



Contribution ID: 9

Type: **Poster Presentation Only**

## Factors influencing referral among women attending post abortion care: An embedded mixed-methods study at tertiary hospitals in Northern Uganda

Thursday, September 18, 2025 3:36 PM (3 minutes)

**Background:** Abortion related deaths account for over 75% of all maternal deaths in sub-Saharan Africa. Most abortion-related deaths and complications are preventable by appropriate post abortion care (PAC) services. Referral is critical in the chain of management of women attending PAC. This study aimed to assess factors influencing referral among women attending PAC at two tertiary hospitals in Northern Uganda.

**Methods:** An embedded mixed-methods study was conducted from July to December 2023 at St. Mary's Hospital-Lacor (SMHL) and Gulu Regional Referral Hospital (GRRH). Quantitative data were collected from women of reproductive age (15–49 years) attending PAC using structured questionnaires, while qualitative data were gathered through 20 in-depth interviews with women attending PAC and PAC providers. Logistic regression was applied for quantitative analysis, and thematic analysis was used for qualitative data.

**Results:** A total of 152 participants were enrolled, with a median age of 26 years (IQR: 21–32). Most women (93.4%) presented with spontaneous abortion; 60.5% had incomplete abortion, 15.1% had inevitable or missed abortion, 7.9% had complete abortion, and 1.3% had septic abortion. Referrals accounted for 30.3% (46/152), nearly half (48%) from lower-level facilities. Referral was associated with rural residency (adjusted Odds Ratio (aOR): 15.5; 95% Confidence Interval (CI): 4.44–53.83;  $p < 0.001$ ) and being under 20 years of age (aOR: 2.8; 95% CI: 1.02–7.56;  $p = 0.046$ ). Among those receiving PAC, 77.0% preferred modern contraceptives. Drivers to referral include; limited PAC availability in lower-level facilities, financial barriers at private facilities, and transport challenges.

**Conclusions:** Approximately one-third of women seeking PAC were referred due to unavailable PAC services at lower-level facilities and financial or transport constraints. Strengthening PAC services at lower-level facilities could improve care, reduce complications, and alleviate the burden on tertiary hospitals.

**Key words:** Referral, Post abortion care, Tertiary hospitals, Northern Uganda

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**Session Classification:** Poster CAC

**Track Classification:** Comprehensive Abortion Care