

**WOMEN'S AUTONOMY AND UTILIZATION OF POSTNATAL  
HEALTHCARE SERVICES IN THREE IMPOVERISHED AREAS IN  
LEBANON**

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## **INTRODUCTION**

The World Health Organization (1996) has declared that approximately 600,000 women die annually worldwide due to pregnancy and childbirth complications. Most of these maternal deaths (99%) are occurring in developing countries and the majority of maternal mortality and morbidities happens in the postpartum period. Thus, the postpartum period is considered as a very critical period for both woman's and her child's health; utilization of postpartum healthcare is perceived as an effective tool to alleviate the burden of maternal mortality. Yet, maternal healthcare services are underutilized by women in most developing countries. Literature pertaining to utilization of postnatal service has not received much attention.

The present paper measures women's autonomy and examines its impact on the pattern of postnatal healthcare seeking behavior among women. Few studies have addressed the links between women's autonomy and utilization of postnatal services in the Arab world. Yet, none of these studies have been found in Lebanon. It is believed that women who have high autonomy are more likely to have greater decision making power, greater mobility, and greater ability to control their own resources and/or their family resources. As a result of that, they are more likely to use postnatal healthcare services. However, this relationship may depend on the type of community under investigation, its family system, and its culture, kinship, religion and traditions.

## **DATA AND METHODOLOGY**

Data used in this study come from the Urban Health Survey that was carried out between 2002 and 2003 in three impoverished communities in the outskirts of Beirut. A stratified random sample was used to draw a sample of 2816 households from the three communities. The eligible women refer to women aged 15 to 45 years who were ever married, and delivered during the last five years preceding the survey. Three different indices, freedom of movement, familial decision-making power, and gender-role attitudes towards equality, were constructed to measure women's autonomy. For each index, it is constructed using the sums of equally weighted binary input variables assuming that all variables are equally important in the communities. Then, logistic regression models were fitted to estimate the impacts of women's indices on the utilization of postnatal services after adjusting for other relevant factors. The cronbach's alpha measure was applied to estimate the internal reliability of each index. The estimated coefficients are considered relatively high.

## **RESULTS**

Results show that there were 777 women reported that they delivered during the last five years preceding the survey. Of the 777 women, only 439 women (56.5%) used postnatal healthcare. Surprisingly, results indicate that women's autonomy does not play a significant role in using postnatal services. Results provide evidence that only freedom of movement index is significantly associated with the utilization of postnatal services whereas the other two indices are non-significant. Yet, women's autonomy indices do not

show any significant association after adjusting for the remaining variables. From the other hand, women's education and women's work have positive impacts on the women's use. In addition, women's parity shows a significant association with utilization of postnatal healthcare utilization indicating higher use of postnatal healthcare by women who have low parity. Husband's education also shows a strong impact on utilization of postnatal services. Unexpectedly, logistic regression models do not show any significant association between postnatal healthcare use and neither household income nor women's health insurance.

## **DISCUSSION**

The paper raises a number of questions regarding the measurements of women's autonomy in the Arab context as well as in poor communities. Further, because results emphasize the feasible role of husbands in prompting women to use postnatal healthcare services, it may be useful if they are involved with their spouses to participate in health educational programs.