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West Bank and Gaza: Stress the importance and cost-effectiveness of postpartum care

Frontiers in Reproductive Health

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West Bank and Gaza Quality of Care

ORSummary 20

Stress the Importance and Cost-Effectiveness of Postpartum Care

Palestinian women have access to antenatal and postpartum care as well as family planning services, although few women seek postpartum services. Both clients and health care providers have limited knowledge about reproductive health (RH). RH services could be improved by the provision of standardized protocols for RH care in primary health care clinics and pre- and in-service training for providers.

service statistics, interviews with 54 health care providers (nine physicians, three nurses, and 42 community health workers), and exit interviews with 792 antenatal, postpartum and family planning clients at the 27 study clinics.

Findings

◆ Most women visit the PHP clinics for antenatal care, but very few go for postpartum care. Of the 792 clients interviewed at the clinic, only 3 percent came for postpartum care, compared with 83 percent for antenatal care and 14 percent for family planning (see Figure).

◆ Most women deliver their babies in hospitals. Only four of the 27 postpartum clients delivered at home. Eleven of these 27 clients requested a

Background

To assess maternal health care in West Bank and Gaza, the Health, Development, Information and Policy Institute conducted a study during May-August 2000. This study served as a baseline for the Pilot Health Project (PHP), which seeks to improve antenatal and postpartum services in three areas of the West Bank and Gaza. Seven local and international agencies are implementing PHP in collaboration with the Palestinian Ministry of Health and with funding from the U.S. Agency for International Development. Data sources for the baseline study consisted of

Source: Client exit interviews (n = 792)

family planning (FP) method during their postpartum clinic visit.

◆ Husbands play a key role in women's health.

Nearly all clients said that their husbands had encouraged them to obtain antenatal services at the PHP clinics and that they agreed with their husbands about contraceptive use and birth spacing. However, husbands tended to want more children than wives and showed a marked preference for male children.

◆ Most clients did receive information on various aspects of reproductive health care, although the information provided on health warning signs that could arise during pregnancy or after childbirth was inadequate.

◆ The majority of the PHP clients interviewed have heard of at least four FP methods. More than half (58%) of them have ever used an FP method, and 14 percent are currently using a method. The most popular FP method among current users is

the IUD, followed by injections and the pill. On average, women began using FP when they had three living children. No one reported using FP to delay the first birth.

◆ All categories of providers had inadequate technical knowledge and skills. The community health workers had received varying levels of training.

Policy Implications

◆ The recently developed national standard protocols and guidelines for antenatal and postpartum care, family planning, and breast and cervical cancer screening should be adopted in all primary health care facilities and clinics.

◆ All categories of service providers need additional competency-based training on antenatal, postpartum, and family planning services as well as the new national standard protocols and guidelines. Medical schools and training programs need to increase the number of training hours on women's health.

◆ Hospitals and primary health care clinics should establish referral mechanisms to ensure that women are receiving essential postpartum care.

◆ The public needs to learn more about the importance of reproductive health, including antenatal and postpartum care, family planning, and breast and cervical cancer screening.

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Health, Development, Information and Policy Institute. 2001. Pilot Health Project Baseline Survey Report. For more information please contact: Population Council, MOH Offices, Al Balou-Al Bireh, Al Haj Yassin Building, Ramallah, West Bank. Tel.: 970-2-240-1146; fax 970-2-240-7226; E-mail: Nali@pcwbg.org.

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