatment for STIs between 2006 and 2011 would reduce by 8.0%, 7.3% and 6.0% if differences in richest wealth status, condom use and visited health facility respectively were to disappear. On the other hand, the gap in place of treatment of STIs between 2006 and 2011 would increase by 4.6% if the difference in richer wealth status were to disappear. In relation to effects of predictors, the overall gap in place of treatment of STIs between 2006 and 2011 women would increase by 110.2% in the absence of variation in the effects of women's education.

The findings of this study indicate that overall, there is a gap in place of treatment of STIs between 2006 and 2011 which is attributed to variation in women who visited health facility, condom use, wealth status and level of education. In order to reduce this gap, government and other development partners need to scale up STI testing services targeting women through tackling stigma, increasing on community out-reach services and expanding friendly STI service centres.