

**Deanship of Graduate Studies
Al-Quds University**



**Factors Associated with Utilization of Postpartum Family
Planning Services among Mothers between 6 and 12 weeks of
Delivery in Southern West Bank Hospitals**

Hanan Shihadeh Mahmoud Shihadeh

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Delivery in Southern West Bank Hospitals**

Prepared by:

Hanan Shihadeh Mahmoud Shihadeh

B.Sc. - Maternal and Child Health Nursing- Al Quds University-Palestine

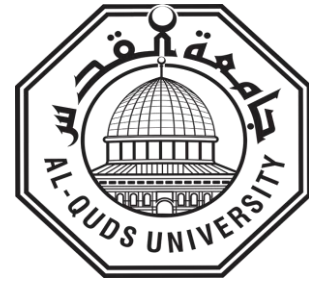
Supervisor: Dr. Farid Ghrayeb

**A Thesis Submitted in Partial Fulfillment of Requirements for the degree
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Studies- Al-Quds University.**

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**Deanship of Graduate Studies
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Maternal and Child Health Nursing**



Thesis approval

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Prepared by: Hanan Shihadeh Mahmoud Shihadeh

Registration No: 22011032

Supervisor: Dr. Farid Ghrayeb

Master thesis submitted and accepted. Date: 9/4/2025

The names and signatures of the examining committee members are as follows:

1-Head of Committee. Dr. Farid Ghrayeb

Signature:

2- Internal Examiner: Dr. Kefah Zaben

Signature:

3- External Examiner: Dr. Ahmed Batran

Signature:

Jerusalem-Palestine

1446/2025

Dedication

To my parents

To my husband

To my children

To all Palestinian women

Hanan Shihadeh Mahmoud Shih

Declaration

I certify that this thesis, submitted for the degree of Masters, is the result of my own research, except where otherwise acknowledged, and that this thesis (or any part of the same) has not been submitted for a higher degree to any other university or institution.

Signed: 

Hanan Shihadeh Mahmoud Shih

Date: 9/4/2025

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Hanan Shihadeh Mahmoud Shih

Abstract

Background. Family planning is crucial for human beings to maintain physical and mental health as a recognized basic human right (United Nations-UN, 2015). In Addition, family planning enables people to make better choices about their sexual life and reproductive health. It represents an opportunity for women to pursue additional education and participate in public life, including paid employment in non-family organizations (WHO, 2024).

Aim. To investigate the factors that are associated with the utilization of postpartum family planning services among postpartum mothers between 6 and 12 weeks of delivery in the West Bank in Palestine

Method. A descriptive cross-sectional survey research design was employed to implement this study. The target population was composed of all Palestinian mothers who had given birth in the last six-twelve weeks in Southern West Bank of eight Palestinian hospitals. Data was collected using a self-administered questionnaire adopted from previous studies. The English version of the questionnaire was translated into Arabic language. The questionnaire contained items that aimed to assess mother's sociodemographic characteristics, their knowledge, attitudes and associated factors. The collected data was analyzed employing the Statistical Package for Social Sciences (SPSS) Version (28).

Results. Out of 200 distributed questionnaires, 179 questionnaires were included in data analysis. The current study's findings revealed that study's findings revealed that 179 participants, yielding a response rate of 89.5%. Among the respondents, (53.6%) were aged 28 years and above. At the time of data collection, (43.6%) held a diploma, while (12.3%) had a bachelor's degree. In addition, Contraceptive use and three of the sociodemographic characteristics were positively correlated, namely, with number of pregnancies, with number of live births and age of last child. On the other hand, contraceptive method use was negatively correlated with some of the sociodemographic characteristics namely, education, awareness of contraceptive method.

Conclusion. There is insufficient use of PFP services in Southern West Bank Hospitals. Findings revealed that the majority (53.6%) had not used any family planning method postpartum. Furthermore, there is a relationship between Women knowledge and their levels of education, there is a need for upgrading the levels of women education. Furthermore, increase the awareness of women about family planning may give better chances for the women to develop their knowledge towards Family planning method utilization.

Keywords

Postpartum family planning, associated factors, mothers, family planning services, Southern West Bank, postnatal care.

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Lists of Abbreviation

WHO	World Health Organization
UNICEF	United Nations Children's Emergency Fund
PPFP	Post-Partum Family Planning
FP	Family Planning
UN	United Nations
HIV	Human Immunodeficiency Virus
STIs	Sexually Transmitted Infections
UNFPA	United Nations Fund for Population Activities
UNRWA	United Nations Relief and Works Agency for Palestine Refugees in the Near East
IUCD	Intrauterine Contraceptive Device
ANC	Antenatal Care
HFH	Holy Family Hospital
PHCs	primary health centers
CHWs	Community Health Worker
PPIUD	Immediate postpartum intrauterine device
FTMs	first-time mothers
(TPB)	Theory of planned behavior
CHWs	Community Health Worker
UAE	United Arab Emirates

Chapter one

Introduction

.1.1 Background

Maternal health, which covers women's health throughout pregnancy, delivery, and the postpartum period, is one of the most significant aspects of health care. The most crucial component of maternal health is delivery since it has extremely significant consequences that can impact a woman's life on a physical, psychological, mental, and social level (WHO, 2013). Child birth resulting from family planning becomes a serious issue. Family planning itself known as the process of preventing unwanted pregnancy and infertility. It also, includes the management and prevention of sexually transmitted disease as well as pre-conception. So, with a correct understanding of what family planning is, infant and maternal health are improved (WHO, 2024).

Family planning enables individuals and couples to anticipate and reach their desired number of children, by spacing and scheduling their births. In addition, since family planning helps women to attain a healthy gap between deliveries, it is critical to address family planning during the postpartum period for improved maternal, neonatal, and child survival (Tefera & Abuye, 2020).

Family planning is crucial for human beings to maintain physical and mental health as a recognized basic human right (United Nations-UN, 2015). In Addition, family planning enables people to make better choices about their sexual life and reproductive health. It represents an opportunity for women to pursue additional education and participate in public life, including paid employment in non-family organizations (WHO, 2024).

There are two benefits of preventing unwanted pregnancies: reduced maternal illness and the incidence of pregnancy-related fatalities. Also, the advantages of family planning include avoiding births among elderly women who also face elevated risks, and delaying pregnancies in young girls who are at increased risk of health issues from early childbirth (WHO,2024).

By reducing rates of unintended pregnancies, contraception also reduces the need for unsafe abortion and reduces HIV transmissions from mothers to newborns. This can also benefit the education of girls and create opportunities for women to participate more fully in society, including paid employment. According to 2017 estimates, 214 million women of

reproductive age in developing regions have an unmet need for contraception. Reasons for this include: limited access to contraception, a limited choice of methods, a fear or experience of side-effects, cultural or religious opposition, poor quality of available services, gender-based barriers (WHO, 2024).

Family planning is crucial for providing women and their male partners the freedom to decide freely on whether, how many, and when to have children. Also, it improves both maternal and child health, reduces the prevalence of unwanted pregnancies and unsafe abortions, prevents STIs, and enhances economic well-being of family's, family planning also promotes women's sense of autonomy and their ability to make health decisions (Kassim& Ndumbaro,2022).

As family planning is essential to achieving sustainable development goals, the UN has made it a priority to utilize it more often, to assist couples in realizing their rights to freely and responsibly choose the number and spacing of their children, emphasis has been placed in particular on providing everyone with access to a comprehensive variety of safe and effective family planning options (Kassim & Ndumbaro,2022).

The aim of this study, to investigate the factors that are associated with the utilization of postpartum family planning services among postpartum mothers between 6 and 12 weeks of delivery in the West Bank in Palestine.

1.2 Problem Statement

Women may experience unplanned pregnancies which may put their life and the fetus at risk during pregnancy and delivery. So, to reduce these health risks, family planning services should be provided extensively and be accessible to everyone.

In recent years, the need for family planning services has increased significantly in Palestine due to the dramatic increase of the population in the area since the middle of the last century until 2015 the population has multiplied five times from 0.9 to 4.75 million at an average annual growth rate of 2.5% (UNFPA, 2016).

Family planning services are the utilization of modern or natural methods for either limiting or spacing pregnancies such as Intrauterine Devices, implants, and male and female condoms (WHO, 2017). The contributions of family planning toward improving the quality of life of the population.

Utilization of post-partum Family planning services is essential to provide better healthcare for women and children, better quality of life, and less mortality death rate. Also, it's critical for countries' growth and development since providing these services lead to a more stable economic situation, better education, and less poverty (WHO, 2024).

The main research question that will be discussed in this research is” Factors Associated with Utilization of Postpartum Family Planning Services within 6 - 12 weeks of Delivery in Southern West Bank Hospitals”. To answer this question, the researcher was examined a literature review, and a structured questioner and analyze results to clarify mentioned factors, classify them in a way that could be beneficial, and result in recommendations for mothers who have given birth recently and for any healthcare organizations.

1.3 Significance of the study

Family planning is an issue that heavily influence the lives of every family, whether small or large, educated or uneducated, rich or poor. This study has significant importance since it will explore the associated factors: women's knowledge and beliefs about postpartum family planning services. So, it could be beneficial for All stakeholders concerned with family planning and health of women and children.

Besides, the importance of this study is that it could be used as a guide for healthcare providers and policy makers in Palestine, to provide deep insights for the future, to decide the suitable strategy they need to adopt to improve and promote their provided family planning services for women and their infants (WHO, 2024).

Moreover, it could be crucial to people who are interested in women's empowerment such as UNRWA and other non-governmental organizations which work in health and social development fields. Since studying the factors that are associated with the Utilization of Postpartum Family Planning Services in the west bank is a “great need to prioritize the provision of information and education for women in rural areas to empower them to create awareness regarding postpartum family planning. Resulting in more productive families, having a better well-being and thus improve the quality of community members. (WHO, 2015).

Furthermore, this research should be done to gain more information on the family planning utilization among women in the Southern West Bank because there is a lack of studies that are related to it.

1.4 Aim of the Study

To investigate the factors that are associated with the utilization of postpartum family planning services among postpartum mothers between 6 and 12 weeks of delivery in the West Bank in Palestine.

1.5 Specific Aim of the study

1. To examine the extent of knowledge of family planning methods among postpartum mothers.
2. To examine the practice of family planning methods among postpartum mothers.
3. To determine the types of family planning methods used by mothers in the West Bank in Palestine.
4. To assess the factors and key concepts that are directly associated with the use of family planning services.
5. To determine the correlation between contraceptive method, use and the demographic variables.

1.6 Research Question:

1. What is the level of knowledge of postpartum mothers about family planning methods?
2. What is the level of practice of postpartum mothers about family planning method?
3. What are the types of family planning methods used by mothers in the West Bank in Palestine?
4. What are the factors and key concepts that are directly associated with the use of family planning services.
5. Is there a correlation between contraceptive method, use and the demographic variables.

Chapter Two:

Literature Review

2.1 Introduction

This chapter shows the results of reviewing literature related to the aims of this study including measuring the level of knowledge and practice toward family planning methods among postpartum mothers in southern hospitals of west bank. The researcher will provide a brief overview of literature reviews of multiple studies regarding the impact of postpartum women's knowledge, social beliefs and cultural thoughts, and the subjective norms regarding family planning services. An electronic literature search was conducted to identify the literature available on the various variables of this study. The search was performed using various electronic databases: PubMed Central (PMC), SciELO Social Sciences, and Google Scholar search engine was also utilized.

2.2 Search Strategy:

A comprehensive search strategy was employed to identify relevant literature for this review. Electronic databases including PubMed, PsycINFO, and Google Scholar were searched using keywords such as "Family Planning Method Utilization," "Knowledge about family planning," "Cultural and Belief," The search was limited to studies published in English between 2012 and 2025. Additional articles were identified through hand-searching of reference lists of relevant studies and review articles.

2.3 Previous studies regarding the knowledge of postpartum mothers toward family planning methods.

A descriptive, cross-sectional, study was conducted by Pokharel et al. in 2022, about Use of Family Planning Methods among Postpartum Mothers in Bharatpur Metropolitan. Which aimed to explore the magnitude of utilizing family planning methods among mothers. They used semi structured interviews among 133 mothers who had one year of children. The study revealed that about 830 women die daily from complications of pregnancy and childbirth worldwide, an estimated (25%) of maternal mortality could be prevented using PPF. Moreover, this study found that there is low rate of using family planning methods which may be the fact that more than fifty percent of the women in this study did not get family planning counseling in their Postnatal Clinic visit which eventually increases maternal deaths,

stillbirths and larger children exposed to the risk of mortality. Also, this study conducted that the most preferred family planning methods are Depo-Provera injection and IUCD because it is simple to get, convenient and private, doesn't need daily dose.

In addition, this study exposed that family planning use is very crucial during antenatal, postnatal period to enhance uptake of postpartum contraceptive use.

In line with the previous study, a cross-sectional study was conducted by Seifu, Yilma and Daba in 2020, about Knowledge, utilization and associated factors of postpartum family planning among women who had delivered a baby in the past year in Oromia Regional State, Ethiopia. Which aimed to fill the research gap by assessing the knowledge, utilization, and associated factors of PFP among postpartum women. This study revealed that there is an increased risk in premature birth and low birth weight less than 2500g two times if pregnancy occurs 6 months after delivery. In addition, children who born for mothers within two years are 60% more likely to die during infancy than those delivered above two years. Moreover, this study conducted that women who have higher educational status, a history of modern family planning utilization, who had ANC follow-up in their recent pregnancy were nearly three times more likely to know about PFP.

According to a recent study that was conducted in Egypt showed an increase in women's awareness of utilizing postpartum contraceptive methods (**Ahmed et al., 2013**). in contrast, another study that was carried out in India states that only less than one quarter utilized postpartum family planning methods during the extended postpartum period. Therefore, the need for raising awareness is crucial through promoting and developing a more favorable attitude towards family planning. (Silesh et al., 2021).

Another descriptive study was conducted by (Mahadeen et al.,2012) about Knowledge, attitudes and practices towards family planning among women in the rural southern region of Jordan. Which aimed to explore the level of knowledge about family planning methods among rural Jordanian women, the prevalence of use, preferences and reasons for using family planning methods and their attitudes towards family planning. They used structured interviews. This study revealed that women in rural areas of the southern region of Jordan had inadequate knowledge about the concept of family planning and some women (8.7%) stated that they did not know what family planning referred to. Moreover, 8.4% of them said that they never to have heard about any method of avoiding pregnancy. Furthermore, the study showed that the most reported source of information about family planning was television, while health workers were the second most common source of information. This indicates a pressing need to educate these women about the concept of family planning and available methods to avoid pregnancy.

Furthermore, a cross-sectional study was conducted by (Warasna et al., 2021) about Knowledge and attitude of Palestinian women to contraceptives: a cross-sectional study. Which aimed to assess the knowledge and attitudes of married Palestinian women about contraceptives and understanding of use of the available methods and side-effects. They used cross-sectional study involved married Palestinian women of childbearing age (18–50 years). This study conducted that most Palestinian women have used contraceptives, but they have poor knowledge of how to use them and side-effect of them. The attitudes of Palestinian women and their partners towards contraceptives indicates general acceptance of their use.

In addition, a descriptive, cross-sectional study was conducted by (Handady et al., 2015) about Knowledge, Attitude and Practice of family planning Among Married Women Attending Primary Health Center in Sudan. Which aimed to assess the knowledge, attitude and practice of family planning among child bearing women. This study showed that there is a significant percentage of respondents have a good knowledge about family planning method but the practice of using contraception method was poor due to two causes which are: fear of contraception side effects and women wanted more children.

In the line with the previous study, a cross-sectional study was conducted by (Birabwa et al., 2021) about Knowledge and Information Exposure About Family Planning Among Women of Reproductive Age in Informal Settlements of Kira Municipality, Wakiso District, Uganda. Which aimed to assess the knowledge of family planning methods and the level and determinants of family planning information dissemination through mass media among all women and family planning providers among non-users of contraception in an informal urban settlement in Wakiso, Uganda. They used cross-sectional study design, and interviewed 626 women aged 15–49 years living in informal settlements of Kira municipality, selected through multistage sampling, using a standard questionnaire. This study revealed that Most respondents (55.9%) had attended secondary educational level or a higher level of education, and nearly 75% were currently married or living with a man. Because of that there is high awareness between family planning methods and media exposure but there is low using of family planning method.

A descriptive cross-sectional study was conducted by (Anate et al.,2021). About Knowledge and utilization of family planning among rural postpartum women in Southwest Nigeria. Which aimed to assess the knowledge and utilization of family planning, as well as to determine the predictors of utilization of family planning among post-partum women attending primary health centers (PHCs) in a selected rural area of Lagos State, southwest Nigeria. This study revealed that the majority of the women were married, between the ages of 21 and 30, and only had a secondary education also, the majority of the women desired to have additional children, and the majority had kids between the ages of six and nine months. In addition, all the women had heard of family planning (male condom, implants, injectable and pills) were more commonly known. More than 90% of them got their information from the hospital/ health center, about 60% were currently using any method of family planning while only 38% were using a modern method (PPFP). In the multivariate analysis, women who did not want to have more children were more likely to practice PPFP. Also, women with good knowledge of family planning were more likely to practice PPFP.

Another cross-sectional study was conducted by (Andualem et al. 2022). About Factors associated with utilization of modern postpartum family planning methods during the extended postpartum period among mothers who gave birth in the last 12 months at Injibara town, Northwest, Ethiopia: a cross-sectional study. Which aimed to assess the prevalence of utilization of modern PPFP methods during the extended postpartum period and its associated factors in Injibara town, Northwest, Ethiopia. This study revealed that, in comparison to the WHO recommendation for postpartum women, the frequency of use of contemporary PPFP procedures over the prolonged postpartum period among postpartum women in Injibara town was low. Also, the utilization of PPFP methods during the extended postpartum period was significantly correlated with the mother's educational status, the number of ANC visits, counseling about FP during ANC visits and immediately after delivery, discussing the use of modern PPFP with a partner, resuming menstruation after delivery, having good knowledge of FP methods, and linkage to FP unit during child immunization. To conclude, they found that there is also needed to advise women to have a bilateral discussion with their husbands regarding their reproductive issues. Moreover, it is also important to encourage women to start using modern FP methods before the resumption of menses to reduce the risk of getting an unintended pregnancy.

A quantitative study was conducted by (Sileo et al.,2015). About Determinants of family planning service uptake and use of contraceptives among postpartum women in rural Uganda. Which aimed to explore determinants of uptake of family planning services and contraceptive use among postpartum women in rural Uganda. This study revealed that Prenatal and postnatal family planning counseling should take into account the following factors: education, partner communication, and perceived need for family planning. These factors are

important in determining the uptake of postpartum family planning services and the usage of contraceptives.

Furthermore, a quasi-experimental study was conducted by (Wayessa et al., 2020). About Focused Family Planning Counseling Increases Immediate Postpartum Intrauterine Contraceptive Device Uptake: A Quasi-Experimental Study. Which aimed to differentiate whether standard counseling can affect the use of an IUCD during the postpartum period because of its appropriateness. Moreover, the current study aimed to test whether the intervention of the newly designed focused FP counseling approach would increase postpartum IUCD uptake compared to the routine FP counseling approach. So, the results of the study showed that women who received counseling using the newly developed FP counseling technique had a considerably greater proportion of postpartum IUCD uptake than women who received counseling using the regularly used approach. Additionally, it was noted that women counseled using the new strategy had nearly six times greater odds of utilizing IUCD during the postpartum period than did women counseled using the approach that was frequently used.

A descriptive cross-sectional study was conducted by (Al-Musa et al., 2019). About Knowledge, attitude, and practice among Saudi primary health care attendees about family planning in Abha, Kingdom of Saudi Arabia. Which aimed to study the knowledge, attitude and practice (KAP) among primary healthcare Saudi attendees about family planning to help in developing strategies that may enhance the family planning in Abha. In addition, the study revealed that the majority of the attendants to PHC centers were young who were highly educated, and the level of family planning awareness was moderately satisfactory, especially the general knowledge and family planning methods knowledge, but it was not the scenario for complications. Also, health practitioners do not perform their intended role in improving the attendants' awareness regarding family planning, and the family was the main source of knowledge. Furthermore, the attendants' attitude towards child bearing was more towards having only one or two children which is against the nature of Saudi community. So, the researcher recommends that there must be more attention towards the target group of low education to improve their attitude towards the importance of family planning and also health practitioners should do more to improve their awareness and control their practice to avoid complications.

Another cross-sectional study was conducted by (Alsaedi et al., 2018). About Assessment of Knowledge, Attitude and Practice towards Family Planning in Saudi Arabia. Which aimed Evaluating the knowledge, attitude and practice (KAP) regarding the family planning methods in Kingdom of Saudi Arabia (KSA). This study revealed that the participants who have high educational level have high use of contraceptive methods.

In line with a previous study, a cross-sectional study was conducted by (Ali, & Okud, 2013). About Factors affecting unmet need for family planning in Eastern Sudan. Which aimed to provide the stakeholders and programmed managers with fundamental data necessary for intervention to improve the reproductive health in Eastern Sudan. This study revealed that in Eastern Sudan, women with less than a secondary education had a much greater unmet demand for family planning. The woman's job and the couple's level of education both have an impact. The topic of reproductive health education must be considered by program administrators due to the study's findings.

Furthermore, a cross-sectional study was conducted by (Etokidem et al. 2017). About Family planning practices of rural community dwellers in Cross River State, Nigeria. Which seeks to determine the family planning practices of rural community dwellers in Cross River State of Nigeria with a view to inform relevant interventions. This study revealed that 17.2% of the respondents were currently using at least one family planning method. Also, the proportion of respondents who were currently using family planning was low. The findings of this study

suggest that family planning uptake would increase if couples make joint decision in this regard. Although a good proportion of respondents have a positive attitude towards family planning and indicate their willingness to recommend it to others, there is a need to ensure a change of behavior and attitude of the remaining minority whose poor attitude could influence utilization of family planning services by others.

Another cross-sectional study was conducted by (Juma et al., 2015). About Women's attitudes towards receiving family planning services from community health workers in rural Western Kenya. Which pointed to describe the perceptions of women towards family planning service provision by Community Health Workers (CHWs) in four rural districts of Western Kenya. This study conducted that Women's perception towards family planning services delivered by CHWs in Western region in Kenya is quite low. To improve the demand and supply for family planning services in this region, there is need to invest a substantial amount of effort into sensitization of women on the relevance of CHWs in providing family planning services. A cross-sectional study was conducted by (Kanwal et al. , 2017). About Contraceptive utilization among mothers of reproductive age in Ajman, United Arab Emirates. Which aimed to determine contraceptive utilization among mothers of reproductive age in Ajman, UAE. This study revealed that the age of the participants 18–49 years old, the majority of the participants were 25–35 years old (56.8%), expatriates (59.5%), had a graduate level of education or higher (52.3%), were unemployed (74.0%), lived in a nuclear family system (70.3%) and had two children (41.3%). In relation of contraceptive use, a total of 247 participants were current contraceptive users, while 153 had not used any method of contraception within the previous 30 days. Also, in this study they found that the use of contraceptives was significantly higher among expatriates in comparison to Emiratis, and the use of Contraceptive also increased significantly with age >35-year-olds versus ≤25-year-olds. In addition, the use of contraceptive increased when the level of education increased.

2.4 Social-cultural beliefs and subjective norms in relation to family planning services associated with the utilization of postpartum family planning services.

A qualitative study was conducted by (Okal, Serour and Temmerman,2020). about “Children are a blessing from God” a qualitative study exploring the sociocultural factors influencing contraceptive use in two Muslim communities in Kenya. Which aimed to explore the socio-cultural factors influencing FP use among two Muslim communities in Kenya. They used Focus Group Discussions and In-depth Interviews was revealed in two predominant Muslim communities of Lamu and Wajir counties. This study conducted that, despite Islam being the most common religion, there were differences between the two populations views and beliefs regarding the use of family planning , there were opposing views on whether or not Islam permits the use of family planning, as well as varying interpretations of Islamic teaching, this had a detrimental effect on FP usage, along with the desire for a big family, polygamy, high child mortality, and cultural preferences for males. Similarly, a factor encouraging the acceptance of FP was women's lack of autonomy over their reproductive health decisions.

Another cross-sectional study was conducted by (Gage, Wood and Akilimali 2020). About Perceived norms, personal agency, and postpartum family planning intentions among first-time mothers age 15–24 years in Kinshasa: A cross-sectional analysis. Which aimed to examine the association of perceived norms and personal agency with Postpartum family planning intentions among first-time mothers (FTMs) age 15–24 in Kinshasa. This study conducted that, PPFPP intentions are low, with 10-13% of women stated that they were likely to discuss it with partners and health workers, and use contraceptives within six weeks' post-childbirth. In addition, the PPFPP intention index was predicted by description norms, community approval, normative expectations, perceived behavioral control, self-efficacy, and autonomy, according to multivariable linear regression models. Furthermore, the rejection of family planning myths and misconceptions was a significant predictor. Finally, the study

suggests that understanding normative influences and integrating norm-based and empowerment strategies can motivate women to use contraception during the postpartum period.

In line with the previous study, a cross-sectional sociocentric survey conducted by (LahiriI et al., 2018). In two villages in Kilifi County, Kenya about the role of social norms on adolescent family planning in rural Kilifi County, Kenya. This study revealed that, social norms are multifaceted phenomena that have an impact on young people's usage of contemporary contraceptives, particularly for young women in rural Kenya. Women without children who have friends or family who use contemporary contraceptives may feel less stigmatized about using it themselves, this may be a reflection of social influence effects on the usage of contemporary contraceptives as well as gendered disparities in standards.

Additionally, a qualitative study conducted by (Thapa.K et al., in 2019). About Factors affecting the behavior outcomes on post-partum intrauterine contraceptive device uptake and continuation in Nepal: a qualitative study. Which aimed to explore the factors affecting these behavioral outcomes using the theory of planned behavior (TPB) as a theoretical framework. They used 43 in-depth interviews among post-partum mothers who delivered in 3 selected hospitals in Nepal. Data were analyzed through content analysis using the theory of planned behavior (TPB) as the theoretical framework. This study demonstrates how several interrelated factors influenced the behaviors associated with the adoption and maintenance of PPIUD. Although the attitude played a role in influencing intention, it was not necessarily the cause of PPIUD uptake and continuance behavior. Also, behavior control beliefs also played a significant influence on the outcome of the uptake and maintenance of PPIUDs. Thus, in order to bring about good behavioral changes associated to PPIUD, a more multifaceted, multilayered, and interconnected intervention is required.

Furthermore, a qualitative study was conducted by (Ahmed et al., 2015). About Factors Affecting Utilization of Family Planning Services in a Post-Conflict Setting, South Sudan: A Qualitative Study. Which aimed to explore the factors that influence, negatively or positively, the utilization of family planning services and methods in post conflict settings in South Sudan in 2013 using mixed qualitative method. They used focus group discussions and in-depth interviews in rural and urban areas of Renk County, South Sudan. This study exposed that family planning methods are restricted and individuals in Renk County choose to have big families. Furthermore, there are several reasons why family planning services are not used as often. This covers the perceptions and knowledge of the couple, the availability and affordability of family planning methods, the techniques employed, and the barriers to using family planning services.

In addition, a qualitative study was conducted by (West et al., 2016). About Factors in use of family planning services by Syrian women in a refugee camp in Jordan. Which aimed to explore what factors facilitated or limited use of FP services in a Syrian refugee camp in Jordan, in order to identify areas for future research and intervention. They used small-scale qualitative study, interviewing Syrian women residing in a Jordanian refugee camp about use and barriers to accessing family planning services. Moreover, this study investigated the variables that either promoted or hindered Syrian women living in a Jordanian camp from using Family Planning services also, the study discovered that a range of family planning services were offered at the camp yet, there was room to improve the adoption of these services by addressing obstacles such inadequate knowledge of family planning services, overworked health services, and unsuitable staff behavior.

In line with the previous study, a quantitative study was conducted by (Khan et al., 2022). About Impact of Sociocultural Factors on Contraceptive Use: A Case Study of Pakistan. Which aimed to examine the factors driving the usage of contraception and the impact of contraceptive practices on population growth in Pakistan. According to the conducted

analysis, the majority of women in Pakistan's rural areas have lack formal education, and several obstacles prevent them from attending classes or receiving any kind of training that might help them become more self-aware. So, the usage of contraceptives is almost correlated with sociodemographic characteristics (e.g., education, age, language, partner, employment, etc.). Moreover, it was discovered that women with little to no education who lived in rural regions were unaware of contraception. Also, they found that the age and number of children a woman has most likely influences her usage of contraceptives and the techniques by which they utilize them.

A cross-sectional study was conducted by (Abdulai et al., 2020). About Demographic and socio-cultural factors influencing contraceptive uptake among women of reproductive age in Tamale Metropolis, Northern Region, Ghana. Which aimed to elicit information from reproductive aged women, opinion leaders and adolescence on factors that influence contraceptive uptake in the Tamale Metropolis. According to this study, it was revealed that the use of contraceptives was directly correlated with formal education, and women with a secondary education reported using contraceptives more frequently (60.8%). Also, this study has shown that increase in education comes with a corresponding increase in knowledge and uptake of contraceptives, 12 women with secondary education were four times more likely to use contraceptives compared to women with no formal education. So, they found that education and employment status play important roles in the uptake of contraceptives in the Tamale Metropolis.

A quantitative study was conducted by (Böttcher et al., 2019). About Choices and services related to contraception in the Gaza strip, Palestine: perceptions of service users and providers. Which aimed to explore factors that impact on the uptake of modern contraception in the Gaza Strip by investigating the experience and contraceptive practice of family planning (FP) service users, evaluating healthcare professionals' perceptions of FP service provision and examining potential barriers to provide effective patient-centered care in this field. They used convenient sample to recruit women, who were current contraception users, from three healthcare clinics that provide family planning care. In order to this study, it was discovered that women's contraceptive choices in Gaza are limited by prevalent misconceptions and fears as well as recurring shortages, negatively impacting fertility control. Men are a major factor in choosing a contraceptive method, however, they have limited access to information and therefore, potentially more misconceptions. In order to provide women more options, it is necessary to incorporate male community members in the dissemination of contraceptive knowledge. Additionally, increasing availability and access to long-acting reversible contraceptives, such the hormonal implant, may be crucial in boosting contraceptive adoption in Gaza and thus lowering the number of unwanted births.

Furthermore, a qualitative study was conducted by al (Weshahi et al., 2021). About Providers' perspectives of socio-cultural and health service challenges related to postpartum family planning in Alexandria, Egypt. Which aimed to explore sociocultural factors that contribute to non-acceptance and low contraceptive use among postpartum women. According to this study, it revealed that the working experience of participants ranged from 3 to 30 years. The most frequently reported reasons for unmet need for PPF were cultural norms about the contraceptive effects of lactation and inaccurate knowledge of women about the conditions for appropriate use of the lactation amenorrhea as a contraceptive method. The most commonly cited challenge related to the quality of service was the inadequate health education services about PPF. Lack of training and supervision of community health workers was one of the underlying causes of the perceived inadequacy of the service.

Chapter Three

Methodology

3.1 introduction

In this chapter, the researcher will be identifying the methodology applied to collect data to complete this study by describing study design, the population of the study, the sample of the study, ethical considerations, instrumentation, method of data collection and data analysis.

3.2 Study Design

The research design is a quantitative, (non- experimental) cross sectional descriptive design. This design is used to achieve the purpose of the research to investigate the factors that are associated with the utilization of postpartum family planning services among postpartum mothers between 6 and 12 weeks of delivery in the West Bank in Palestine.

3.3 Study Population

The study's population consists of all mothers who had given birth in the last six-twelve weeks in Southern West Bank.

3.3.1The inclusion criteria

- 1.Mothers who gave birth immediately 40 days and more after childbirth.
- 2.Mothers who gave birth to an alive baby.
- 3.Mothers in southern west bank hospital.

3.3.2The exclusion criteria

- Mothers who gave birth less than 40 days after childbirth.
- A mother who gave birth to a stillborn baby.
- Mothers outside of the Southern West Bank.

3.4 Study setting

- This study was carried out at 8 governmental and non-governmental hospitals in Southern West Bank. In Bethlehem and Hebron hospitals, which were selected based on the availability. Namely, the Holy Family Hospital (HFH) & Beit Jala Governmental Hospital, Al-Debs Hospital, Al-Daman Hospital were selected from Bethlehem, and.

Al-Ahli Hospital, Alia Governmental Hospital and Palestinian Red Crescent Hospital, Al-Mezan Hospital were selected from Hebron.

- **Beit Jala Governmental Hospital**, also known as Al-Hussein Governmental Hospital, is a public hospital in Beit Jala, Palestine's West Bank (Wikipedia, 2022).
- **Al-Debs Hospital**, is a private hospital in Bethlehem region of the West Bank.
- **Al-Daman Hospital, also known as Shepherd's Field Hospital**, is a private hospital, Palestine's West Bank (Cooperative Work Agency,2020).
- **Holy Family Hospital**, is the premier maternity hospital and neonatal critical care center in the Bethlehem region of the West Bank.
- **Palestinian Red Crescent Hospital**: Red Crescent Hospitals in Hebron is a part of The Palestine Red Crescent Society that is a national society with an independent, officially recognized legal personality, and it is one of the components of the International Movement of the Red Cross and Red Crescent.
- **Al-Ahli Hospital**: it is non-governmental, non-profit, non-politicized charitable. Its strategic objective is to raise the level of services health care in Hebron governorate in particular.
- **Alia Governmental Hospital**: also known as Hebron Governmental Hospital, or Princess Alia Governmental Hospital, is a public hospital in Hebron, Palestine's West Bank.
- **Al-Mizzan Hospital**: it was established in 1996 in Hebron. It is a private hospital.

3.5 Sample size

The sample size of this convenience study was collected upon Raosoft calculator with margin of error 5% and confidence level 90%, the minimum participants' number required to analyze the study is 200 (Raosoft, 2007). yielding a response rate of 89.5%. The total number of mothers in the mentioned hospitals was 179.

3.6 Sampling method

Participants were recruited to the study employing the convenience sampling method. Mothers who met the inclusion criteria and were at hospital during the data collection period were invited to participate in the study to fill in the questionnaire composed the study sample.

3.7 Data Collection Instruments

Data was collected using a structured and pre-tested self-administered questionnaire adapted from previously validated tools and modified from a similar study (Bwazi, 2012).

The questionnaire consists of multiple-choice questions to achieve the objective of the research. The researcher administrated a four-section questionnaire, the first section of the questionnaire will cover the participants' socio-demographic data and the other three sections will be about women's Knowledge of family planning services postpartum, The impact of personal criteria on family planning services, Beliefs and cultures about family planning and subjective norms.

3.8 Validity

The validity for questionnaire was ensured through several measures. Content validity was established by developing the questionnaire and scale based on a thorough review of the literature and existing validated scales. A panel of experts in midwifery, and interprofessional teamwork reviewed the content to ensure it adequately captures the constructs of interest. In addition, the questionnaire adapted from previously validated tools and modified from a similar study (Bwazi, 2012). Then was translated to Arabic and back translated into English. Back translation is a common validation technique in worldwide research contexts. (Tyupa, 2011). The researcher sought opinion from supervisor and the

translation was reviewed. Moreover, the researcher verified the validity of the study tool through feedback from the pilot study, where the participants in the pilot study showed their interaction in answering the study questions and there was no problem for them in understanding the questions.

3.9 Reliability

The reliability of the instrument was assessed through internal consistency using Cronbach's alpha coefficient.

3.10 Pilot Study

Pilot studies are Mini versions of larger studies, as well as the specialized pre-testing of a specific research instrument, such as a questionnaire or interview schedule. Pilot studies are an essential component of a solid study design. Pilot studies accomplish a variety of vital purposes and can provide valuable insights to other researchers. For the purposes of preparing the pilot study, the researcher distributed the questionnaire to a sample outside the study population. The pilot study was conducted on 15 mothers who were selected from The Beit-Jala hospital in Bethlehem and were not included in the sample population to test the feasibility of tools and time required to be applied. The time required to fill the questionnaire was about ten minutes, and no modification was done.

3.11 Data collection

The data were collected from mothers in Palestinian governmental and non-governmental Palestinian hospital. The questionnaire created for this purpose was used to compile the study sample. Before analysis, the data was cleaned and validated for accuracy and completeness, after receiving ethical approval from the hospital administrations and the Scientific Research Committee at Al-Quds University. All mothers at the eight hospitals who met the eligibility requirements were asked to complete the study questionnaire and given a permission form with all the study's details. It was optional to take part in the study. During the data collection procedure, no names or other forms of identification or personal documentation were included. The agreement of mothers to take part in the study has been regarded as consent for participation. The study's goal was stated on the consent form. The questionnaires were given to the participants directly from the researcher and explanation was done for the purpose of the study, and they filled questionnaire alone.

3.12 Data Analysis

The collected data was analyzed by the Statistical Package for Social Sciences (SPSS) Version (28). Data entry was double-checked for outliers or errors. Data were tested for normality using the Kolmogorov-Smirnov and Shapiro-Wilk tests. The Kolmogorov-Smirnov and Shapiro-Wilk test showed that the data was not normally distributed for both the knowledge and the attitude scores ($p < 0.005$).

3.13 Ethical consideration

Ethical approval was obtained from the Research Ethics Committee at Al-Quds University. Administrative permissions from hospitals were granted, after obtaining the ethical approval and selection of the participants. Every participant has the right to self-determination by voluntary participating without penalty or prejudice. In addition, their responses to the survey will be anonymous and their confidentiality will be preserved also, the data were just used for scientific reason only and it will not affect their personal or professional life in any way. Moreover, participants will receive an explanation about the purpose and nature of the research by a written consent form.

Normality of knowledge and contraceptive uses sum scores

The Kolmogorov-Smirnov and Shapiro-Wilk tests were conducted to evaluate the normality of the distribution of the knowledge and contraceptive uses sum scores. The results showed significant values for both scores across both tests, indicating that the data significantly deviate from a normal distribution (p-values < 0.001). Therefore, these scores are not normally distributed, suggesting that non-parametric statistical methods were conducted.

Table 3.1: Tests of Normality

Variables	Kolmogorov-Smirnov			Shapiro-Wilk		
	Statistic	Df	P-value	Statistic	df	P-value
Knowledge sum score	.177	179	<0.001*	.894	179	<0.001*
Contraceptive uses sum score	.267	179	<0.001*	.714	179	<0.001*

*Significant levels at $p\text{-value} \leq 0.05$

Chapter Four:

Results

4.1 Socio-demographic characteristics

The study involved 179 participants, yielding a response rate of 89.5%. Among the respondents, 96 (53.6%) were aged 28 years and above. At the time of data collection, 78 participants (43.6%) held a diploma, while 22 (12.3%) had a bachelor's degree.

In terms of reproductive history, 71 participants (39.7%) reported having 3-4 pregnancies, while 69 participants (38.5%) reported 1-2 pregnancies. Regarding live births, over half (101 participants or 56.4%) had 1-2 live births, followed by 59 participants (33.0%) who had 3-4 live births. A majority (105 participants or 58.7%) reported no previous miscarriages, while 67 participants (37.4%) had experienced 1-2 miscarriages.

For the age of their last child, the largest group had children aged 1-2 years (41.3%), followed by those with children aged 3-4 years (24.4%) and 5 years or older (34.3%). Regarding healthcare facility preferences, the highest percentage of participants (17.3%) visited Al-Hussein Governmental Hospital, with other hospitals seeing patient visits ranging from 8.4% to 16.2%.

Table 4.2: Socio-demographic characteristics (n=179)

Variable	Characteristics	n	%
Age group	Less than 18 years	6	3.4
	18-27 years	77	43.0
	28 year and above	96	53.6
Level of education	Primary education	14	8.1%
	Secondary education	14	7.8
	Diploma Degree	78	43.6
	Bachelor's Degree or higher	22	12.3
Number of pregnancies	1-2 times	69	38.5
	3-4 times	71	39.7
	5 times and more	39	21.8
Number of live births	1-2 live birth	101	56.4
	3-4 live birth	59	33.0
	5 live births and more	19	10.6
Number of miscarriages	1-2 times	67	37.4
	3-4 times	7	3.9
	None	105	58.7
The age of your last child	1-2 years old	76	42.5
	3- 4 years old	44	24.6
	5 years and above	59	33.0
Hospital name	Al-Mezan Specialist Hospital	14	7.8
	Saint Joseph Hospital	22	12.3
	Dibs Hospital	15	8.4
	Dahman Hospital	17	9.5
	Alia governmental Hospital	25	14.0
	Red Crescent Hospital	26	14.5
	Al-Ahli Hospital	29	16.2
	Al-Hussein Governmental Hospital	31	17.3

4.2 Awareness on family planning services

The data in Table 2 shows that a large majority of mothers are aware of family planning methods, with 83.1% confirming their awareness, while a smaller proportion (16.9%) reported not being aware.

Table 4.3 Awareness of mothers toward family planning methods

Item	Category	N	%
Are you aware of the family planning methods available in family planning clinics for postpartum mothers during the first year of giving birth?	Yes	143	79.9
	No	36	20.1

4.3 Aware of modern Family Planning methods utilized

The data shows that a majority of participants were familiar with several contraceptive methods. Most notably, 114 participants (63.7%) knew about intrauterine devices (IUDs), 106 (59.2%) were aware of hormonal contraceptive pills, and 74 (41.3%) recognized the male condom as a method. Additionally, 72 participants (40.2%) were familiar with

breastfeeding as a form of contraception, and 46 (25.7%) knew about tubal ligation. A notable portion also reported familiarity with contraceptive implants (43 participants or 24.0%), the withdrawal method (35 participants or 19.6%), and injection (41 participants 22.9%).

Table 4.4 Aware of modern Family Planning methods utilized (n=179)

Type of Contraceptive methods	Yes		No	
	N	%	N	%
1. Breastfeeding	72	40.2	107	59.8
2. Pills	106	59.2	73	40.8
3. Intrauterine Device (IUD)	114	63.7	65	36.3
4. Injections	41	22.9	138	77.1
5. Contraceptive Implant	43	24.0	136	76.0
6. Male Condom	74	41.3	105	58.7
7. Female Condom	11	6.1	168	93.9
8. Withdrawal	35	19.6	144	80.4
9. Calendar Method	18	10.1	161	89.9
10. Tubal Ligation	46	25.7	133	74.3
11. Vasectomy	19	10.6	160	89.4
12. Emergency Contraceptive Pills	27	15.1	152	84.9
13. Other Methods (Spermicides and cervical cap)	8	4.5	171	95.5

4.4 Utilization of family planning methods

The study aimed to assess the proportion of women in Palestine who used family planning methods after childbirth. Findings revealed that the majority—96 respondents (53.6%)—had not used any family planning method postpartum. The remaining 83 respondents (46.4%) reported using a method at various intervals: 69 (38.5%) between 4 weeks and 3 months, 5 (2.8%) between 4 and 6 months, 3 (1.7%) between 7 and 9 months, and 6 (3.4%) between 10 and 12 months after giving birth. These results are detailed in Table 4.4.

Table 4.5 Utilization of family planning among participants

	Frequency	%
Don't use	96	53.6
6weeks-3 months	69	38.5
4-6 months	5	2.8
7-9 months	3	1.7
10-12 months	6	3.4

4.4.1 Reasons for not using family planning

The data highlights the reasons given by 96 participants for not using contraceptive methods. The most common reasons were evenly distributed between "I recently gave birth" (40 participants or 41.7%) and "I'm trying to get pregnant" (33.3%). Another significant reason, cited by 26.0% of respondents, was that contraceptives were not compatible with their bodies. These findings reflect a range of personal and health-related considerations that influence the decision to avoid contraceptive use

Table 4.6 Reasons for not using a family planning method among respondents (N=198)

		N	%
If not, why?	I recently gave birth	40	41.7%
	I'm trying to get pregnant	32	33.3%
	Did not compatible my body	24	26.0 %

4.4.2 Family planning methods ever used (n=96)

The study also aimed to identify the types of family planning methods used by the respondents. Findings revealed that 41 participants (42.7%) had used an Intrauterine Device (IUD), making it the most commonly used method, followed by 15 participants (15.6%) who had used birth control pills. These results are detailed in Table 4.6.

Table 4.7: Current Use of Family Planning by (n=179)

Contraceptive methods	Used FP	
	n	%
1. Breastfeeding	8	8.3
2. Pills	15	15.6
3. Intrauterine Device (IUD)	41	42.7
4. Contraceptive Implant	2	0.2%
5. Male Condom	10	10.4
6. Withdrawal	7	7.3
7. Calendar Method	3	0.3

4.5 Location of received education about family planning services before the birth of your last child

The data details the settings in which participants received family planning education prior to the birth of their most recent child. The most frequently cited source was family planning clinics, where 60.5% of participants obtained information. Pregnancy care clinics followed, with 43.6% receiving education there. Less common sources included the postpartum department (20.3%), the delivery room (9.9%), and home visits by service providers (1.7%). Most participants did not receive family planning education in these less common settings—98.3% did not during home visits, 90.1% did not in the delivery room, and 79.7% did not in the postpartum department.

Table 4.8 Location of received education about family planning services before the birth of your last child (n=179)

Location		n	%
Antenatal clinic	No	97	56.4%
	Yes	82	43.6%
Family planning clinic	No	75	39.5%
	Yes	104	60.5%
During home visits by service providers	No	169	98.3%
	Yes	10	1.7%
Delivery room	No	155	90.1%
	Yes	24	9.9%
Postpartum department	No	137	79.7%
	Yes	42	20.3%

4.6 Information on Family Planning

Among the respondents who adopted a family planning (FP) method, information was provided to support their choices. Of these, 67.0% received guidance on the appropriate timing for birth spacing. Additionally, 32.4% were informed about breastfeeding, while 30.2% were given details on suitable family planning methods for managing fertility. A summary of these findings can be found in Table 8.

Table 4.9 Information on Family Planning (n=179)

Topic		n	%
The appropriate timing for birth spacing.	No	59	33
	Yes	120	67
Breast feeding	No	121	67.6
	Yes	58	32.4
Appropriate family planning methods to regulate fertility.	No	125	69.8
	Yes	54	30.2
Is the topic and information being clear?	No	43	24.0
	Yes	136	76.0

4.7 Beliefs and cultures about family planning

The data sheds light on the beliefs and cultural perspectives surrounding family planning among 179 participants. A large majority (74.3%) identify with a specific religious sect, mainly Islam (76.0%) and Christianity (24.0%). When asked about the acceptance of modern family planning methods within their sects, 89.4% reported that such practices are permitted, while 5.0% said they are not allowed, and 9.5% believed they are conditionally acceptable. Cultural attitudes toward family planning also appear favorable, with 89.0% stating that their traditional culture supports the use of these services. Only 1.2% noted a cultural prohibition, and 9.9% said it depends on specific circumstances. Furthermore, modern methods like IUDs, injectable, condoms, and birth control pills are widely used, with 89.5% of

respondents reporting usage. Just 0.6% indicated non-use, and 9.9% saw these methods as potential options. Overall, the data points to strong religious and cultural acceptance of modern family planning within the surveyed communities.

Table 4.10 Frequency and percentages toward beliefs and cultures about family planning information (n=179)

Item		N	%
Do you belong to a certain sect?	Yes	133	74.3
	No	46	25.7
If yes, what is the type of sect	Islam	136	76.0
	Christianity	43	24.0
Does your sect allow you to use modern family planning methods?	Yes	160	89.4
	No	4	2.2
	Possible	15	8.4
Does your traditional culture allow you to use family planning services?	Yes	153	85.5
	No	9	5.0
	Possible	17	9.5
Do people in your city/village/camp use modern family planning methods such as (IUDs, needles, condoms, birth control pills, etc...)?	Yes	154	86.0
	No	1	0.6
	Possible	24	13.4

4.8 The impact of personal standards on family planning services

The data illustrates how personal values shape family planning decisions among 179 mothers. When it comes to desired family size, the majority (61.5%) aim to have 3–4 children, while 17.9% prefer 1–2, and 20.7% want more than four children. In terms of when they plan to have their next child, 41.3% intend to do so within the next two years, followed by 19.0% within three years. Smaller portions are planning for longer intervals—9.5% within four years and 1.7% within five years—while 28.5% do not plan to have any more children.

On the topic of family size discussions with spouses, 65.4% of women reported having talked with their husbands about how many children he wants, whereas 34.6% had not. Among those who did discuss it, 37.2% said their husbands preferred 3–4 children, 59.2% favored more than four, and only 12.8% preferred 1–2 children. These findings underscore the role of both individual preferences and mutual discussions in shaping family planning choices.

Table 4.11 The impact of personal standards on family planning services among mother (n=179)

4.9 Who

		N	%
How many children do you intend to have in life?	1-2 children	32	17.9
	3-4 children	110	61.5
	>4 children	37	20.7
When do you plan to have another child?	Within two years	74	41.3
	Within 3 years	34	19.0
	Within 4 years	17	9.5
	Within 5 years	3	1.7
	I do no indent to have children	51	28.5
Have you ever discussed with your husband how many children he wants to have?	Yes	117	65.4
	No	62	34.6
If yes, how many children would your husband prefer to have?	1-2 children	23	12.8
	3-4 children	106	59.2
	>4 children	50	27.9

influences your decisions about practicing family planning?

The data reveals various factors influencing family planning practices among 179 respondents, with many indicating the involvement of multiple influencers. The most prominent influence comes from husbands, cited by 59.9% of participants. The respondents' own families also play a notable role, influencing 17.3% of individuals. Interestingly, 36.3% reported that their family planning decisions are made independently, without external influence. Other sources of influence, such as the husband's family (5.6%) and friends (2.2%), were mentioned less frequently. Overall, the findings emphasize the strong impact of close family members—particularly husbands—on family planning choices.

Table 4.12: Frequency and percentages of the Influencers of practicing family planning (n=179)

Influencers	N	%
Your husband	100	59.9
Your husband's family	10	5.6
Your family	31	17.3
Your friends	4	2.2%
No one	65	36.3

Possible more than one answer

4.9.1 Husband Support

The data highlights the extent of husband involvement in family planning matters among 179 participants. A large majority (71.5%) indicated that their husbands are supportive, while 28.5% reported a lack of support. Among those receiving support, the most common forms included financial assistance (50.8%), providing transportation (21.8%), reminders

for consultation appointments (21.2%), and condom use (17.9%). Participants could select multiple types of support, reflecting a diverse range of contributions. These findings suggest that when husbands are supportive, they often play an active, practical role in helping their partners access family planning services.

Table 4.13: Frequency and percentages of husband support (n=179)

		N	%
Does your husband support you in matters related to family planning services?	Yes	129	72.1
	No	58	32.4
If yes, how can your husband best help you when it comes to using family planning services? (Possible more than one answer)	Providing you with transportation	39	21.8
	Reminding you of your scheduled consultation appointment	38	21.2
	Financial support	91	50.8
	Use condoms	32	17.9

4.9.2 Whose opinion is important in your family regarding reproductive issues?

The data sheds light on whose opinions hold weight in reproductive decision-making among 179 participants. The husband's opinion is seen as the most influential, with 58.7% of respondents valuing his input, while 41.3% do not. In sharp contrast, the opinions of the husband's family (2.1%), the participant's own family (10.6%), and friends (1.1%) are largely deemed unimportant. Interestingly, 11.2% of participants report that no one's opinion matters to them in these decisions, underscoring a notable emphasis on personal autonomy alongside a predominant consideration of the husband's perspective.

Table 4.14: Frequency and percentages of whose opinion is important in your family regarding reproductive issues (n=179)

	Yes		No	
	N	%	N	%
Husband	105	58.7	74	41.3
Husband's family	2	2.1	175	97.9
My family	19	10.6	160	89.4
Friends	2	1.1	177	99.7
No one	20	11.2	159	88.8

4.10 Correlation Analysis

In the correlation matrix, the relationships between the variables can be seen more clearly (Table 4.15). Contraceptive use and three of the sociodemographic characteristics were positively correlated, namely, with number of pregnancies $r = .468$, $p < .001$, with number of live births $r = .560$, $p < .001$ and age of last child $r = .562$, $p < .001$. On the other hand, contraceptive method use was negatively correlated with some of the sociodemographic characteristics namely, education $r = -.316$, $p < .001$, awareness of contraceptive method $r = -.217$, $p = 0.004$.

Table 4.15: Correlation Matrix of Contraceptive Use Methods

Variables		1	2	3	4	5	6	7
1- Age. Group	Pearson Correlation	1						
	Sig. (2-tailed)							
2- Education	Pearson Correlation	.316**	1					
	Sig. (2-tailed)	.000						
3- NO. of Pregnancies	Pearson Correlation	.468**	-.373**	1				
	Sig. (2-tailed)	.000	.000					
4- NO. of live birth	Pearson Correlation	.560**	-.316**	.722**	1			
	Sig. (2-tailed)	.000	.000	.000				
5- AGE of last Child	Pearson Correlation	.562**	-.228**	.505**	.551**	1		
	Sig. (2-tailed)	.000	.002	.000	.000			
7- Awareness of Contraceptive	Pearson Correlation	.217**	-.083	-.277**	-.227**	.349**	1	
	Sig. (2-tailed)	.004	.271	.000	.002	.000		
8- husband support	Pearson Correlation	.085	-.073	.140	.135	.170*	-.001	1
	Sig. (2-tailed)	.257	.331	.062	.071	.023	.985	
9- Use of contraceptive methods	Pearson Correlation	.373**	.127	-.464**	-.468**	.558**	.479*	.009
	Sig. (2-tailed)	.000	.091	.000	.000	.000	.000	.905

Chapter Five:

Discussion

5.1 Introduction

This section focuses on the discussion which is based on the findings of this study. The main purpose of the study was to investigate the factors that are associated with the utilization of postpartum family planning services among postpartum mothers between 6 and 12 weeks of delivery in the West Bank in Palestine. The study's results have been evaluated and compared to the findings of other related studies.

5.2 Discussion

The study aimed to investigate the factors that are associated with the utilization of postpartum family planning services among postpartum mothers between 6 and 12 weeks of delivery in the West Bank in Palestine.

The current study's findings revealed that the study involved 179 participants, yielding a response rate of 89.5%. Among the respondents, 96 (53.6%) were aged 28 years and above. At the time of data collection, 78 participants (43.6%) held a diploma, while 22 (12.3%) had a bachelor's degree. It was similar with the study done in Ethiopia; a study showed that the average age of the sample under study was 27.6 years old. Moreover, (27.5%) and (47.7%) participants had attended secondary and tertiary level education, respectively. (Tafa, Worku, 2021)

For the age of their last child, the largest group (41.3%), had children aged 1-2 years followed by those with children aged 3-4 years (24.4%) and 5 years or older (34.3%). Which consist with a study done in Ethiopia that revealed there is an increased risk in premature birth and low birth weight less than 2500g two times if pregnancy occurs 6 months after delivery. In addition, children who born for mothers within two years are 60% more likely to die during infancy than those delivered above two years. (Andaulem et al.,2022)

Awareness on family planning services

The result of this study shows that 83.1% affirming their awareness of family planning method, while a smaller segment (16.9%) reported a lack of awareness about the question are you aware of the family planning methods available in family planning clinics for postpartum mothers during the first year of giving birth. the current study's finding is similar for adequate knowledge when compared with the studies done in Ethiopia 70.3%, have affirming their awareness (Seifu, Yilma, & Daba, 2020).

Aware of modern Family Planning methods utilized

The data revealed that a majority of participants were familiar with several contraceptive methods. Most notably, 114 participants (63.7%) knew about intrauterine devices (IUDs), 106 (59.2%) were aware of hormonal contraceptive pills, and 74 (41.3%) recognized the male condom as a method. This result is similar with study done in Palestine which revealed that intrauterine devices were most commonly used 41%, followed by oral contraceptives 21%. Progestogen-only pills were the most frequently used type of oral contraceptive (Böttcher, Abu-El-Noor and Abu-El-Noor, 2019).

As utilization of family planning method, the study aimed to assess the proportion of women in Palestine who used family planning methods after childbirth. Findings revealed that the majority had not used any family planning method postpartum and the remaining respondents (46.4%) reported using a method at various intervals between 4 weeks and 3 months (38.5%), 2.8% between 4 and 6 months, (1.7%) between 7 and 9 months, (3.4%) between 10 and 12 months after giving birth, and the reasons for not using family planning were distributed between "I recently gave birth" and "I'm trying to get pregnant" Another significant reason was that contraceptives were not compatible with their bodies. These findings reflect a range of personal and health-related considerations that influence the decision to avoid contraceptive use. Similar study was done in Sudan revealed that the practice of using contraception method was poor due to two causes which are: fear of contraception side effects and women wanted more children (Handady et al., 2015).

Family planning methods ever used (n=96)

The study also aimed to identify the types of family planning methods used by the respondents. Findings revealed that (42.7%) had used an Intrauterine Device (IUD), making it the most commonly used method, followed by (15.6%) who had used birth control pills. Correspondingly, with result of study done in Saudi Arabia which reported that oral contraceptive pills (OCP) (97.2%) intrauterine devices (IUD) (97.2%) and male condoms (92.9%) were the most known and popular contraception methods used (Alsharif,2023).

Location of received education about family planning services before the birth of your last child.

The data outlines where participants received education about family planning services before the birth of their last child. The most common location for receiving such education was at family planning clinics, Pregnancy care clinics followed, less common sources included the postpartum department. In contrast with study done in Malawi, which reported that the mothers received their information about family planning method was from antenatal clinic (Bwazi,2012).

Beliefs and cultures about family planning

The data highlights on the beliefs and cultural perspectives surrounding family planning among 179 participants. A large majority (74.3%) identify with a specific religious sect, mainly Islam (76.0%) and Christianity (24.0%). When asked about the acceptance of modern family planning methods within their sects, 89.4% reported that such practices are permitted, while 5.0% said they are not allowed, and 9.5% believed they are conditionally

acceptable. Consistently with result of study done in Southwest Nigeria which showed that family planning choices vary based on the couple's religion, with Islam and Christianity advocating for more children, while Catholicism restricts contraception based on "God's will to bring children" into world. (Olaitan et al., 2017).

The impact of personal standards on family planning services

The data illustrates how personal values shape family planning decisions among 179 mothers. When it comes to desired family size, the majority (61.5%) aim to have 3–4 children, while 17.9% prefer 1–2, and 20.7% want more than four children. In terms of when they plan to have their next child, 41.3% intend to do so within the next two years, followed by 19.0% within three years. Smaller portions are planning for longer intervals—9.5% within four years and 1.7% within five years—while 28.5% do not plan to have any more children. In contrast with study done in Malawi which reported that Regarding spouse wish, 33% of the respondents reported that their spouses would want to have 5 children and above in their lives. (Bwazi, 2012).

On the topic of family size discussions with spouses, 65.4% of women reported having talked with their husbands about how many children he wants, whereas 34.6% had not. Among those who did discuss it, 37.2% said their husbands preferred 3–4 children, 59.2% favored more than four, and only 12.8% preferred 1–2 children. These findings underscore the role of both individual preferences and mutual discussions in shaping family planning choices. Correspondingly with a study done in Northwest Ethiopia which reported that the majority (88.5%) of the respondents ever discussed on family planning issues with their partners and wants to use it in the future. (Kasa, Tarekegn, & Embiale; 2018).

Who influences your decisions about practicing family planning?

The data reveals various factors influencing family planning practices among 179 respondents, with many indicating the involvement of multiple influencers. The most prominent influence comes from husbands, cited by 59.9% of participants. The respondents' own families also play a notable role, influencing 17.3% of individuals. Interestingly, 36.3% reported that their family planning decisions are made independently, without external influence. In similar with study done in Malawi which stated that (40.9%) said husbands' opinions were more important in issues of reproduction while only 5 respondents (2.6%) said they were given chances by their spouses to decide or participate on the issues regarding their reproduction. (Bwazi, 2012).

According to husband support the data provides that the majority of women indicated that their husbands are supportive. Among those receiving support, the most common forms included financial assistance, providing transportation, reminders for consultation appointments, condom use. Harmoniously with study done in Ntchisi District Hospital which stated that the respondents said their spouses provided them with transport by means of transport to FP clinic, and the other participant were assisted in forms of items or finances. (Bwazi, 2012).

In addition, the data sheds light on whose opinions hold weight in reproductive decision-making among 179 participants. The husband's opinion is seen as the most influential. Similarly, with a study done in Malawi which conducted that (40.9%) of respondents said husbands' opinions were more important in issues of reproduction while (2.6%) of respondents said they were given chances by their spouses to decide or participate on the issues regarding their reproduction. (Bwazi, 2012).

Strengths of the study

1. The studies conducted at the different level in eight hospitals (governmental & private) were included in the study to make it representative.
2. Previous studies on women's knowledge and attitudes towards family planning methods in Southern West Bank in Palestinian hospitals are lacking, but this information will serve as a baseline for future research.

Limitations of the study

1. The researcher's ability to generalize the findings to the general population of Palestinian women limited by the use of convenience sampling.
2. The cross-sectional study design and the fact that some women might not have responded to the survey.
3. The data obtained during the postpartum period may be influenced by the emotions of these mothers since their emotions during that period were not stable which may influence the results.

Conclusion

Adequate family planning knowledge among women of childbearing age is essential in their general uptake of various modern family planning methods. The findings of this study demonstrate various factors that hinder women's knowledge about family planning, thereby limiting their overall utilization of modern methods.

There is insufficient use of PFP services in Southern West Bank Hospitals. Findings revealed that the majority (53.6%) had not used any family planning method postpartum. Furthermore, there is a relationship between Women knowledge and their levels of education, there is a need for upgrading the levels of women education. Furthermore, increase the awareness of women about family planning may give better chances for the women to develop their knowledge towards Family planning method utilization.

Recommendation

1. There is need for similar study to be done on women in large samples for wider generalization.
2. There is need to raise awareness among Palestinian women about Factors Associated with Utilization of Postpartum Family Planning Services in Health centers and in the hospitals.
3. Healthcare providers and policy-makers should implement continuous community-based counseling and interventions to encourage active participation of women in postpartum family planning utilization.
4. Further research is needed to comprehensively understand the factors influencing family planning usage and strategies to mitigate these issues.

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استبانة البحث

السلام عليكم

أنا الطالبة (حنان شحادة محمود شحادة) أقوم بأجراء دراسة حول " مدى معرفة الامهات حول خدمات تنظيم الاسرة والعوامل المرتبطة باستخدام تلك الخدمات بعد الولادة في مستشفيات جنوب الضفة الغربية" وتعد هذه الاستبانة جزء من هذه الدراسة لاستكمال متطلبات رسالة الماجستير.

عزيرتي الام تهدف هذه الدراسة الى التعرف على العوامل المرتبطة بالاستفادة من خدمات تنظيم الأسرة بعد الولادة بين الأمهات في مستشفيات جنوب الضفة الغربية.

في حال موافقتك على المشاركة في هذه الدراسة فان مشاركتك ستكون طوعية وتتطلب فقط تعبئة الاستبانة الحالية، وتحتاج تعبئة هذه الاستبانة مدة 10 دقيقة تقريباً.

لديك الحق الكامل في رفض المشاركة أو التوقف عن المقابلة في أي وقت تشاء/ين، جميع المعلومات التي سيتم جمعها خلال البحث سيعامل معها بسرية تامة من قبل الباحثين، إذ أنه سيتم جمع المعلومات دون التطرق لهوية المشاركة، ولا لأي معلومة قد تدل على هويتك.

إنّ المعلومات التي ستزودنا بها مفيدة جداً لتحقيق الهدف الأساسي من هذه الدراسة وإلى إحداث تغيير في صحة المرأة وتشجيع المعنيين على تطوير وتحسين السياسات الصحية التي يمكنها أن تؤسس لمستقبل أفضل لنساء فلسطين لذا، يرجى منك تحري الدقة والمصادقية في الإجابة عن الأسئلة، لتعكس حقيقة رأيك بشكل سليم، وسيكون رأيك محل التقدير والاعتبار، وسوف تنتهي مشاركتك في البحث بمجرد الانتهاء من الإجابة على الاستبانة.

أنت على استعداد للمشاركة في الدراسة؟

-نعم

-لا

تفضلوا بقبول فائق الاحترام

الطالبة: حنان شحادة محمود شحادة

المشرف: د. فريد غريب

أسئلة الاستبيان

الجزء الأول:

❖ بيانات شخصية:

العمر: _____

الحالة الاجتماعية:

1. متزوجة
2. عزباء
3. أرملة
4. مطلقة

مستوى التعليم:

1. مرحلة أساسية
2. مرحلة ثانوية
3. دبلوم
4. مرحلة جامعية

عدد مرات الحمل:

1. 1-2 مرات
2. 3-4 مرات
3. 5 وأكثر

عدد المواليد الأحياء:

1. 1-2 مرات
2. 3-4 مرات
3. 5 أو أكثر

عدد حالات الاجهاض:

1. لا يوجد
2. 1-2 مرة
3. 3-4 مرات
4. 5 وأكثر

عمر آخر طفل لديك:

1. 1-2 سنوات
2. 3-4 سنوات
3. 5 سنوات أو أكثر.

الجزء الثاني:

❖ المعرفة بخدمات تنظيم الأسرة بعد الولادة:

هل أنت على دراية بأساليب تنظيم الأسرة المتوفرة في عيادات تنظيم الاسرة للأمهات بعد الولادة خلال السنة الأولى من الولادة؟

1. نعم
2. لا

إذا كانت الإجابة بنعم، فما هي هذه أساليب منع الحمل التي تعرفينها؟

الرقم	الوسيلة	نعم	لا
1.	الرضاعة الطبيعية		
2.	الحبوب		
3.	اللؤلؤ		
4.	الأبر		
5.	شريحة منع الحمل		
6.	الواقي الذكري		
7.	الواقي الأنثوي		
8.	العزل		
9.	العد		
10.	ربط قناة فالوب		
11.	قطع القناة المنوية عند الرجل		
12.	حبوب منع الحمل الطارئة		
13.	طرق أخرى حدد (مبيد/قاتل الحيوانات المنوية أو غطاء عنق الرحم)		

هل تستخدمين حالياً أي وسيلة لمنع الحمل منذ ولادة آخر مولود لك لتأخير الحمل أو تجنبه؟

1. نعم
2. لا

إذا كانت الإجابة "لا"، فلماذا؟

إذا كانت الإجابة "نعم"، فما الطريقة (الأساليب) التي تستخدمها حالياً؟

في أي عمر من آخر طفل أنجبت بدأت في استخدام طريقة تنظيم الأسرة المذكورة أعلاه؟

أستخدم

2. 6 أسابيع - 3 أشهر

3. من أشهر 4 - 6 أشهر

4. من 7 - 9 أشهر

. من 10 - 12 شهراً

الوسيلة	نعم	لا
الرضاعة الطبيعية		
الحبوب		
اللؤلؤ		
الأبر		
شريحة منع الحمل		
الواقي الذكري		
الواقي الأنثوي		
العزل		
العد		
ربط قناة فالوب		
قطع القناة المنوية عند الرجل		
حبوب منع الحمل الطارئة		
طرق أخرى حدد		

أين تلقيت التثقيف حول خدمات تنظيم الأسرة قبل ولادة الطفل الأخير (يرجى التحقق من الموقع)

لا	نعم	الموقع
		1. عيادة رعاية الحوامل
		2. عيادة تنظيم الأسرة
		3. خلال الزيارات المنزلية من قبل مقدمي الخدمة
		4. غرفة الولادة
		5. قسم ما بعد الولادة

ما هي المعلومات التي تمت تغطيتها حول تنظيم الأسرة خلال استشارة ما بعد الولادة؟

لا	نعم	المعلومات
		1. التوقيت المناسب للمباعدة بين الولادات.
		2. الرضاعة الطبيعية الخالصة
		3. وسائل تنظيم الأسرة المناسبة لتنظيم الخصوبة.

هل كانت المعلومات واضحة؟

1. نعم
2. لا

الجزء الثالث:

❖ المعتقدات والثقافات حول تنظيم الأسرة

هل تنتمي ل طائفة معينة؟

1. نعم
2. لا

إذا كانت اجابتك نعم، الى اي طائفة تنتمي؟

هل طائفتك تسمح لك باستخدام وسائل تنظيم الأسرة الحديثة مثل (اللولب، الابر، الواقي الذكري، حبوب منع الحمل، الخ.. للحد من الانجاب؟

1. نعم
2. لا
3. ممكن

هل تسمح لك ثقافتك التقليدية باستخدام خدمات تنظيم الأسرة؟

1. نعم
2. لا
3. ممكن

هل يستخدم الناس في مدينتك / قريتك / مخيمك طرقاً حديثة لتنظيم الأسرة مثل (اللؤلؤ، الابز، الواقي الذكري، حبوب منع الحمل، الخ...؟

1. نعم
2. لا
3. ممكن

الجزء الرابع:

❖ تأثير المعايير الشخصية على خدمات تنظيم الأسرة

كم عدد الأطفال الذين تنوي إنجابهم في الحياة؟

1. 1-2 أطفال
2. 3-4 أطفال
3. 5 وأكثر

متى تنوي إنجاب طفل آخر؟

1. في غضون عامين
2. في غضون 3 سنوات
3. في غضون 4 سنوات
4. في غضون 5 سنوات
5. لا انوي إنجاب اطفال اخرين

هل سبق لك أن ناقشت مع زوجك عدد الأطفال الذي يرغب في إنجابهم؟

1. نعم
2. لا

إذا كانت الإجابة بنعم، كم عدد الأطفال الذين يفضل زوجك إنجابهم؟

1. 1-2 طفل
2. 3-4 طفل
3. 5 أو أكثر طفل

من الذي يؤثر على قراراتك بشأن ممارسة تنظيم الأسرة؟

الشخص	نعم	لا
زوجك		
اهل زوجك		
أهلك		
أصدقائك		
لا أحد		

هل يدعمك زوجك في الأمور المتعلقة بخدمات تنظيم الأسرة؟

1. نعم
2. لا

إذا كانت الإجابة "نعم"، فانتقل إلى السؤال الذي يليه:

ما هي أفضل طريقة يساعدك بها زوجك فيما يتعلق باستخدام خدمات تنظيم الأسرة؟

الطريقة	نعم	لا
الدعم من خلال توفير وسيلة النقل لك		
تذكيرك بالموعد المحدد لك للاستشارة		
الدعم المالي		
استخدام الواقي الذكري		

من هو الرأي المهم في عائلتك فيما يتعلق بقضايا الإنجاب؟

الشخص	نعم	لا
زوجك		
اهل زوجك		
أهلك		
أصدقائك		
لا أحد		

أشكرك على وقت

Questionnaire

Dear mothers, I am (Hanan Shihadeh Mahmoud Shihadeh) I am conducting a study on “Factors Associated with Utilization of Postpartum Family Planning Services among Mothers between 6 and 12 weeks of Delivery in Southern West Bank Hospitals.” This questionnaire is part of this study to complete the requirements of my master’s thesis.

Dear mother, this study aims to identify factors associated with the utilization of postpartum family planning services among mothers in hospitals in the southern West Bank. If you agree to participate in this study, your participation is voluntary and requires only the completion of the present questionnaire.

This questionnaire gives you have the full right to refuse to participate or stop the interview at any time. All information collected during the research will be treated with complete confidentiality by the researchers, as the information will be collected without addressing the participant's identity or any information that might identify you.

Are you willing to participate in the study?

-Yes

-No

Student: Hanan Shihadeh Mahmoud Shihadeh

Supervisor: Dr Farid Ghrayeb

Survey questions

❖ Part A:

Demographic data:

- Age of respondent:

Marital status of the respondent

- Married:
- Single:
- Divorced:
- Widowed:

Level of education of the respondents

- No education
- Primary
- Secondary
- Tertiary

Number of pregnancies:

- 1-2 times
- 3-4 times
- 5 or more

Number of living children:

- 1-2 times
- 3-4 times
- 5 or more

Number of miscarriages/abortions:

- None
- 1-2 times
- 3-4 times
- 5 or more

Age of your last child:

- 1-2 years
- 3-4 years
- 5 years or older.

Part Two:

Knowledge of postpartum family planning (PPFP) services:

Are you aware of family planning methods that are available at the clinic for postpartum mothers within the first year of delivery?

- 1. Yes
- 2. No

If yes, which are these methods?

Number	Contraceptive method	Yes	No
1.	Breastfeeding		
2.	Contraceptive pills		
3.	Intrauterine Contraceptive Device		
4.	Injectable contraception		
5.	Implants		
6.	Male Condom		
7.	Female Condom		
8.	Natural family planning methods		
9.	Standard Days Method		
10.	Tubal ligation		
11.	Vasectomy		
12.	Emergency contraceptive pills		
13.	Other methods:Specify (spermicidal or cervical cap)		

Are you currently using any method of contraception since the delivery of your last-born child to delay or avoid getting pregnant?

- Yes
- No

If NO, why?

If YES, which method(s) are you currently using?

Number	Contraceptive method	Yes	No
1.	Breastfeeding		
2.	Contraceptive pills		
3.	Intrauterine Contraceptive Device		
4.	Injectable contraception		
5.	Implants		
6.	Male Condom		
7.	Female Condom		
8.	Natural family planning methods		
9.	Standard Days Method		
10.	Tubal ligation		
11.	Vasectomy		

12.	Emergency contraceptive pills		
13.	Other methods: Specify (spermicidal or cervical cap)		

At what age after your last child did you start using the above family planning method?

1. Do not use
2. 6 weeks - 3 months
3. 4 months - 6 months
4. 7 months - 9 months
5. 10 months - 12 months

❖ **Part Two:**

Knowledge of postpartum family planning (PPFP) services:

Are you aware of family planning methods that are available at the clinic for postpartum mothers within the first year of delivery?

1. Yes
2. No

If yes, which are these methods?

Number	Contraceptive method	Yes	No
1.	Breastfeeding		
2.	Contraceptive pills		
3.	Intrauterine Contraceptive Device		
4.	Injectable contraception		
5.	Implants		
6.	Male Condom		
7.	Female Condom		
8.	Natural family planning methods		
9.	Standard Days Method		
10.	Tubal ligation		
11.	Vasectomy		
12.	Emergency contraceptive pills		
13.	Other methods: Specify (spermicidal or cervical cap)		

Are you currently using any method of contraception since the delivery of your last-born child to delay or avoid getting pregnant?

Yes

No

If NO, why?

If YES, which method(s) are you currently using?

Number	Contraceptive method	Yes	No
1.	Breastfeeding		
2.	Contraceptive pills		
3.	Intrauterine Contraceptive Device		
4.	Injectable contraception		
5.	Implants		
6.	Male Condom		
7.	Female Condom		
8.	Natural family planning methods		
9.	Standard Days Method		
10.	Tubal ligation		
11.	Vasectomy		
12.	Emergency contraceptive pills		
13.	Other methods: Specify (spermicidal or cervical cap)		

Where did you receive education about family planning services before delivery of last child (please check location)?

Location	Yes	No
Antenatal clinic		
Family planning clinic		
During home visits by providers		
Labor room		
Post-natal ward		

What information about family planning was covered during your postpartum counseling? (Check all that apply)

Information	Yes	No
Health timing and spacing of pregnancies		
Exclusive breastfeeding		
All family planning methods appropriate to fertility regulation		

Was the information clear?

Yes

No

❖ Part Three:

Beliefs and cultural about family planning

Do you belong to any denomination?

Yes

No

If yes, to which denomination do you belong?

Does your denomination allow you to use modern family planning methods to limit your family?

Yes

No

Possible

Does your traditional culture allow you to use family planning services?

Yes

No

Possible

20. Do people in your village/ city use modern methods of family planning?

Yes

No

Possible

❖ Part Four:

Subjective norms' influence on PFP services:

How many children do you intend to have in your life?

▪ 1-2 children

▪ 3-4 children

▪ 5 or more

When do you plan to have another child?

▪ Within 2 years

▪ Within 3 years

▪ Within 4 years

▪ Within 5 years

▪ I do not intend to have any more children

Have you ever discussed with your husband how many children he would like to have?

Yes

No

If yes, how many children would your husband prefer to have?

- 1-2 children
- 3-4 children
- 5 or more

Who influences your decisions about family planning practice?

Person	Yes	No
Husband		
Husband's Family		
Your Family		
Friends		
No one		

Does your husband support you in issues related to family planning services?

Yes

No

If the answer is "yes", go to the next question:

What is the best way for your husband to help you with family planning services?

Method	Yes	No
Support by providing transportation for you		
Remind you of your appointment for consultation		
Financial support		
Use of condom		

Whose opinion is important in your family regarding reproductive issues?

Person	Yes	No
Husband		
Husband's Family		
Your Family		
Friends		
No one		

Thank you

العوامل المرتبطة باستخدام خدمات تنظيم الأسرة بعد الولادة بين الأسبوع السادس والثاني عشر من الولادة في مستشفيات جنوب الضفة الغربية.

اسم الطالبة: حنان شحادة محمود شحادة

المشرف: د. فريد غريب

الملخص

تنظيم الأسرة بعد الولادة، العوامل المرتبطة، الأمهات، خدمات تنظيم الأسرة، الضفة الغربية، الرعاية بعد الولاد

الخلفية: يُعد تنظيم الأسرة أمرًا بالغ الأهمية للحفاظ على الصحة البدنية والنفسية للإنسان، كحق أساسي من حقوق الإنسان (الأمم المتحدة، ٢٠١٥). بالإضافة إلى ذلك، يُمكن تنظيم الأسرة الناس من اتخاذ خيارات أفضل بشأن حياتهم الجنسية وصحتهم الإنجابية. كما يُتيح للمرأة فرصةً لمواصلة تعليمها والمشاركة في الحياة العامة، بما في ذلك العمل بأجر في المنظمات غير العائلية (منظمة الصحة العالمية، ٢٠٢٤).

الهدف: دراسة العوامل المرتبطة باستخدام خدمات تنظيم الأسرة بعد الولادة بين الأمهات بعد الولادة بين الأسبوع السادس والثاني عشر في الضفة الغربية في فلسطين.

المنهجية. استُخدمت منهجية بحثية وصفية مقطعية لإجراء هذه الدراسة، وتألّفت عينة الدراسة من جميع الأمهات الفلسطينيات اللواتي أنجبن خلال الأسابيع الستة إلى الاثني عشر الماضية في ثمانية مستشفيات فلسطينية جنوب الضفة الغربية، جُمعت البيانات باستخدام استبيان ذاتي مُعتمد من دراسات سابقة، وتُرجمت النسخة الإنجليزية منه إلى اللغة العربية، حيث تضمن الاستبيان بنودًا تهدف إلى تقييم الخصائص الاجتماعية والديموغرافية للأمهات، ومعارفهن، ومواقفهن، والعوامل المرتبطة بها، حُللت البيانات باستخدام برنامج الحزمة الإحصائية للعلوم الاجتماعية (SPSS) الإصدار (28).

النتائج. من بين 200 استبيان تم توزيعها، تم تضمين 179 استبيانًا في تحليل البيانات. كشفت نتائج الدراسة الحالية أن نتائج الدراسة كشفت عن 179 مشاركًا، مما أسفر عن معدل استجابة قدره 89.5%. من بين المستجيبين، كان عمر 28 عامًا فأكثر. في وقت جمع البيانات، كان (43.6%) حاصلين على دبلوم، بينما كان (12.3%) حاصلين على درجة البكالوريوس. بالإضافة إلى ذلك، كان استخدام وسائل منع الحمل وثلاث من الخصائص الاجتماعية والديموغرافية مرتبطين بشكل إيجابي، وهي عدد حالات الحمل وعدد المواليد الأحياء وعمر الطفل الأخير. من ناحية أخرى، كان استخدام وسائل منع الحمل مرتبطًا بشكل سلبي ببعض الخصائص الاجتماعية والديموغرافية وهي التعليم والوعي بوسائل منع الحمل.

الخلاصة. هناك نقص في استخدام خدمات تنظيم الأسرة بعد الولادة في مستشفيات جنوب الضفة الغربية. كشفت النتائج أن الغالبية (53.6%) لم يستخدمن أي وسيلة من وسائل تنظيم الأسرة بعد الولادة. علاوة على ذلك، هناك علاقة بين معرفة النساء ومستوياتهن التعليمية، وهناك حاجة إلى رفع مستوى تعليمهن. علاوة على ذلك، فإن زيادة وعي النساء بتنظيم الأسرة قد يُتيح لهن فرصًا أفضل لتطوير معرفتهن باستخدام وسائل تنظيم الأسرة

الكلمات المفتاحية: تنظيم الأسرة بعد الولادة، العوامل المرتبطة، الأمهات، خدمات تنظيم الأسرة، الضفة الغربية، الرعاية بعد الولادة.