

ABSTRACT

Background: Contraceptive implants are expensive due to the cost at procurement, health-care provider time, trainings and the necessary supplies required at insertion. Early removal of these implants not only translates into method wastage and hospital resource overstrain but also puts the woman at risk of unplanned pregnancies with its associated complications if she does not take an alternative contraceptive. This study seeks to determine the prevalence, factors associated and experiences of women with early implant removal, from public family planning clinics in Mbarara City.

Methods: We conducted a cross-sectional mixed methods study from April to July 2023 at 4 public family planning clinics within Mbarara City. We consecutively enrolled 406 women and administered a questionnaire to obtain data on independent variables. We also held in-depth interviews for 8 women who had an early implant removal while still in need of contraception. Their experiences while using implants were explored. We used Modified Poisson regression analysis to determine the factors associated with early implant removal. Qualitative data was analyzed using inductive thematic analysis.

Results: Majority of the participants were in the age group of 21-35 years (mean age of 29 years), resided in the urban areas, and had used a modern contraceptive method prior to the implant insertion. The prevalence of early contraceptive implant removal was 53% (95% CI: 48%-58%). Factors associated with early implant removal were having suffered side effects (aPR = 1.63, 95% CI = [1.20-2.21]), inserting an implant to achieve career goals (aPR = 1.88, 95% CI = [1.26-2.81]) and intended duration of implant use <24 months (aPR = 1.36 95% CI = [1.11-1.66]). The experiences of women with early contraceptive implant removal included 4 themes; side effects, inadequate counselling, domestic violence and social withdrawal.

Conclusion: The prevalence of early contraceptive implant removal is high, women who experienced side effects, choose an implant due to career obligations and those whose intended implant use was less than 2 years are more likely to have an early implant removal. Women's experiences were unbearable side effects, inadequate counselling, domestic violence and social withdrawal while using implants. We recommend strengthening of pre-insertion counseling and post implant insertion scheduled follow-ups. We also recommend community sensitization to demystify the myths and beliefs about contraceptive implants and strengthen advocacy for male partner involvement in family planning matters.