

Socio-cultural barriers to accessing contraception among Palestine refugees in Jordan

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Background

Maternal mortality can be reduced by providing contraception. Women want to use contraception but often have no access to these methods. In Jordan, contraception is provided for free to Palestine refugees. However, unmet needs for contraception remain. Important contributors to these unmet needs are socio-cultural barriers to accessing contraception.

Aim

This study aims to improve access to contraception among Palestine refugees in Jordan by providing recommendations to accommodate socio-cultural barriers into reproductive health policy.

Methods

This qualitative study used focus group discussions (FGDs) for data collection. Eighty four people participated in twelve FGDs across rural and urban settings in Jordan. Participants were female and male community members and local health care workers. Topics discussed were derived from previous research and previously conducted FGDs. Discussions were recorded, transcribed, translated and entered into MaxQDA for analysis.

Results

Opposition of husband and family-in-law was perceived as a main barrier. The idea that a large family brings prosperity was mentioned as an internal barrier.

Preference for boys was also a frequently mentioned reason for not using family planning. Women furthermore expressed fear of side effects and experiences of side effects as barrier while men expressed misunderstandings, traditions and disapproving cultural beliefs concerning contraception.

Discussion

Findings partly confirm previous research on socio-cultural barriers to contraception in Jordan. To increase access to modern contraception, both women and men should be better educated about contraceptive methods, to diminish misunderstandings about contraception and its side effects. Finally, future research should include religious leaders so as to address disapproving cultural beliefs.

Funding: Share-Net International

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Group	Urban FGDs (n)	Rural FGDs (n)
Females		
18 – 28 years	1 (6)	1 (7)
29 – 49 years	2 (12)	2 (15)
Males		
< 18 years	2 (15)	2 (12)
Healthcare workers	1 (7)	1 (10)

Acknowledgements

We thank people who participated in FGDs and healthcare workers and other UNRWA staff who helped with data collection.

