

Evaluation of the “Mabrouk II: You’ve Become a Mother and a Father” Initiative

Jordan Health Communication Partnership, JHCP

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Introduction

The Jordan Health Communication Partnership (JHCP) works with the Ministry of Health, Ministry of Education, Ministry of Awqaf Islamic Affairs and Holy Places and the Higher Population Council to implement national communication initiatives to improve family health in Jordan. Funded by USAID from 2004-2011, the JHCP is a strategic, comprehensive health communication program designed to increase awareness of the importance of family planning and family health through multi-level and multi-channel initiatives and activities.

Implementation of Mabrouk II

One of the program components is Mabrouk I, which is for couples who are engaged and about to get married, while the “Mabrouk II, you’ve become a mother and a father” initiative is for couples who have become parents for the first time. The package was designed to reach new parents with family planning and birth spacing information. These initiatives are implemented in cooperation with the Civil Status and Passports Department (CSPD). This report focuses on the Mabrouk II package, which is given to parents when they visit the CSPD to obtain their first baby’s birth certificate. Therefore, all couples receive the package soon after the birth of their first child. The package includes information concerning post-natal care, gender equity, child growth, nutrition and vaccinations, and modern family planning methods.

Methods

Telephone interviews were conducted with those who had registered a first child at the CSPD between December 2008 and December 2009, and should have then received the Mabrouk II package. CSPD collects names of all individuals who are given the Mabrouk II booklet and, in about 17 percent of the cases, also recorded phone numbers for follow up. The research team selected 600 names of males and 600 names of females from the list of recipients who had provided a phone number; the final sample comprised 1,217 individuals.

The goals of this study were to assess the participants’ satisfaction with the “Mabrouk, you’ve become a mother and a father” information package and to determine whether readers compared with non-readers of the booklet were more likely to seek and use family planning services.

The Johns Hopkins Bloomberg School of Public Health’s Institutional Review Boards (IRB) determined that the human subjects research activity meets the criteria for Exemption under U.S. Federal Regulations 45 CFR 46.101(b), Category 2. Therefore, local IRB approval was not required.

Questionnaire

The survey instrument included questions about the respondents' demographic characteristics as well as questions related to respondents' satisfaction with and impressions of the booklet, family planning intentions and use, and beliefs about gender equity.

Data entry and analysis

Data entry was completed using CSpro 4.0.004, a public-domain software package for entering, editing, tabulating and mapping census and survey data, used by the U.S. Census Bureau. The data set was cleaned and edited for inconsistencies. Missing data were not statistically imputed. Data analysis was completed using STATA version 11 statistical software.

To determine statistical significance in bivariate analyses (e.g., comparisons between readers and non-readers of Mabrouk II), the researchers used Chi-square tests of differences in proportions and one-way ANOVA and Student's t-tests for the difference in means. The bivariate analyses are disaggregated by sex and by readership of Mabrouk II. When needed, regression analysis was done in order to determine whether confounding accounted for bivariate analyses significant differences.

Findings

Characteristics of the sample

The mean age of respondents is 27 years, with mean age of males (30 years) being significantly greater than that of females (25 years) ($p < 0.001$) (Table 1). Mean age as stratified by governorate does not differ significantly ($p > 0.05$) (data not shown).

As for education, 55% of those sampled attained secondary education or lower and 45% completed an intermediate diploma or higher (Table 1). Females were found to be significantly more educated than males, with 52% of females having completed an intermediate diploma or higher as compared to 38% of males (Table 1).

Table 1: Age and education level of respondents

	Total	Males	Females
Mean age in years (std. dev)	27.2 (4.8)	29.6 (4.3)*	24.7 (4.0)*
Education level			
Secondary or less	668 (54.9%)	380 (61.6%)*	288 (48.0%)*
Intermediate Diploma or higher	549 (45.1%)	237 (38.4%)*	312 (52.0%)*
Total number of respondents (%)	1,217 (100%)	617 (50.7%)	600 (49.3%)
* Statistically significant ($p < 0.05$) after bivariate analysis.			

Mabrouk II Package: Distribution and satisfaction

Reception of the Mabrouk II package

Reported exposure to the Mabrouk II package is depicted in Table 2. Approximately half of respondents reported that they had ever heard of, seen or read a package titled “Mabrouk, you are and mother and father.” No significant difference was found between males and females with regards to this level of exposure. Among those who were aware of the Mabrouk II initiative, 60% personally received it when they went to register their first child, and most others received it from a family member or friend who registered the child for them. From the entire sample, 49% received the package personally or from a person who went to register the first born for them. No significant differences were noted between sexes.

Table 2: Exposure to the Mabrouk II package

	Total	Male	Female
Ever heard about, seen, or read a package titled “Mabrouk, you’ve become a mother and a father”	639 (52.5%)	341 (55.3%)	298 (49.7%)
Mode of exposure			
Personally received it when the respondent went to register child	384 (60.1%)	292 (85.6%)	92 (30.9%)
Spouse/relative received it when they went to register respondent’s child	216 (33.8%)	32 (9.4%)	184 (61.7%)
Spouse/relative received it when they went to register their own child	24 (3.8%)	9 (2.6%)	15 (5.0%)
Source of exposure			
CSPD offices	567 (90.1%)	324 (95.0%)*	252 (84.7%)*
Posters/newspapers	20 (3.1%)	11 (3.2%)	9 (3.0%)
Sehetna website	4 (0.63%)	2 (0.59%)	2 (0.67%)
* Statistically significant (p<0.05) after bivariate analysis			

Viewing, using and reading of the Mabrouk II package

Table 3 presents respondents’ viewership and readership of the Mabrouk II package. All respondents who reviewed the Mabrouk II booklet and package’s colors reported that they liked the colors and the design.

With regards to the Child Development and Nutrition poster, 83% of respondents used it sometimes or always.

As for readership of the package, 88% of those who viewed the booklet and poster reported to have read the contents. Readership was positively associated with educational attainment (data not shown) and women were more likely to have read the booklet than were their male counterparts.

Table 3: Viewing, reading of the booklet and use of the Child Development and Nutrition poster

	Total	Male	Female
Viewed the colors and design	528 (82.6%)	256 * (75.1%)	272 * (91.3%)
Liked the colors and design	527 (99.8%)	255 (99.6%)	272 (100.0%)
Read the package	465 (88.1%)	205 (80.1%) *	260 (95.6%) *
Liked the contents of the package	461 (99.1%)	203 (99.0%)	258 (99.2%)
Found the package practical and useful	460 (98.9%)	201 (98.1%)	259 (99.6%)
Always used the Child Development and Nutrition poster	156 (33.6%)	59 (28.8%)*	97 (37.3%)*
Sometimes used the Child Development and Nutrition poster	231 (49.7%)	100 (48.8%)*	131 (50.4%)*
Sometimes or always used the Child Development and Nutrition poster	387 (83.2%)	159 (77.6%)	228 (87.7%)
* Statistically significant ($p < 0.05$) after bivariate analysis			

Satisfaction with the Mabrouk II package among readers

Almost all of the readers of the package liked its contents and found the package practical, without any significant differences between males and females (Table 3).

Table 4 demonstrates the reported benefits attained by the respondents after reading the package. The majority of readers (92%) reported that they had benefitted from the messages included in the package. Respondents reported that they had benefitted from learning about the importance of family planning after the first child (21%), the importance of modern family planning methods (14%), and the importance of postnatal care for the mother's health (13%).

Nearly two-thirds mentioned that they have benefitted from learning about the stages of child development and the nutritional needs of their child.

Overall, 70% of respondents reported two or more benefits from the messages relayed in the package.

Communication about the Mabrouk II package by readers

Three quarters reported discussing the packages' messages with their spouse. Female respondents were significantly more likely than males to discuss the messages with their siblings, the mother-in-law, friends, and neighbors.

Readers' suggestions and recommendations for the improvement of the Mabrouk II package

Less than ten percent of readers indicated that they had suggestions or recommendations to improve the package in the future (Table 6). The most mentioned

suggestion was to add more information on family health. No significant differences were found between males and females.

Table 4: Benefit from the Mabrouk II package among those who received the package and found it satisfactory

	Total	Male	Female
Reported satisfaction and benefit from the package among those who read the package (n=465)			
Benefited from the messages included in the package. Benefits:	427 (91.8%)	245 (94.2%)*	182 (88.8%)*
Among those who reported to have benefited from the messages (n=427)			
Importance of gender equity	3 (0.7%)	2 (1.1%)	1 (0.4%)
Importance of spousal communication	20 (4.7%)	11 (6.0%)	9 (3.7%)
Importance of FP after the first child	89 (20.8%)	48 (26.4%) *	41 (16.7%) *
Importance of postnatal care for the mother's health	54 (12.7%)	19 (10.4%)	35 (14.3%)
Importance of modern FP methods.	58 (13.6%)	25 (13.7%)	33 (13.5%)
Knowledge of types of modern contraceptives	26 (6.1%)	12 (6.6%)	14 (5.7%)
Knowledge of the timing of having your second child	21 (4.9%)	8 (4.4%)	13 (5.3%)
Knowledge of the stages of child development	269 (63.0%)	105 (57.7%)	164 (66.9%)
Knowledge of the nutrition needed for your child	277 (64.9%)	101 (55.5%) *	176 (71.8%) *
Knowledge of early signs of mental and physical disability	5 (1.2%)	0	5 (2.0%)
Knowledge of the child vaccine schedule	46 (10.1%)	19 (10.4%)	27 (11.0%)
Summation of the reported benefits			
Sum benefits of 2 or more	300 (70.3%)	124 (68.1%)	176 (71.8%)
* Statistically significant (p<0.05) after bivariate analysis			

Table 5: Discussion of the package with others among readers of the package (n=465)

Among those who read the package (n=465), those who discussed the contents with:			
	Total	Males	Females
Spouse	358 (76.99%)	171 (83.41)	187 (71.92)
Father	15 (3.2%)	8 (3.9%)	7 (2.7%)
Mother	49 (10.5%)	11 5.37	38 14.62
Father in law	17 (3.7%)	5 (2.4%)	12 (4.6%)
Mother in law	46 (9.9%)	7 (3.4%) *	39 (15.0%) *
Friends	70 (15.1%)	17 (8.3%) *	54 (20.4%) *
Neighbors	33 (7.1%)	4 (2.0%) *	29 (11.2%) *
Sibling	105 (22.6%)	29 (14.2%) *	76 (29.2%) *
Relatives	41 (8.8%)	7 (3.4%)	34 (13.1%)
* Statistically significant (p<0.05) after controlling for education level and age			

Table 6: Suggestions for improvements from those who read the package and offered advice (n=83)

	Total	Males	Females
Adding some Qur'anic verses	5 (6.0%)	2 (5.9%)	3 (6.1%)
Adding more information on family health	20 (24.1%)	9 (26.5%)	11 (22.5%)
Downloading the information on CDs	3 (3.6%)	1 (2.9%)	2 (4.1%)
Changing the design and color of the package	2 (2.4%)	2 (5.9%)	0
Importance of natural breastfeeding	7 (8.4%)	1 (2.9%)	6 (12.2%)
Dealing with children	6 (7.2%)	1 (2.9%)	5 (10.2%)

Table 7: Reported visits to MCH centers

	Total	Read package	Did not read package	Males	Females
Respondent and/or spouse visited MCH center	1,016 (83.5%)	387 (83.2%)	629 (83.2%)	501 (81.2%)	515 (85.8%)
Postnatal care visit	37 (3.6%)	16 (4.1%)	21 (3.3%)	19 (3.8%)	18 (3.5%)
FP counseling	126 (12.4%)	62 (16.0%) *	64 (10.2%) *	58 (11.6%)	68 (13.2%)
Using modern contraceptive	83 (8.2%)	44 (11.4%) *	39 (6.2%) *	26 (5.2%) **	57 (11.1%) **
Child care and follow up	262 (25.8%)	100 (25.8%)	162 (25.8%)	117 (23.4%)	145 (28.2%)
Child's vaccinations	929 (91.4%)	360 (93.0%)	569 (90.5%)	460 (91.8%) **	469 (91.1%) **
Counseling on practicing breastfeeding	8 (0.8%)	5 (1.3%)	3 (0.5%)	2 (0.4%)	6 (1.2%)
Spacing after the first child	13 (1.3%)	4 (1.0%)	9 (1.4%)	7 (1.4%)	6 (1.2%)
* Statistically significant (p<0.05) after controlling for education level, sex, and age					
** Statistically significant (p<0.05) after controlling for education level, readership, and age					

Comparisons between non-readers and readers of the Mabrouk II package

Visits to the Mother and Child Health (MCH) centers

Eighty four percent of all respondents indicated that they or their spouse had visited a MHC center (Table 7).

Reasons for visiting the MCH centers are reported in Table 7. The most common reason for visiting the MCH center was for the child's vaccination, followed by a visit for child care and follow-up.

Family planning counseling was the third most common reason for visiting the center, with significantly more readers than non-readers reporting so, even after controlling for

age, education level, and sex. Additionally, significantly more readers than non-readers reported to have visited the MCH center for the use of modern contraceptive.

Table 8: Modern contraceptives use and reasons for non-use

	Total (%)	Read package	Did not read package	Males	Females
	n=1,214	n=465	n=749	n=614	n=600
Using modern contraceptive	559 (45.9%)	232 (49.9%)	327 (43.5%)	291 (47.2%)	268 (44.7%)
Reasons for non-use					
	n=655	n=233	n=422	n=323	n=332
It is too early to start using	167 (25.5%)	55 (23.6%)	112 (26.5%)	99 (30.7%) **	68 (20.5%) **
Family pressure	1 (0.2%)	0	1 (0.4%)	0	1 (0.3%)
Became pregnant while using	40 (6.1%)	13 (5.6%)	27 (6.4%)	13 (4.02%)	27 (8.1%)
Wanted to become pregnant	89 (13.6%)	28 (12.0%)	61 (14.5%)	42 (13.0%)	47 (14.2%)
Spouse disapproved	20 (3.1%)	7 (3.0%)	13 (3.1%)	11 (3.4%)	9 (2.7%)
Side effects or fear of side effects	88 (13.4%)	41 (17.6%) *	47 (11.1%) *	42 (13.0%)	46 (13.9%)
Health Concerns	17 (2.6%)	7 (3.0%)	10 (2.4%)	6 (1.9%)	11 (3.3%)
Access/ availability	2 (0.3%)	0	2 (0.5%)	1 (0.3%)	1 (0.3%)
Wanted more effective methods	1 (0.2%)	0	1 (0.2%)	1 (0.3%)	0
Inconvenient to use	17 (2.6%)	10 (4.3%)	7 (1.7%)	5 (1.6%)	12 (3.6%)
Infrequent sex/ husband away	5 (0.8%)	2 (0.9%)	3 (0.7%)	4 (1.2%)	1 (0.3%)
Fatalistic	15 (2.3%)	5 (2.2%)	10 (2.4%)	10 (3.1%)	5 (1.5%)
Difficult to get pregnant	13 (2.0%)	4 (1.7%)	9 (2.1%)	5 (1.6%)	8 (2.4%)
Marital dissolution/ separation	1 (0.2%)	0	1 (0.2%)	1 (0.3%)	0
Religious prohibition	3 (0.5%)	3 (1.3%)	0	2 (0.6%)	1 (0.3%)
*Statistically significant (p<0.05) after controlling for education level, sex, and age					
** Statistically significant (p<0.05) after controlling for education level, readership, and age					

Modern contraceptives use

Almost half of respondents reported current use of modern contraceptives (Table 8). No significant differences in use were noted between readers and non-readers after controlling for age, education level, and sex.

Reasons for modern contraceptives non-use

Reasons for non-use are reported in Table 8. Almost a third of respondents stated that it was too early to start using modern contraceptives, with significantly more males reporting so as compared to females.

Nearly a fifth of respondents stated that the existence of a current pregnancy was the reason for non-use. No significant differences were noted between readers and non-readers, or between males and females. A significantly higher proportion of individuals with a secondary education or lower (26%) reported that a current pregnancy was the reason for non-use as compared to those with an intermediate diploma or higher (15%) (data not shown).

Less than a fifth of respondents reported that side effects or fear of side effects was the reason for non-use. Interestingly, a significantly higher proportion of readers than non-readers reported a concern over side effects. Additionally, education level was positively associated with reported concern over side effects. Those with an intermediate diploma or higher were more likely to report such concerns as compared

Table 9: Intention to use modern contraceptives and reasons for not intending to use them

	Total	Read package	Did not read package	Males	Females
	n=649	n=233	n=416	n=317	n=332
Among those not using modern contraceptives, those who intend to do so	516 (79.5%)	194 (83.3%)	322 (77.4%)	236 (72.4%)	280 (84.3%)
Reasons for not intending to use modern contraceptives					
	n=133	n=39	n=94	n=81	n=52
Infrequent sex/ husband away	3 (2.3%)	1 (2.6%)	2 (2.1%)	3 (3.7%)	0
Wants more children	28 (21.1%)	6 (15.4%)	22 (23.4%)	15 (18.5%)	13 (25.0%)
Difficult to get pregnant	9 (6.8%)	3 (7.7%)	6 (6.4%)	4 (4.9%)**	5 (9.6%)**
Respondent opposed	4 (3.0%)	0	4 (4.3%)	4 (4.9%)	0
Spouse opposed	12 (9.0%)	3 (7.7%)	9 (9.6%)	8 (9.9%)	4 (7.7%)
Religious prohibition	5 (3.8%)	2 (5.1%)	3 (3.2%)	5 (6.2%)	0
Health concerns	12 (9.0%)	5 (12.8%)	7 (7.5%)	3 (3.7%)	9 (17.3%)
Fear of side effects	34 (25.6%)	17 (43.6%)*	17 (18.1%)*	19 (23.5%)	15 (28.9%)
Inconvenient to use	3 (2.3%)	1 (2.6%)	2 (2.1%)	0	3 (5.8%)
Interfere with body's normal process	2 (1.5%)	1 (2.6%)	1 (1.1%)	0	2 (3.9%)
* Statistically significant (p<0.05) after controlling for education level, sex, and age					
** Statistically significant (p<0.05) after controlling for education level, readership, and age					

to those without a secondary education or lower (data not shown). A possible explanation for this unexpected result is that those who read the package and who have higher education levels are more aware of the side effects resulting from modern contraceptives use than non-readers and those with lower education levels. No significant difference was found when comparing males and females.

Intention to use modern contraceptives

Those who reported non-use were asked whether they intended to use modern contraceptives in the future. Among those asked, 80% reported that they did intend to use modern contraceptives in the future (Table 9). No significant differences were found by sex or readership.

Reasons for not intending to use modern contraceptives among non-users

Reasons for not intending to use modern contraceptives are reported in Table 9. Almost a third of non-users with no intention to use contraception reported that the reason for not intending to use modern contraceptive was due to a fear of side effects or health concerns; a significantly higher proportion of readers than non-readers reported so. To put this in perspective, it is important to note that this represents about 7% of non-users since four-fifths of non-users intend to use modern contraceptives in the future.

Another cited reason for not intending to use modern contraceptives was a desire for more children, with no significant differences when comparing respondents by readership or sex.

Ideal number of children

Respondents were asked to report what they would consider to be an ideal number of children. Respondents' preferences relating to the ideal number of children are reported in Table 10. The mean ideal number of children for the entire sample is 3.5, with no significant differences when comparing readers and non-readers, or males and females. Interestingly, the mean number of ideal children among those with an intermediate diploma or higher is significantly greater than that reported by those with secondary education or lower (data not shown).

Table 10: Ideal number of children

	Total	Read package	Did not read package	Men	Women
Mean ideal number of children (Std. Dev)	3.5 (1.5) n=1,046	3.6 (1.3)	3.5 (1.7)	3.6 (1.6)	3.5 (1.5)
Mean ideal number of boys (Std. Dev)	2.0 (1.0) n=774	2.0 (0.8)	1.9 (1.2)	2.0 (1.1)	1.9 (0.9)
Mean ideal number of girls (Std. Dev)	1.6 (0.9) n=770	1.5 (0.6)	1.6 (1.0)	1.6 (0.9)	1.6 (0.9)
Number who report an ideal number of children ≤3 (%)	762 (62.6%)	308 (66.2%)	454 (60.4%)	330 (53.5%)**	432 (72.0%)**
** Statistically significant (p<0.05) after controlling for education level, readership, and age					

The mean ideal number of boys as reported by respondents is 2.0, whereas the mean number of girls is 1.6. No significant differences in the mean ideal number of boys and girls were found when comparing respondents by readership or sex.

Two thirds of respondents reported an ideal number of children of three or less, with more readers than non-readers reporting as such; however multivariate analysis deemed this difference insignificant. Significantly more females than males reported an ideal number of children of three or less.

Spacing between pregnancies at least three years

When asked to report on the ideal birth interval to keep both the mother and baby healthy, 68% of respondents identified an interval of at least three years (Table 11). Surprisingly, the proportion of respondents who reported that they intended to space births at least three years was even higher, amounting to 82%. For both of these measures, no significant differences were noted when comparing respondents by readership or sex.

Table 11: Birth spacing

	Total	Read package	Did not read package	Males	Females
# who report an ideal birth interval is at least 3 years or more (%)	828 (68.2%)	325 (69.9%)	503 (67.1%)	413 (67.2%)	415 (69.2%)
# who intend to space births by at least 3 years (%)	992 (81.7%)	371 (79.8%)	621 (82.8%)	499 (81.1%)	493 (82.2%)

Gender equity

The grand majority of respondents (98%) reported that they believe in gender equity (Table 12). No significant differences were seen between readers and non-readers, or between males and females, even after controlling for age and education level.

Table 12: Gender equity

	Total	Read package	Did not read package	Men	Women
# who believe in gender equity (%)	1,191 (97.9%)	455 (97.9%)	736 (97.9%)	602 (97.6%)	589 (98.2%)

Conclusions

- Among the entire sample, 49% of respondents received the package personally or from a person who went to register the first born for them.
- The main source from which respondents heard of, saw, or read the package was the CSPD. Significantly more males (95%) than females (85%) reported that they had heard of, seen or read the Mabrouk II package in the CSPD offices (p<0.001).

- 83% of those who heard of, saw, or read the package viewed its colors, with significantly more females than males reporting that they had viewed the colors of the booklet. All respondents who reviewed the booklet and package's colors reported that they liked the colors and the design.
- The use of the Child Development and Nutrition poster was high, with 83% of respondents reporting using it sometimes or always.
- Readership of the package among those who viewed the booklet and poster was high, with 88% of them reporting to have read the contents.
- Among readers of the package, satisfaction was extremely high, for almost all of the readers liked its contents (99%) and found the package practical (99%). Moreover, the majority of readers (92%) reported that they had benefitted from the messages included in the package, with females reporting a significantly higher mean number of benefits as compared to males. Among the most cited benefits are: Learning of the importance of family planning after the first child (21%) and the importance of modern family planning methods (14%).
- Overall, 70% of respondents reported two or more benefits from the messages relayed in the package.
- A high proportion reported discussing the messages with their spouse (77%). Significantly more females than males discussed the package with their siblings, mother-in-law, friends, and neighbors.
- The most mentioned suggestion by readers in order to improve the package was to add more information on family health.
- Family planning counseling was the third most common reason for visiting the center. Significantly more readers than non-readers reported visiting the MCH center for family planning counseling and for modern contraceptives use. This indicates that within our sample, exposure to the package is related to seeking family planning counseling and use.
- It initially appeared that significantly more readers (50%) than non-readers (43%) reported modern contraceptives use at the time of the interview when bivariate analysis was conducted, however such significance was removed after a logistic regression controlling for age, education level, and sex. Thus multiple factors influence modern contraceptives use, and the package alone might need to be supplemented with additional efforts to become more effective.
- The highest proportion of non-users stated that it was too early to start using modern contraceptives (26%). Significantly more males than females reported this reason for non-use, indicating that more efforts need to be directed towards men with relation to family planning after the first birth.

- The second most common reason for non-use is the existence of a current pregnancy (21%), further emphasizing the importance of family planning after the first birth.
- A higher proportion of readers (18%) than non-readers (11%) reported a concern over side effects as reason for non-use. It is possible that those who read the package are more aware of the side effects resulting from modern contraceptives use than non-readers. Thus, providing readers with information about side effects needs to be accompanied by another intervention, such that fears do not dissuade readers from using modern contraceptives. This surprising finding was also significantly noted among those who do not intend to use modern contraceptives in the future; approximately 20% of that group cited side effects as a reason for their lack of intention to use.
- 62% of respondents reported an ideal number of children of three or less, with more readers (66%) than non-readers (60%) reporting as such. Significantly more females than males reported an ideal number of children of three or less.
- The intention to space between births at least three years was reported by 82% of respondents; whereas a lower proportion (68%) reported that the ideal birth interval in order to assure the health of the mother and child is at least three years. This might indicate that other factors, aside from opinion regarding the ideal birth interval, influence intention to space births.
- Almost all respondents agreed that they believe in equity between the two genders. Since only 1% of readers reported that learning of gender equity was among the messages in the package which benefitted them, it can be said that this high acceptance of gender equity is not related to booklet content, especially since there was no significant difference between readers and non-readers.

Limitations

In order to conduct the telephone survey with Mabrouk II recipients, the investigating team relied on the CSPD database in order to attain the package's recipients' telephone numbers. Unfortunately, only 17% of those who registered a first child during the Mabrouk II distribution period supplied the CSPD with their telephone numbers, for the telephone number is not a required field in the database. This might have introduced a bias and could limit the ability to generalize the results to the entire target population. Therefore, these results can only be generalized to those sampled.