addressing worldwide malnutrition, stunting and infant mortality, the WHO has promoted the practice of Exclusive Breastfeeding (EBF). The WHO defines EBF as giving infants only breastmilk for the first six months of life. Previous studies have shown that breastfeeding is prevalent in Nepal, however EBF rates are variable due to complimentary feeding practices. Investigations of breastfeeding practices have not been performed previously in Dhulikhel and the surrounding Kavre district. Dhulikhel Hospital is a non-profit academic medical center that serves a diverse population of 1.8 million people over a large geographic area.

Methods: To guide the development of future EBF interventions at Dhulikhel Hospital, we assessed the knowledge, prior experience, beliefs, and social norms related to breastfeeding practices. A quantitative survey was administered in Nepalese to pregnant women 18 years of age or older at Dhulikhel Hospital's antenatal clinic. Three local research assistants were trained to orally conduct the 93 question survey.

Findings: The questionnaire, administered during July and August 2016, was completed by 300 participants aged 18 to 38 years-old (mean of 24-years-old). Out of the 111 (37%) women who had previously breastfed, only 54 (49%) reported exclusively breastfeeding for six months or longer. While 188 (63%) of those surveyed intend to feed their child only breastmilk for the first six months, only 89 (30%) were familiar with the term "Exclusive Breastfeeding.". Two hundred and forty (80%) of women believed that it is permissible to give water in the first 6 months, and 166 (55%) believed that infants need additional food or liquids when they are ill.

Interpretation: Rates of EBF in Dhulikhel are significantly lower than the WHO's target goal of 90% compliance. The lack of EBF knowledge is a significant contributor to the low rates of EBF. Furthermore, the widespread misconceptions highlight a gap in standardized education regarding EBF practices. As the practice of EBF is crucial to addressing stunting and infant mortality, implementing a formal EBF intervention tailored to the Dhulikhel community is necessary.

Abstract #: *LAN.016*

Healthcare-Seeking Behaviors of Females Presenting to St Paul's Hospital Millennium Medical College & its Associated Community Clinics, Addis Ababa, Ethiopia

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Background: The infrastructure of a healthcare system is a significant determining factor of the healthcare-seeking behaviors of a community. Healthcare-seeking behaviors have a strong influence on the health outcomes of a population. There are few studies on such behaviors among females in Addis Ababa, Ethiopia.

We sought to evaluate the healthcare-seeking behaviors of sexually active and non-pregnant female patients at St. Paul's Hospital Millennium Medical College and ten of its associated health centers in Addis Ababa, Ethiopia.

Methods: A questionnaire recognizing socio-demographic characteristics and healthcare-seeking behaviors was administered to 338 subjects who met inclusion criteria. Inclusion criteria included: females over the age of 18 who sought care at the clinic, non-pregnant, sexually active within the last year, and willing to provide consent. The questionnaires were administered in Amharic.

Findings: One hundred and sixteen subjects (29.9%) had prolonged seeking medical care for their current medical symptoms, for an average of 10 weeks. Factors impacting subjects' decisions to prolong care included time, belief that their symptoms would self-resolve, finances, work responsibilities, family responsibilities, transportation and distance of clinic. Among those who had prolonged care, most are between the ages of 36-40 years, have relatively low monthly incomes of 501-1000 birr ($22-45USD) and have, as their highest educational level, a non-formal education. A majority of subjects consider travel time/distance to clinic, finances and influence from third party persons to be non-significant factors behind their decision to seek medical care. Significant decision-making factors to a majority of subjects included the negative impact of medical symptoms on one's quality of life and concern over one's own future personal health.

Interpretation: The women who tend to prolong seeking out medical care were found to have lower educational and income levels. Thus, it is important to target medical education towards such women. It is also essential that this medical education help women obtain a stronger understanding of their medical symptoms and the importance of getting treated before the quality of their lives and future health statuses are compromised.

Abstract #: *LAN.017*

Predictors of Long Acting Reversible Contraception Use among Women in the Extended Postpartum Period in Rural Uganda

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Background: Post-partum or post-abortion use of the most effective contraception is low in Uganda especially in rural settings. This study aimed at determining the predictors of long-acting reversible contraception (LARC) use among women in extended postpartum periods in rural Uganda.

Methods: A household based, cross-sectional study was conducted among 400 women in two rural communities in Mityana district, central Uganda. Eligible women were aged 15 to 45 years and had childbirth within the last 12 months of the interview. Pre-tested structured questionnaires were used to conduct respondent interviews in September 2014. The outcome variable was use of a LARC