Among women living in the Palestinian Territory (the occupied West Bank and Gaza Strip), about one-third of all pregnancies are unintended. Furthermore, recent evidence indicates that birth spacing, the number of months that women have between births, has been decreasing. Together, these health data indicate continuing challenges to women’s health in the Palestinian Territory.

Unintended pregnancies are associated with important health risks. Women who have an unintended pregnancy are at greater risk of pregnancy loss and poorer health status during pregnancy. Their newborns also face a higher risk of illness. Other studies, including a study conducted in the Palestinian Territory, confirm the adverse health effects of an unintended pregnancy on the physical, mental health, and well-being of women during the postpartum period. In addition to unintended pregnancy, inadequate spacing between births can have adverse effects on maternal and child health and well-being.

Throughout the world, the provision of family planning and contraceptive services have been instrumental in reducing unintended pregnancies. In some countries, particularly those in sub-Saharan Africa, the provision and availability of family planning services have played a key role in the reduction of maternal mortality.

The Context of Family Planning Services

The use of modern contraceptives among married women in the Palestinian Territory has increased from 33 percent in 1995 to 49 percent in 2010. Despite this increase, total fertility rates continue to be among the highest in the region, averaging 4.2 children per woman. Although previous studies have noted that large families are still desired in the Palestinian Territory, recent estimates from Palestinian Family Health Surveys (PFHS) conducted in 2006 and 2010 show that between 30 percent and 40 percent of pregnancies are either unwanted or mistimed. Furthermore, about 27 percent of women who had given birth in the five years preceding the survey had short birth intervals (less than 18 months between the birth of one child and the next).

These findings suggest shortcomings in the provision of family planning services. Specifically, women may not be taking advantage of services available through various health providers, which mainly comprise the Ministry of Health and United Nation’s Relief and Works Agency (UNRWA).

Who Is Using Contraception and Who Is Not

Analyses of data reveal clear differences in contraceptive use patterns among women in the Palestinian Territory, particularly between women in the West Bank and the Gaza Strip. In general, older women and women residing in the West Bank were more likely to use contraception. More-educated women also were more likely to use contraception: Women with at least a high school education were about 1.5 times more likely than women with less than a primary education to use modern contraception. Women in the poorest income quintiles were the least likely to use contraception, indicating a need to improve access for the most vulnerable.

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Reasons Why Women Are Not Using Contraception

Among women who did not report wanting to have another child, the main reasons for not using contraception were fear of side effects, discomfort from the contraceptive method used, and husband’s opposition to the use of contraception (see Figure 1).

Figure 1

<table>
<thead>
<tr>
<th>Reason</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Desire to have a child</td>
<td>47.4%</td>
</tr>
<tr>
<td>Discomfort or fear of side effects</td>
<td>20.6%</td>
</tr>
<tr>
<td>Husband’s opposition</td>
<td>5.6%</td>
</tr>
<tr>
<td>Personal opposition</td>
<td>1.6%</td>
</tr>
<tr>
<td>Access</td>
<td>0.6%</td>
</tr>
</tbody>
</table>


Women’s concerns about the discomfort of contraceptives as well as their fears of side effects can and should be addressed by service providers. Women should be provided with complete information about the various contraceptive options as well as the risks involved. It is likely that some of women’s fears may stem from rumors or misperceptions, so it is important for health professionals to address these issues in a clear and respectful manner. Rumors and misperceptions can also be addressed by local health workers based in villages and smaller communities. Further analysis of the Palestinian Family Health Survey data indicates that the likelihood that a woman will use contraception is higher when couples agree about contraception. Women whose husbands agree with the use of contraception are more likely to use a modern contraceptive method (see Figure 2). Among women using a modern contraceptive method, the intrauterine device and the birth control pill are the most common methods.

Recommendations
The relatively high rate of unintended pregnancies in the Palestinian Territory suggests that women are not taking advantage of available services. Analysis of the factors associated with the use of family planning services support policy interventions geared toward:

- Increasing awareness among women and couples about the different types of contraceptive available and providing counseling on possible side effects.
- Retraining health providers on effective counseling for promoting family planning and contraception.
- Raising awareness among men about the benefits of family planning through joint efforts with the media, key community stakeholders, and civil society organizations.

While great improvements in access to contraception have been made in the Palestinian Territory, gaps in uptake of services continue to exist. One in three women reported that their last pregnancy was unintended. Unintended pregnancies can pose a number of health risks to mothers and their newborns, and should be addressed through improving the coverage, acceptance, and uptake of family planning services.

References