

# Access to care for women reporting postnatal complications in the occupied Palestinian territory: a cross-sectional study

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**Background** Postnatal care is an important component of maternal health, especially for the treatment of complications after delivery. However, only a third of women receive postnatal care in the occupied Palestinian territory (oPt). The aim in this study was to assess the factors that contributed to women not receiving postnatal care despite the manifestation of symptoms.

**Methods** Data were obtained from a nationally representative household survey (Pan-Arab Project for Family Health [PAPFAM] 2006) by the Palestinian Central Bureau of Statistics, West Bank, oPt, and analysed. Women (aged 15–54 years) who were married and reported one or more postnatal symptoms with fever—severe vaginal bleeding, swelling and pain in the legs, foul-smelling vaginal discharge, lower abdominal pain, severe lower back pain, severe upper back pain, painful micturation, or breast swelling and pain—were selected from 3334 women in the postnatal period. For the analysis, responses about these eight symptoms were converted into a scale (Cronbach's  $\alpha=0.82$ ). Descriptive analysis, Pearson's  $\chi^2$ , and binary logistic regression were done with postnatal care as the dependent variable and selected demographic and socioeconomic variables as possible associated factors. SPSS (version 17.0) was used for the statistical analysis.

**Findings** 267 (46%) of 584 women had one postnatal symptom, 217 (37%) had two or three postnatal symptoms, and 100 (17%) had four to seven. 245 (42%) women received postnatal care and 339 (58%) did not. 251 (74%) of 339 women who did not receive postnatal care reported that symptoms were not a problem. Logistic regression analysis showed that women who were poorer were more likely to not receive postnatal care than were those who were better off (odds ratio 2.1, 95% CI 1.1–4.0]. Women reporting normal delivery were four times less likely to use postnatal care than were those who reported having a caesarean (4.0, 2.5–6.2). Women married to younger men (aged  $\leq 29$  years) and women living in the West Bank were almost half as likely to receive postnatal care than were women married to older men (aged  $\geq 30$  years; 1.9, 1.1–3.3) and women in the Gaza strip (2.4, 1.5–3.6).

**Interpretation** Poverty is an important barrier to postnatal care for women and contributes to the inequity in the provision of services to these women. Better accessibility of postnatal care for women in the Gaza Strip might be due to the presence of several international humanitarian agencies that provide services to people living in this region, and the small size of the Gaza Strip increasing accessibility to clinics for women. More efforts are needed to address women's health needs in the postnatal period.

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#### Contributors

All authors participated in defining the research question and analysing the results, under the supervision of RG1, with statistical support from RGh. HAAN wrote the draft of the Abstract. All authors commented on the draft and approved the final version for publication.

#### Conflicts of interest

We declare that we have no conflicts of interest.