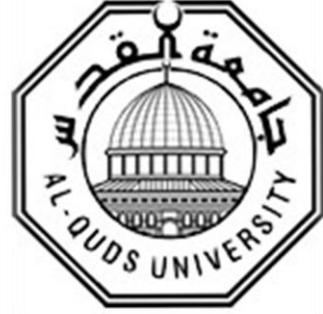


Deanship of Graduate Studies

Al Quds University



**Pregnancy Outside of Marriage Among
Palestinian Women**

Fatima Ahmad Omar Hammad

M.S.c. Thesis

Jerusalem-Palestine

1438/ 2016

**Pregnancy Outside of Marriage Among
Palestinian Women**

Prepared By:

Fatima Ahmad Omar Hammad

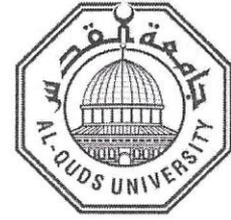
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Al-Quds University
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Jerusalem- Palestine

1438-2016

Dedication

To my parents

To my husband

To my children

To all Palestinian women

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: 

Fatima Ahmad Omar Hammad

Date: 21st December, 2016

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With a great gratitude, I would like to acknowledge the support, assistance and contributions made by individuals from the beginning of this fieldwork in providing me with access, data and information, to the writing process until the completion of this thesis. First of all, all due thanks to all the women who participated in this study, and to the professional co-workers for their sincerity and willingness to participate and provide me with rich and valuable data. TO MY GREAT PARENTS **Ahmad Madany** and **Najah Madany**, I thank you for your continuous support; to my great husband **Ali Hammad**, for your prayers and advice, and I have always felt comfortable in talking to you about anything. To my lovely three children **Ayham, Dareen**, and **Ahmad** for your continuous support and and patience, to all my family and friends for their support during the writing of this thesis. To **Dr. Salam Al-Khatib**, thank you so much for your time. I highly value and appreciate our discussions, your comments, support, views, suggestions and ideas that contributed to the improvement of the thesis. I cannot thank you enough for your time, your critical eye, constructive criticism, encouragement, and understanding of my situation. This had an invaluable impact on me throughout the writing process of this thesis.

Abstract

Background

Pregnancy outside of marriage is one of the major multidimensional problems that the Palestinian women may experience, especially when it is the outcome of sexual violence, rape and/or incest. It has physical, emotional and social effects on women and their families in light of social judgment and stigma.

Objectives

The overall aim of this study was to explore and identify the causes of pregnancy outside of marriage among Palestinian women and to understand the consequences of such pregnancy outside of marriage. In addition, the study aimed to investigate the services that the Palestinian Community offered to those women in an attempt to come out with feasible recommendations based on the findings of the study.

Methodology

In this study a qualitative descriptive design was used, for using this qualitative approach was to gain an in-depth understanding of the experiences and perceptions of women with pregnancy outside of marriage. Eleven semi structured in-depth interviews were conducted with women who had experienced pregnancy outside of marriage and another five semi-structured interviews were conducted with the professional co-workers. Participants were recruited using purposive sampling. Transcripts were verbatim.

The findings were analyzed based on the Ecological Model Framework to seek a better understanding of the complex interaction between intrapersonal, interpersonal and social factors in causing pregnancy outside of marriage and its consequences.

Findings

The findings of this study revealed that pregnancy outside of marriage was a complex and multi-dimensional issue that was influenced and determined by the interrelationship between individual factors (such as lack of love and affection, negligence, early and forced marriage, high sex drive and lack of relevant knowledge for the women); and interpersonal factors (such as disrupted family relations, sexual harassment inside family, rape, physical problem of the husband that affects his potency, peer group pressure, drug and alcohol abuse, loss of boundaries, lack of guidance and disappointment with the life. Further analysis revealed the impact of socio cultural factors such as absence of male

figure, conservative society which led to poor instruction, economic hardships and man to man revenge.

Based on the findings of this study, women experienced various physical, emotional and socio-cultural difficulties as a consequence of pregnancy outside of marriage. Norms related to chastity and honors as well as the significance of family reputation in the Palestinian society affected women and families reaction to pregnancies. Therefore, it was found that pregnancy outside of marriage threatened their lives as a result of fear of social stigma. Women had experienced different levels of emotional difficulties such as distress and lack of hope. At interpersonal level, women were unsupported by family members, divorced and physically abused by relatives and even adulterers. Due to the silence of community with regard to any topic related to sexuality and the fear of both the victim and her family to disclose pregnancy, the perpetrator is often free of any legal implications. In contrast, the results of this study showed that the perpetrators in most cases of pregnancy outside of marriage blamed the women and even physically abused them especially if it was an instance of incest. Some of the adulterers and their families abused the victims physically by forcing them to undergo unsafe abortion. At the community level, it was found out that the main services offered to the victims were sheltering and separation between the new born and their mothers. It was also found out that the psychosocial services that the victims received were very limited, due to short duration of sheltering and lack of trained professionals.

Conclusion

This study is the first qualitative study that investigated the issue of pregnancy outside of marriage; it delved into how women perceive and understand the experience of pregnancy outside of marriage. Its significance appears in the conceptualization since it in its turn influences the women help seeking approaches.

In this study, the three-level social-ecological model as a framework for understanding the causes of pregnancy outside of marriage was adopted. The model was useful for enhancing our understanding of the causes and etiology of pregnancy outside of marriage and extending the gained knowledge of its consequences to benefit both women and their families. Furthermore, this model may provide a beneficial method for conceptualizing the prevention of sexual abuse, rape and/or incest specifically among Palestinian women that lead to pregnancy outside of marriage and for highlighting the urgent need for adopting appropriate services to help women with such ordeals.

العنوان: الحمل خارج إطار الزواج بين النساء الفلسطينيات

إعداد: فاطمة أحمد عمر حمّاد

المشرف: د. سلام الخطيب

ملخص

يعد الحمل خارج إطار الزواج واحدة من أهم المشكلات ذات الأبعاد المتعددة التي يمكن أن تمر بها المرأة الفلسطينية خاصة عندما يكون هذا الحمل نتيجة لعنف جنسي أو اغتصاب أو سفاح. كما أنه يوجد له أثار جسدية و عاطفية واجتماعية على النساء و عائلتهن في ضوء الأحكام الاجتماعية والعار.

الأهداف:

أن الهدف العام من هذه الدراسة هو الاطلاع وتحديد الأسباب وراء الحمل خارج إطار الزواج بين النساء الفلسطينيات في محاولة لفهم عواقب هذا الحمل. كما تهدف الدراسة إلى التحقق من الخدمات التي يعرضها المجتمع الفلسطيني لهؤلاء النساء في محاولة للخروج بتوصيات ذات جدوى بناءً على نتائج دراسة.

المنهجية:

لقد تم استخدام المنهج النوعي الوصفي في فحص أسباب الحمل خارج الزواج حيث أن الهدف من استخدام المنهج النوعي هو الحصول على فهم عميق لتجارب ومدارك النساء اللواتي مررن في هذه التجربة. حيث تم إجراء 11 مقابلة شبه رسمية مع 11 امرأة مررن بتجربة الحمل خارج إطار الزواج. و تم إجراء خمس مقابلات شبه رسمية مع أشخاص مختصين يعملون في هذا المجال. وتم اختيار عينة الدراسة بشكل قصدي وكذلك تم تدوين ما ذكره المشاركين في المقابلات.

لقد تم تحليل النتائج استناداً إلى إطار النموذج البيئي في محاولة لإيجاد فهم أفضل للتفاعل والتداخل المعقد بين العوامل الشخصية الداخلية ومع الآخرين والاجتماعية التي تتسبب في الحمل خارج إطار الزوجية.

النتائج

تكشف نتائج هذه الدراسة أن الحمل خارج الزواج هو عبارة عن مسألة غاية في التعقيد ومتعددة الجوانب حيث أنها تتأثر و تتحدد من خلال تداخل عدة عوامل فردية (مثل انعدام الحب والعاطفة، الإهمال، الزواج المبكر، الرغبة الجنسية العالية، سذاجة و بساطة الفتاة وكذلك الخلل في العلاقات الشخصية العائلية (مثل الخلل في العلاقات العائلية و التحرش الجنسي داخل العائلة و الاغتصاب والمشكلات الجسدية التي يعاني منها الزوج والتي تؤثر

على القدرة الجنسية والتأثر بالأصدقاء والمحيطين و تعاطي المخدرات والكحول وفقدان حدود الخصوصية وانعدام التوجيه و الشعور بخيبة أمل من الحياة)

كما كشفت تحليل الدراسة أثر العوامل الاجتماعية الثقافية مثل غياب الرمز الذكوري والمجتمع المحافظ الذي يؤدي إلى السذاجة لدى بعض النساء والصعوبات الاقتصادية والانتقام.

واستنادا إلى نتائج هذه الدراسة، فقد واجهت النساء الكثير من المصاعب الجسدية والعاطفية والاجتماعية الثقافية نتيجة لي الحمل خارج الزواج. وكذلك تؤثر الأعراف والعادات والتقاليد المتعلقة بالطهارة والشرف وكذلك أهمية سمعة العائلة في المجتمع الفلسطيني وأثرها على النساء و ردود فعل العائلات تجاه هذا النوع من الحمل. لذلك وجد أن الحمل خارج الزواج هدد حياتهن نتيجة لخوفهن من العار والوصمة الاجتماعية. فقد عانت النساء من مستويات مختلفة من الصعوبات العاطفية مثل البلاء والمحن وفقدان الأمل. وعلى الجانب الشخصي في التعامل مع الآخرين، لم يقدم أفراد العائلة الدعم لهن و تم تطليقهن وتعنيفهن جسديا من جانب الأقارب و حتى الجناة أنفسهم. ونتيجة لصمت المجتمع في ما يتعلق بأي موضوع له علاقة بالجنس وخوف الضحية وعائلتها من افتضاح الحمل، فإن الجاني لا يزال حراً طليقاً دون أن يكون هناك أي تبعات قانونية. وفي المقابل أظهرت نتائج هذه الدراسة أن الجناة في معظم حالات الحمل خارج الزواج وجهوا اللوم تجاه النساء وحتى أنهم أنفسهم أساءوا معاملتهن جسديا خاصة إذا كانت الحمل نتيجة سفاح. كما أن بعض الجناة وعائلاتهم عنفوا الضحايا من خلال إجبارهن على إجراء إجهاض غير امن. وعلى المستوى المجتمعي، فقد وجد أن الخدمات الرئيسية الممنوحة للضحايا كانت المأوى والفصل بين المولود الجديد ووالدته. كما وجد أن الخدمات النفسية اجتماعية التي تلقتها الضحايا كانت محدودة نتيجة إلى قصر الفترة الزمنية ونقص في عدد المختصين المتدربين.

الخاتمة:

تعتبر هذه الدراسة أول بحث نوعي وصفي تحقق من مسالة الحمل خارج الزواج حيث أنها تعمقت في دراسة مدى إدراك النساء وفهمهن لتجربة الحمل خارج الزواج. وتظهر أهمية الدراسة في إحداث التصور المفاهيمي كونها تؤثر بدورها على طرق مساعدة النساء. كما تم في هذه الدراسة تبني الإطار النموذج البيئي الاجتماعي ذا الثلاثة مستويات لأستعرض أسباب الحمل خارج الزواج. لقد كان هذا النموذج مفيدا في زيادة فهمنا للأسباب و لحمل خارج الزواج وكذلك زيادة مدى المعرفة المكتسبة حول نتائجها في توفير الفائدة لكل من النساء وعائلتهن. كما أنه

يمكن لهذا النموذج أن يوفر وسيلة مفيدة لفهم مفاهيم الوقاية من العنف الجنسي أو الاغتصاب أو السفاح خاصة بين النساء الفلسطينيات والذي أدى بدوره إلى الحمل خارج الزواج من خلال التركيز على الحاجة الماسة لتبني الخدمات المناسبة لمساعدة النساء في تلك المحنة.

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List of Abbreviations

WHO	World Health Organization
CEDAW	Convention on the Elimination of All Forms of Discrimination against Women
ICPD	International Conference on Population and Development
MDGs	Millennium Development Goals
GBV	Gender Based Violence
UN	United Nations
UNICEF	United Nations Children's Emergency Fund
UNIFEM	United Nations Development Fund for Women
UNDP	United Nations Development Program
FP	Family Planning
FGC	Female Genital Cutting
HFH	Holy Family Hospital
PFPPA	Palestinian Family Planning and Protection Association
Mehwar	Protection and Empowerment of Women and Family Center
NGO	Non Governmental Organization
OPT	Occupied Palestinian Territory
MoSA	Ministry of Social Affairs
MOH	Ministry of Health
FPU	Family Protection Units
PCBS	Palestinian Central Bureau of Statistics
VAW	Violence against Women
GBV	Gender based violence
Crèche	Internal home for babies run by Sisters of Charity (in Bethlehem)
GBSV	Gender based sexual violence
Al-Muntada	Palestinian Non-Governmental Organization Against Domestic Violence Against Women
MIFTAH	Palestinian Initiative for the Promotion of Global Dialogue and Democracy
UNGA	General Assembly of the United Nations

ICHR	Independent Commission for Human Rights
IASC	International Accounting Standards Committee
HK	Honor Killing
RNNIA	Rape, Abuse and Incest National Network
UNHCR	United Nations High Commissioner for Refugees
ACOG	American College of Obstetricians and Gynecologists Committee
UNFPA	United Nations Population Fund
WCLAC	Women's Centre for Legal Aid and Counseling

Chapter I

Introduction

1.1 Study background

One of the most significant aspects of health care is Maternal Health; it refers to the health of women during pregnancy, childbirth, and the postpartum periods (WHO, 2013). The most important part of maternal health is delivery since its consequences are very serious and can affect the woman's life in different aspects namely, physical, psychological, mental and social. Child birth resulting from illegal pregnancy becomes a serious issue. Illegal pregnancy is known as pregnancy which takes place outside of marriage institution due to rape, incest, prostitution or extra- marital relationship.

Unwanted pregnancy is defined as pregnancy that is not desired by one or both biological parent (WHO, 2003). In this study, the term pregnancy outside of marriage is adopted, because the rendering of the term "illegal pregnancy" is a word for word translation from Arabic language (Al-hamil Al-ghair Shari, 2016); However, "illegal pregnancy" was not found in the literature due to transcultural and cultural bound terminology. Therefore, the term "pregnancy outside of marriage" as a term can be more holistic than "unwanted pregnancy" because the latter as term gives the reader the impression that marriage and social considerations were met, but the pregnancy was untimed, but the study focused on both married and single women who had pregnancy outside of marriage and out of wedlock. Therefore, the adopted term should represent this particular experience along with other social considerations such as social judgment and related taboos.

The term illegal pregnancy is used in eastern societies and China (Hemminki et al., 2005). In other cultures, illegal pregnancy is replaced by the term unwanted pregnancy or pregnancy outside of marriage (Hemminiki et al., 2005). The meaning of marriage differs from one person to another and from one period to another. In ancient times, a marriage meant a condition in which a woman was given to a man almost as property, and often as part of a political, social, or business arrangement. In the majority of the human history, marriage has been a permanent institution that, once entered into, it cannot be dissolved except by the death of one of the spouses (Hemminiki et al., 2005). However, nowadays marriage is different; marriage is considered more of a gathering of equals, rather than the subjugation of one to the other, and it has become much more temporary than it has been in past years. Legally, marriage is a binding contract between the two parties and joins their possessions, income, and lives, and it is recognized by society. Termination of the contract

can only happen through the legal process of divorce, (The labor of love magazine, 2010, p. 339).

Other concepts related to unwanted pregnancy are unplanned pregnancy, unintended pregnancy or mistimed pregnancy. All of these concepts assume that pregnancy is a conscious decision (Santellie et al., 2003). Unintended pregnancy receives great attention from the community and both national and international health agencies due to its bad health outcomes that increase morbidity and mortality rates among children and mothers (Gipson, et al., 2008). In this research, unintended pregnancy, related to rape and /or incest, will be studied since it is commonly known in the Palestinian society as illegal pregnancy. Unintended pregnancies are defined as “pregnancies that are reported to have been either unwanted (i.e., they occurred when no children, or no more children, were desired) or mistimed (i.e., they occurred earlier than desired) (Santellie et al., 2003). Then pregnancy becomes unwanted or at least undesired by the female who was exposed to sexual violence like rape or incest. All the women together today and tomorrow Sawa (2015) reported a very high percentage of rape outside the family up to 20%, together with 6% attempted rape, 3% of indecent behavior and 18% of unspecified abuse. However, the report did not provide any data about the prevalence of pregnancies outside of marriage among women but emphasized that in 2015, the three shelters in Palestine received a total number of 115 abused women whose ages range between 14 to 55 years old (with a high rate between 18-35 years old) from all over the West Bank, and reported that girls under 18 experienced sexual harassment and sexual abuse besides other kinds of violence (Sawa,2015). Palestinian society placed a lot of value on women’s purity and chastity and therefore, issues related to sexuality is considered a taboo topic and an issue of deep shame to the women and their families. Pre-marital relationship can bring shame and destroy the honor concept of women rendering a spiral of guilt or fear among women, and may cost the woman her life (Nalenga, 2012). Palestinian society generally had a negative attitude towards unmarried mothers, influenced by deeply embedded cultural and religious moral beliefs regarding out-of-wedlock pregnancy and sex. Moreover, as a consequence of the sensitivity of discussing sexual topics, the statistics on rape and pregnancy outside of marriage in Palestine are difficult to obtain and notoriously unreliable because of significant underreporting. PCBS (2015) in their report stressed that statistics about sexual violence should be analyzed cautiously because it is not something that openly can be talked about and that is due to stigma, shame and social pressures.

In a study conducted in Nigeria about (Unintended pregnancy among adolescents and young women in Anambra state, south east Nigeria) by Amboi Anthony, 2004, it was found that having a child outside marriage was not uncommon in many countries. Latin America, the Caribbean, parts of sub-Saharan Africa and high-income countries have higher rates of adolescent pregnancy outside of marriage than Asia has. This reflects the different socio cultural contexts and their effect on the acceptance of pregnancy outside of marriage.

Additionally, because of the complex nature of the problem, there is a gap in research that explores the contributing factors and the effects of pregnancy outside of marriage on women. This study is a step to fill a gap in the literature and add to the scant existing knowledge around pregnancy outside of marriage.

1.2 Violence versus abuse:

The term 'violence' is generally used to refer to behavioral acts that can cause physical injury to another person (Straus and Gelles, 1990), while the term 'abuse' includes a broader range of physical, emotional, verbal, and psychological acts intended to harm or control another person in an interpersonal relationship (Freeman, 2008; Gordon, 2008). In violence research, the terms 'violence' and 'abuse' are often used to refer to domestic violence. Domestic abuse is used to refer to violence perpetrated by one family member against another member with the intent to dominate and control physically, psychologically, emotionally or even financial deprivation (Shipway, 2004).

Stanko et al. (2003) had defined 'violence' as any behavior by an individual that intentionally threatens, attempts to inflict, or does cause physical, sexual, or psychological harm to others. This definition of violence covers a wider range, including physical, sexual and/or psychological harm. Similarly, researchers in the fields of psychology, mental health and social work have frequently defined 'violence' as any 'physical, verbal, or sexual acts that are experienced by a woman or a girl as a threat, invasion, or assault, which have the effect of hurting or degrading her and/or taking away her ability to control contact with another person' (Koss et al., 1992). Proponents of these broader terms of definitions agree that this can appropriately represent the experiences of abused women who have revealed that verbal and psychological abuses were more harmful than the actual physical abuse, and have the effect of hurting her or degrading her (Stanko, 1998)

1.3 Violence against women concept:

‘Male-to-female violence’ has also been used by Dekeseredy and Dragiewicz, (2009), while others argue that women can also be violent in marriage or cohabiting relationships, and they prefer to employ gender-neutral terms such as ‘family violence’ or ‘intimate partner violence’ (Dutton, 2006),(Machado, et al,2014). Domestic violence can take many forms such as psychological abuse (such as, degrading, isolating, verbal abuse, rejecting and denying emotional responsiveness), physical abuse (such as, slapping, punching, the use of weapons to injure), and sexual abuse as came in world report on violence and health (WHO, 2002). Domestic violence may also vary across cultures and countries, and it includes forced marriage, rape, honor killing and dowry abuse, and death (McKie, 2005).

There is no universally accepted definition of violence against women. Some human rights activists prefer a broad-based definition that includes “structural violence“ such as poverty, and unequal access to health and education. Others have argued for a more limited definition in order not to lose the actual descriptive power of the term.

United Nation (UN) (2006) refers to gender-based roots of violence, and recognizes that “violence against women is one of the crucial social mechanisms by which women are forced into subordinate position compared with men. This definition broadens the concept of violence against women by including both physical and psychological harm done towards women, and it includes acts in both private and public life. The Declaration on the Elimination of Violence against Women (1993), defines violence against women as encompassing, but not limited to, three areas: violence occurring in the family, within the general community, and violence perpetrated or condoned by the State.

1.4 Sexual violence:

It was defined by WHO multi-country study on women’s health and domestic violence against women. The summary report (Geneva, World Health Organization, 2005) of initial results on prevalence, health outcomes and women’s responses addressed three behaviors:

- being physically forced to have sexual intercourse against her will.
- having sexual intercourse because she was afraid of what her partner might do.
- being forced to do something sexual she found degrading or humiliating.

So, it's any sexual act, attempt to obtain a sexual act, unwanted sexual comments or advances, or acts to traffic, or otherwise directed against a person’s sexuality using

coercion, by any person regardless of their relationship to the victim, in any setting including but not limited to home and work. This definition includes rape, defined as “the physically forced or otherwise coerced penetration of the vulva or anus with a penis, other body part or object – however the legal definition of rape may vary in different countries (WHO, 2002).

Sexual violence is a common and a serious public health problem affecting millions of people each year throughout the world; it is driven by many factors operating in a range of social, cultural and economic contexts (WHO, 2003). It defined by International Accounting Standards Committee (IASC) as an umbrella term that includes, at least, rape, attempted rape, sexual abuse and sexual exploitation. It involves “any sexual act, attempt to obtain a sexual act, unwanted sexual comments or advances, or acts to traffic a person’s sexuality, using coercion, threats of harm or physical force, by any person regardless of relationship to the survivor, in any setting, including but not limited to home and work” (IASC, 2005).

The lack of a clear definition of sexual violence and a commonly accepted language inhibits the development of an effective reporting system and/or databases, and thus it restrains prevention, monitoring and advocacy efforts (Baker et al., 2007). WHO (2005) multi-country study on women’s health and domestic violence found out that 10 – 27% of women and girls have reported experiencing sexual abuse in their lifetime (Moreno, Hansen et al., 2005).

1.5 Gender-Based Violence and debated definitions:

One of the key challenges that is facing international research on sexual and gender-based violence is the absence of meaningful cross-cultural definitions of the different types of violence and abuse (WHO, 2005). Individuals and communities have diverse understandings of violence, and what may constitute a crime in one culture, may represent normality in another. It is possible to argue that case definitions derived from local legislation are important for designing prevention and response activities. However, contextual definitions need not prevent the development of standard and universally implemented Gender-based violence case definitions (Baker, 2007).

Gender-based violence (GBV) is “physical, mental, or social abuse that is directed against a person because of his or her gender or gender role in a society or culture. In these cases, a person has no choice to refuse or pursue other options without severe social, physical, or

psychological consequences” (United Nations High Commissioner for Refugees (UNHCR, 2000).

The United Nations Population Fund (UNFPA) Gender Theme Group (1998) extends the definition of gender-based violence to include sexual abuse and harm. The term gender-based violence is used interchangeably with the term violence against women although the UN has narrowed the definition of violence against women to refer to “any act of gender-based violence that results in, or is likely to result in, physical, sexual or psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivations of liberty, whether occurring in public or private life (General Assembly of the United Nations (UNGA), 1993).

1.6 Socio-Cultural Context of the Palestinian Society:

The nature of the Palestinian society, which is part of the Middle Eastern society, is considered to be both religious and conservative. This nature controls relations between people (Lassner et al., 2007); consequently, pregnancy outside of marriage is completely forbidden and is considered a shame on women and their family; however, it doesn't affect men equally (Eid et al., 2012). The Palestinian society is based on a patriarchal and male-dominated system of traditions. Everything within its domain is defined according to masculine values, which are premised on controlling women and undermining female individualism. Constraints and restrictions have always pushed women away from the decision-making process (Golan, 2012).

Palestine cultural traditions, norms and practices are the main sources for various forms of violence, such as honor and sexual crimes (Eid, 2012). These cultural, social, and economic areas lead to problems with women's reproductive and sexual health, including harmful practices with health consequences and dangers that physically and psychologically impacted Palestinian women (Eid, 2012). Women have had to continually challenge numerous societal restrictions and constraints that have been imposed by conservative thoughts that were applied in the society (Offenhauer, 2005).

There is growing support within Palestinian society for conservative and/or religious thoughts that support gender equality and women's rights (UNFPA, 2005). Such forces intersect with cultural traditions that are resistant to change as well as patriarchal social structures that have led to a further shrinking of the political space in which topics such as gender-based violence (GBV) can be addressed (UNFPA, 2005). Socially, it is difficult to

talk about gender-based violence due to traditional gender stereotypes, a general lack of awareness and the lack of knowledge about the negative social consequences that such violence has on society (UNFPA, 2005)

As came in a report called "Clan conflicts in the Palestinian Territory"; the mediation (al-Ashaiyr or Rijal Sulh) can be involved in cases within families; it also focuses on conflicts related to honor of other family or family reputation. The traditional conflict mediation and reconciliation system does not only lend itself to protecting the woman from violence within families, but it can also reach other solutions like forcing the perpetrator of sexual violence or even sexual relations outside of marriage to marry his victim in order to save the woman family reputation. It is, however, often consulted in cases where a woman is at risk of being killed as a result of being deemed to have tarnished her family's reputation through her behavior.(LANDINFO,2008).

In some cases, the conflict mediators will attempt to negotiate a solution whereby the family guarantees the woman's safety, or they find a relative who will take the woman in and protect her. But it is also can make the perpetrator marry his victim, in an attempt to preserve the family reputation especially if she is pregnant. (LANDINFO, 2008)

While the Jordanian and Egyptian laws are enforced in the West Bank and Gaza, respectively, these laws do not protect the sexually assaulted victims; nevertheless, they justify the murdering of these women under the pretext of "Honor".(LANDINFO,2008). Ironically, the murder is not only protected by law, but also praised by the society; honor does not justify murdering of women, but it also protects men and deprives women of their rights (Kevorkian et al., 2006).Therefore, many women have been murdered as a consequence of incest crimes to protect these sexual abusers, who are members of their own family, such as father, brother or uncle. For this reason, The Holy Family Hospital in Bethlehem in the West Bank (HFH), the (Creche) the children home in HFH, Mehwar (Protection and Empowerment of Women and Family Center) in Bethlehem, Palestinian Family Planning and Protection Association (PFPPA) and Family Protection Units in police stations all aim to protect these women from being killed and to keep their rights to live after having their babies under safe medical and psychosocial conditions.

1-7 Problem Statement

Within the framework of WHO definition of health as a state of complete physical, mental and social well-being, and not merely the absence of disease or infirmity, reproductive health addresses the reproductive processes, functions and systems at all stages of life. Reproductive health, therefore, implies that people are able to have a responsible, satisfying and safe sex life, and that they have the capability to reproduce and the freedom to decide if, when and how often to do so (WHO, 2013).

One of the most unique experiences that women face is pregnancy; however, when faced with pregnancy outside of marriage, special support and care from a professional co-worker is needed to manage this experience. Furthermore, delivery is usually more difficult when pregnancy cause is linked to a bad experience, which may threaten the life of a mother or a child. Some women may consider having an unsafe abortion, which can be dramatic both physiologically and psychologically. Due to the lack of accurate records of such social problems, and secrecy surrounding pregnancy outside of marriage, rape, and incest due to its social impact, this study, will trail pregnancies to explore the perceptions, feelings and experiences of these women who delivered or aborted a pregnancy outside of marriage. Such studies may encourage religious, health, social and legal professionals to demonstrate the need for better prevention of pregnancies outside of marriage. Systematic reporting of maternal suffering, information for women experiencing pregnancies outside of marriage, and quality care for women experiencing post- sexual violence complications are lacking where such studies may alert the public at large to look more deeply and analytically into these problem. Therefore, this study aimed at investigating this issue in the Palestinian society.

1.8 Significance of the study

In the Palestinian community, there is a variety of health care providers who provide maternity care especially to sexual and reproductive health care at primary and societal care level, but there are no clear protocols or trained health teams who are specialized to deal with those women or young girls who suffer from rape, incest, almost every day and this might lead to prostitution. In addition, there is rather limited or even no information about those groups of women due to several socio-cultural reasons. Sexual violence in the community is highly invisible and it is generally labeled as “Shame” Crimes within the family (including father, brother and uncle). They are more hidden from public view.

Police and courts in many places are less willing or prepared to target such violence, and to recognize or take action against sexual violence (Kevorkian et al.,2006).

The motive for this study comes from the awareness of the dearth of in-depth research on sexual violence and pregnancy outside of marriage among Palestinian women. Although there is a considerable number studies on the issue of sexual violence, the issue of pregnancy which has taken place as a result of sexual violence or sexual relations outside of marriage has little attention. This study attempts to fill this gap in the literature. For this reason, the present study is significant to this effect, and it represents a valuable source for further studies. First, it adds to the literature specific information on the Palestine situation concerning sexual violence and sexual relations outside of marriage, which may lead to serious social and physical health problems especially with pregnant victims. Second, it is certainly of great importance in drawing the society's attention to the issue of rape and /or incest and pregnancy outside of marriage within the Palestinian community, and the need for inclusive services and policies to protect Palestinian women experiencing sexual violence; this highlights the relevance of this study. Sexual violence cannot be ignored; it must be addressed because of the detrimental effects that it has on abused women (Al Muntada, 2007). In this study, the researcher draws attention to Palestinian women whose voices have been silenced by the lack of inclusion of their narratives in the discourse of sexual violence and pregnancy outside of marriage in the Palestinian context. This study attempted to understand and present women's subjective understanding and experiences of pregnancy outside of marriage as reported by the women in their own words.

This study identified the characteristics and factors influencing pregnancy outside of marriage or (pregnancies which followed rape and /or incest) among unmarried young women in the Palestinian community or among married women but their pregnancies resulted from sexual relations outside of marriage not from their husband. Unmarried teens or women with pregnancy outside of marriage attend and stay at Holy Family Hospital (HFH) in Bethlehem south of West Bank or head to Mehwar - the protection and empowerment family center in Beit Sahour in the West Bank. Most of these women experienced major stressors, most important of which is stigmatization because of the pregnancy outside of marriage. There are many studies on record regarding normal pregnancies; however, studies related pregnancies outside of marriage are insufficient. Therefore, it is important to further investigate the consequences of pregnancy outside of marriage. Perhaps this focus on this sector of girls or women will help to achieve their rights to live and to reach their reproductive rights which are enacted by most international

institutions and adopted by Palestinian health care providers. It is hoped that this study will contribute to break the barrier of silence for those victims to urge policy and decision makers implement the necessary measures and interventions to protect these victims.

1.9 The purpose of this study

This study was conducted to investigate the factors and characteristics of women or girls with pregnancy outside of marriage, and also to explore the social, interpersonal and emotional effects of pregnancy outside of marriage among Palestinian women.

1.10 Objectives

1. To investigate the contributing factors of pregnancy outside of marriage among Palestinian women.
2. To identify the emotional, physical and social effects of pregnancy outside of marriage on women.
3. To investigate the services offered by community institutions in Palestine for women with pregnancy outside of marriage.
4. To come out with recommendations based on the findings of the study.

1.11 Research Questions

In this study, the following questions will be answered:

How do pregnant women perceive their pregnancy (the pregnancy which was outside of marriage)?

What are the major contributing factors for pregnancy outside of marriage with women referred to women community centers?

What are the provided services for women with pregnancy outside of marriage?

What are the emotional, social and physical effects of pregnancy outside of marriage?

What are the available interventions for women with pregnancy outside of marriage to fulfill their needs in Palestine?

1.12 Strengths of this research

Adopting a qualitative research was suitable to nature of the research topic which gave strength to this study by:

1. Face to face interviews enabled the participants to elaborate in this research, the qualitative method was used to study a complex phenomenon namely, pregnancy outside of marriage among Palestinian women to explore the phenomena of pregnancy outside of marriage in depth.
2. Because the pregnancy outside of marriage is connected to sexuality, it is considered a taboo related topic and not easy to be explored. And this is one of the current research strengths that the researcher discussed despite the sensitivity of the topic.
3. The data was based on the participants' own categories of meaning. In order to describe the victim's individual information related to their experience they used the same words. In addition, the use of the data of the exact words and categories of meaning by the participants in this research, leads them to explore by themselves how and why pregnancy outside of marriage happened and it helped to answer the research questions. This provided a better understanding and description of those pregnant women outside of marriage, their reasons and reactions to such experience, it even let the participants explore their insider's viewpoint of their pregnancy outside of marriage; many small detailed were obtained from the participants through this research. This enriches the data and the findings of this study.
4. On the other hand, the researcher in this study was able to identify the context of Palestinian society and norms and the existing factors and their relation with the phenomenon of pregnancy outside of marriage, and inductively relate the results to ecological model as conceptual frame.
5. Finally, this research is required to be conducted locally as stated in several research recommendations, since there was a need for further research related to Palestinian women sex related topics as one way of protection of Palestinian women from any form of violence especially sexual violence; this confirms the Convention on the Elimination of All Forms of Discrimination against Women "CEDAW" which was adopted by Palestinian Authority, at the ends of nineties; however, there is still a gap in the literature locally in relation to taboo related topics, especially pregnancy outside of marriage. Therefore, a qualitative research can be responsive to this local situation.

1.13 The limitations of this research

Lack of national and regional studies about pregnancy outside of marriage. This limitation lead the researcher compare her findings only with universal studies.

1. Lack of a reliable baseline data in Palestine about pregnancy outside of marriage and wedlock relates to the cultural beliefs and conservatism (shraf al aeleh) which may lead to the hiding of those cases with pregnancies outside of marriage due to the notion of honor and honor code.
2. In general, the whole process of data collection and recruitment of the participants were time consuming and challenging related to the sensitive nature of the research topic.
3. Another limitation that faced the researcher was the fact that the sample was purposive and small, and most of the women participants were Muslim; therefore, the research findings are not representative of all the Palestinian population. The selected institutions and participants had long experience in dealing with this issue and therefore, the findings contribute to shading light on the problem of unwanted pregnancies among women and it can be used as a baseline data for further studies in a similar context.
4. The sensitivity of the topic affected the recruitment process and some of the participants were reluctant to share their stories with the researcher. Therefore, it took the researcher a long time to continue data collection, and because of that, time frame of this research was reestablished several times accordingly. In the Palestinian society, protecting family honor entails family members avoidance of any discussion of any private issues related to family matters in public. Therefore, participants tried to avoid discussing details of sexual experiences with the researcher, who had to exercise too much effort to attain their trust in order to obtain rich and real data.

1.14 Summary

This chapter has provided an overview of the literature on the study of pregnancy outside of marriage in Palestine; it included the rationale for conducting this research and the significance of the study. This chapter also identified the varied definitions of gender-based violence, sexual violence and violence against women. The chapter also addressed the cultural and social contexts of the Palestinian society, finally the strength and the limitation of the study were included in this chapter.

Chapter II

Review of Literature

2.1 Introduction

After the researcher reviewed the literature, several headings were listed in order to provide an overview of the topic under study and to identify what is already known in the area of the study. It also enabled the researcher to compare the results of previous literature with those of the present study. Intensive search in electronic resources was conducted using Google search, Pubmed and PsychInfo. The following key search terms were used: unwanted pregnancy, pregnancy after rape, pregnancy outside of marriage, sexual relationships outside the boundaries of marriage, incest, violence against women, honor killing and gender based violence. It is also worth noting that delving deep into the literature under those previous titles might lead the researcher to find or obtain a huge bulk of entries. This had a great impact in reviewing a huge number of studies. The ones that were related to the theme of the current study were kept while those which were irrelevant were ignored. The studies were filtered and about 30 out of 64 studies which had similar titles, objectives, and methodology were reviewed. At this chapter might include several headings related to research objectives. Studies that discussed causes of pregnancy outside of marriage were summarized. Also studies that dealt with implications whether psychological, physical, social or services that can be provided for those women were discussed.

On 12 October 2016, UN Women Arabic recently published a study on the “Dangerous Data: Radical Increase in the percentage of Arab minor wives”. It reported that 700 million women worldwide got married before the age of eighteen; especially in the Arab region 14% of girls under 18 years of age are getting married. This percentage increases within refugees communities in the region while the percentage of minor wives in pre war Syria was between 11-13%. This percentage increased between Syrian refugees in Jordan and reached 18% in 2012 then 25% in the year 2013. In another report by the United Nations Children's Emergency Fund (UNICEF) on Child Marriages, it revealed that there are 39,000 marriages every day. They proposed that more than 140 million girls will marry between 2011 and 2020. In its latest update in 2013, the report addressed several issues including the health and psychological impacts on a married girl under the age of 18 years.

It was also reported in the UNICEF data update in monitoring the situation of children and women update in November (2015) that around 120 million girls under the age of 20

(about 1 in 10) have been subjected to forced sexual act or sexual intercourse at some point in their lives (UNICEF, 2015).

2.2 Gaps in literature

The review of the literature showed that issue of sexuality in Palestine is still limited, so it was not easy to find studies directly related to sexual violence or incest. There was little reference to pregnancy out of wedlock or outside of marriage since it was not the main subject matter of these studies. Moreover, studies in the Arab and surrounding countries did not give this sensitive topic its due right. We do not deny that there is an increase of attention among Middle Eastern researchers regarding violence against women in general over the last years; this has gradually made them address pregnancy outside of marriage, but it was linked to sexual violence since available studies are only on the topic of violence. To be more specific, the researcher wanted to research pregnancy outside of marriage and not necessarily pregnancy resulting from sexual violence but as a result of women involvement in sexual relationships whether it was sexual violence or according to their own will. In the light of the dearth of national and regional studies in the topic, the research relied more on international studies to add deep analysis and to provide broad picture about the issue despite of the cultural difference between Palestinians and the West. It is worth to mention the difference in the terms. Pregnancy outside of marriage in Palestine is expressed by the West in their countries as teenager's pregnancy or out of wedlock. Despite of the official acknowledgment of the of violence against women in the Palestinian society, there are no national comprehensive statistics documenting different forms of violence against women, except for some cases that were documented through individual initiatives by nongovernmental institutions and some researchers who are interested in violence against women (VAW) issues. However, the provided data is still far from being sufficient and valid to provide comprehensive understanding.

2.3 Avoidance of reporting to police and individual statistics

Following a review of most literature related to pregnancy outside of marriage phenomenon which starts with rape to intended sexual relationship which might or might not result in pregnancy, it was found that the victims were reserved and secretive about engaging into those matters as shown by their reactions and this would lead to an underestimation of the size of the undocumented problem due to its consequences. In

addition, upon a review of some statistics internationally, it was found that women avoided mentioning or reporting to the police what had happened with them in this regard. As found in the 2009 Statistics Canada (General Social Survey), there was a rate of 34 sexual assault incidents for every 1,000 women in the previous 12 months. Nine in ten sexual assaults against women (90%) were never reported to police. This percentage of women avoiding the police was high in the western society, so imagine what can be said about the eastern society which is characterized by being secretive, reserved and closed. It is not up to the researcher to judge on the existence of differences to the extent that underestimates the problem. However, there was an Arab study in Egypt which indicated that there was huge number of such cases that were never reported to the police due to reservation and nondisclosure. In an Egyptian Arabic language study on “Circumcision and violence against women” (2003) conducted by Muntassir, it was reported that 98% of rape cases in Egypt were not reported according to Egyptian researchers estimates despite of the scarcity of available statistics.

On the other hand, Kessler (2013) claimed that the incidence of rape resulting in pregnancy was “very low” because of the violence and stigma associated with rape as well as different definitions and wide range of statistics concerning rape, obviously, the number of rapes would make a huge difference in the number of rapes that result in pregnancy. This justifies the gap in literature in this field due to the lack of real numbers of these women whether they were raped and became pregnant or became pregnant upon their consent. The lack in numbers is due to the fact that this subject is taboo and most women prefer not to engage or seek help and thus disclosing their problem.

However, discussion of pregnancy outside of marriage is not acceptable and as open as other topics, there was an increase in number of cases of women exposed to violence each year, in 2006, 64 cases of sexual assault were reported compared to 85 cases in 2007; 339 cases in 2008 and 466 cases in 2009 (Diab, 2011).

Following a review of local literature; the researcher found a study that was held by Ministry of Women Affairs National Committee, in order to put a national strategy to combat violence against women 2011-2019. It was produced through the Millennium Development Goals, (MDG) for Gender Equality and women empowerment which was adopted by the occupied Palestinian territory (OPT). In this study, women disclosed some of the causes which might lead to problems. The participants (women) mentioned that the use of drugs and alcohol by their husbands turned their husbands into abusive husbands. It was also found in the study that those women and girls never reached the institutions

because most of the sexual violence problems were solved internally among families (Ministry of Women Affairs, 2011). Another study by Fain (2001) about perception of community response to sexual assault in a survey done in Washington showed that the victims reported police avoidance after such experience due to its stigmatization of sexual relation topics.

2.4 Violence against women in Palestine and its incidence

One of the topics that cannot be ignored when talking about pregnancy outside of marriage among Palestinian women is the issue of violence based on sex. A review of studies conducted in Palestine to this effect would enrich the study and help the reader to identify the social life of the Palestinian girl on the ground.

Many studies were conducted in Palestine about Gender Based Violence (GBV) since 1995 and most of the Non-governmental organization (NGOs), shed light on GBV but their focus was on surveying prevalence and incidence, and by documenting their real life stories while GBVs related sexuality is still shallow and remains conservative due to its taboo nature. In the same year (1995), El-Haj and colleagues completed a household survey with 1153 adolescent female participants to assess GBSV (Gender based sexual violence). The study focused on the sexual harassment inside the family; the participants were asked if they had experienced any kind of violence within one year prior to the survey on GBSV. El-Haj found in specific, 7.4% of the participants reported being sexually harassed by their brother at least once, and some about (5.2%) of them revealed that they were exposed to harassment and to an attempted rape. Another part of the participants forming (4.3%) revealed that their fathers actually raped them, (20.6%) reported that they knew a girl who was sexually harassed by a brother. Additionally, part of participants (13.2%) reported knowing someone who was actually raped by her father. Since part of pregnancy outside of marriage might result from these domestic assaults, the researcher decided to consider them part of this study. Tamish (1996) investigated sexuality and sexual behavior and perceptions including sexual assault issue. In her study, Tamish recorded 54 workshops carried out throughout Gaza and West Bank which were direct, open and public in her qualitative study. She found out that the overall participants were receptive to sexual issues like honor violence, early marriage, and sexual abuse; ten years later (2006) Abdo et al. conducted a comparative a study that corresponded with Tamish study; by exploring the Palestinian women forms of violence that they suffer from, like;

early marriage, honor crimes, and sexual abuse due to several social and families considerations. Al-Rifai and Sayej (2006) conducted a study targeting vulnerable youth. The study aimed at knowing their perception on sexual violence. The results illustrated similar responses from professionals and youth when asked about the meaning of sexual violence. It was interesting to note that the youth showed a more advanced understanding of the subject than that of the professionals. For example, in one male youth group, participants agreed that ‘forced marriage is a form of sexual violence’; this brings us to the conclusion that early marriage could easily be a forced one.

In study about Palestinian woman's information and media center about the women situation in Gaza Strip after Hamas took authority there in 2009, it found that 53% of women in Gaza were exposed to physical abuse, and 15% were exposed to sexual assault, the data was collected by 350 interviews.(Woman’s Information and Media Center, 2009). Abdo (2000), research on Palestinian refugee camps, particularly in Gaza, confirmed suffering of the women in the Palestinian camps in Gaza. It showed that refugee women and girls had to bear the brunt of increased physical, mental, psychological, and sexual domestic violence, including incest and rape.(Abdo,2000).

Palestinian Central Bureau of Statistics (PCBS), conducted a survey in 2011 to study abuse against Palestinian women. The results of the survey showed that showed that the percent of women exposed to sexual violence are 0.6%, for women who were exposed for one time in her life the result was 85.7%, and for two times was 10.6%,and more than three times was 3.7% (PCBS, 2011). In the same survey 51 % of ever-married women in the Gaza Strip were exposed to one form of violence by their husbands during the 12 months preceding the survey. Among those women, the rate of those who were exposed to psychological violence at least once was 76.4%, 88.3 % were exposed to economic abuse violence, 78.9 % were exposed to social violence, 34.8 % were exposed to physical violence, and 14.9 % were exposed to sexual violence (PCBS, 2011), The rate of those who were exposed to psychological violence “at least for one time” among those women out of violated women was 58.6%. 55.1% were exposed to economical violence, 54.8% were exposed to social violence, 23.5% were exposed to physical violence and 11.8% were exposed to sexual violence, (PCBS, 2011). This is also indicative of the magnitude of the problem of sexual relationships outside of the marriage in Palestine which leads to pregnancy. It is worth to mention here that the sensitivity of the topic may led to underreporting of rape cases to authority or institutions which means that most of the statistics about the issue is invalid and unreliable.

Muller and Barhoum (2015) conducted a study that took place between 20 April and 7 July 2015, in Gaza. The study adopted a mixed methods approach, the quantitative part was aimed at learning about different types of VAW perpetrated by different actors in different spaces, and their prevalence and frequencies. Many quantitative data was represented in this report to show the prevalence and the incidence of VAW in public and private spaces was 28% at homes, 64.3 % by husband/partner and 18.4 % by other family member. Verbal harassment happened in 15.9% in the street and shopping places as 69.8 % by male strangers and 5.8 % by other family member, 10.9% reported physical abuse most of the time at home with a percentage of 65.4% by husband/partner and 21.2% by other family member. Sexual harassment or attempted abuse was 3.9% mostly at home with 66.7 % was conducted by husband, partner and 16.7 % by stranger. The last form of VAW is threat to take children away 3.9 % as 50.0 % by Husband/partner, 18.8% by other family member and 18.8 % by stranger. (Muller and Barhoum, 2015). These results indicated that most of the incidence of violence against women was at home means that closed family members and mostly husbands were the most abusers of women in Gaza strip.

Violence is mostly perpetrated at home. In fact, intimate partner violence (IPV) has been recognized as the most common form of VAW (WHO 2012, 2013). It was found by the Women Affairs Centre, (2001) in a study about GBV including GBSV in the Gaza Strip that the second largest group of perpetrators came from the immediate family environment. Strangers are mainly responsible for verbal harassment in public places, such as shopping areas and streets, and they were the second largest group of perpetrators of sexual harassment or attempted sexual abuse (Women Affairs Centre, 2001).

The previous study by the Women Affairs Center in Gaza provided the following quantitative data to show that sexual harassment or attempted abuse reached 3.9% of abuse, mostly at home; 66.7 % by husband/partner, 16.7 % by stranger. Sexual harassment or attempted abuse 11.8% once, 35.3% twice, 23.5% (3-5 times), 17.6% (6-20 times), (Women Affairs Centre, 2001). Palestinian Ministry of Women's Affairs reported in its National strategy to combat violence against women; that 64 cases in 2006 were reported sexual assault, as compared with 85 cases in 2008, while 466 sexual assault cases were reported in 2009 (Women Affairs Centre, 2011).

2.5 The causes of pregnancy outside of marriage

2.5.1 Lack of love between the women and her husband

According to the UN reports in 2010, complications from pregnancy and childbirth are the leading causes of death for girls aged 15-19 years in developing countries. Of the 16 million adolescent girls who give birth every year, about 90 per cent are already married. In the same report, it was confirmed that girls vulnerable for early marriage would drop school. Moreover, the report reviewed statistical data referring to the size of this problem. It was explained that most parents who married their daughters at an early age was their way of escaping from their financial burden to alleviate the financial burden of the family. Undoubtedly, there was no love between the girl and her forced upon her husband. It was also acknowledged that such marriages exposed those girls to physical and psychological abuse from the partner. The problem of early marriage or children marriage was discussed in the report as a legal rights problem in which there was a violation of child, woman and human rights as well as the international conventions to this effect.

The Women Affairs Centre in (2001) conducted a study on GBV including GBSV in the Gaza Strip; 670 married women participated in the study which revealed that 62% of the women sample experienced at least one or more forms of GBV. 14.2% of the women experienced sexual assault. In this study, it was noticed that the age of couple was associated with higher level of all forms of GBV including sexual abuse in which the data suggested that early marriage can be a likely factor in sexual assaults within marriage. It is worth noting that marriage disputes between the couples lead to unsuccessful relationship between them. This would shed light on their search for another partner which would lead to another relationship outside the framework of marriage, (Women Affairs Centre, 2001).

In the WHO multi-country study (2012), 19–51% of women who had been physically abused by their partner had left home for at least one night, and 8–21% had left two to five times. The same report indicated that other women might stay in a violent and abusive relationship for a number of causes including fear of retaliation, lack of alternative means of economic support, concern for their children, lack of support from family and friends, stigma or fear of losing custody of children associated with divorce and love and the hope that the partner will change. These causes can be measured to on the relationship of a

married wife with a man who could exploit her through a sexual relationship which might lead to a pregnancy.

2.5.2 Sexual violence in all forms as causes of pregnancy outside of marriage

Sexual violence was documented to be the main cause of pregnancy outside of marriage in national and international studies, as found by (Alo & Akinde, 2010) in the study of Premarital sexual activities in an urban society of Southwest_ Nigeria, and in Ogunsola (2010) study. In another two studies, one related to " Sexual Violence and Reproductive Health Outcomes among South African female youths: A contextual analysis" by Spiser,et al (2009) and the other study concerning of teen mother often forced into sex by Cullinan (2003), found that 11–20% of pregnancies in teenagers were a direct result of rape, while about 60% of teenage mothers had unwanted sexual experiences preceding their pregnancy. Before the age of 15, a majority of first-intercourse experiences among females are reported to be non voluntary; the Guttmacher Institute found that 60% of girls who had sex before the age of 15 were coerced by males who on average were six years older than them (Wynn, 2008).

As came by WHO (2012) report which titled as understanding and addressing violence; that the wide range of sexually violent acts can be in different circumstances and settings. The report mentioned the causes of pregnancy as a result of different sexual acts including:

- Rape within marriage or dating relationships.
- Rape by strangers.
- Systematic rape during armed conflict.
- Unwanted sexual advances or sexual harassment, including demanding sex in return for favors.
- Sexual abuse of mentally or physically disabled people.
- Sexual abuse of children.
- Forced marriage or cohabitation, including the marriage of children.
- Denial of the right to use contraceptives or to adopt other measures to protect against sexually transmitted diseases.

WHO report in 2013 mentioned that 2.5 million adolescents have unsafe abortions every year, and adolescents 15–19 who live in middle- and low-income countries account for 14% of all unsafe abortions. The reasons suggested for seeking abortion among Africans

includes premarital pregnancy or pregnancy resulting from nonconsensual sex, whereas in Asia, abortion is sought to terminate childbearing after achieving the desired number of children, which considered one of the major health problems among women worldwide (WHO, 2013).

National Crime Victimization Survey in US (2012), showed that 346,830 women were raped as a form of sexual violence, and according to medical reports the incidence of pregnancy for one-time unprotected sexual intercourse is 5%. (Department of Justice, 2012).Rape Abuse and Incest National Network (RAINN) (2012) estimates that there were 17,342 pregnancies as a result of rape in 2012 worldwide.

An international representative survey done by National Center for Injury Prevention and Control (2012) showed another numbers related to pregnancies that followed by rape, it was stated that “nearly 1 in 5 (18.3%) women reported experiencing rape at some time in their lives; on the other hand, it was found that rape results in about 32,000 pregnancies each year as indicated in American Journal of Obstetrics and Gynecology 1996; and, it was reported by the state of world populations (1999) that more than 14 million adolescents give birth each year and the large proportion of these pregnancies is unwanted especially in developing countries. It is estimated by the (WHO) that as 4.4 million abortions are sought by adolescent girls each year (WHO, 1999).

According to the WHO (2016) “having a child outside marriage is not uncommon in many countries and elaborate countries such as Latin America, the Caribbean, parts of sub-Saharan Africa, and high-income countries have higher rates of adolescent pregnancy outside of marriage than the case in Asia. Births to unmarried adolescent mothers are far more likely to be unintended. Coerced sex, reported by 10% of girls who first had sex before age of 15, contributes to unwanted adolescent pregnancies”(WHO, 2016).

In another study of factors associated with teenage pregnancy in Cape Town, South Africa in 2001, by Vundule et al, (2001) found that forced sexual initiation was the third most strongly related factor of pregnancy during teenage; forced sex can also result in unintended pregnancy among adult women. This study showed that the recurrence of sexual relationships among adolescents and coerced relationships in addition to not using contraceptives in such relationships increased the risk of pregnancy at a great extent, and between the high correlation of pregnancy and the frequency of the sexual act. It was found in the same study that there was a strong connection between spread of awareness, sexual health care, equality between the sexes and pregnancy. The study also summarized the

recommendations to draw strategies and practice strict measures in the use of contraceptives, as well as comprehensiveness in spreading awareness about sexual health and birth.

2.5.3 Peer group, alcohol use, and family effect

A study titled, “Friends, religiosity and first sex” by Adamczyk et al. in 2006 in Pennsylvania, it was found that there was a strong influence of the peers on friend especially this view and encouragement to engage in a sexual relationship for the first time. The study also found that boys who were strongly attached to their parents were less likely to engage in a sexual relationship outside of marriage than those who have weak relations with their parents. This study highlighted the role of the family in protecting their children from engaging in sexual relationships outside of marriage.

A regional study by Athaer (1986) was concerned of sex education, teenage pregnancy and marriage and sex in Islam. The researcher in this papers raised the meanings of sexual education among Islamic families, by relating the sexual relation meanings through the Quran and clarifying the necessity of marriage as natural and acceptable frame to do such acts. The study found that peer and friends have their effects about drowning the meaning of sexuality on their friends, which affected the individual ways in having sexual relations whether inside legal and religious ways like marriage, or in another ways like outside of marriage.

A qualitative study about pregnancy experiences with teenage girls in Nigeria that was conducted by Asonye (2014) found the effects of peers on adolescent premarital sexual relations (Asonye, 2014).

A literature review study that was conducted by the Federal Research Division, Library of Congress (2011) by P.Offenhauer who summarized quantitative and qualitative literature related to teen dating violence between 1999-2011, as well as risk factors correlated to teen dating including the demographic and community level factors such as the family level, individual level and situational risks. The review showed that two studies by Foshee in 2007, Ackard and Neumark in 2002 who studied the risk factors for perpetration and victimization of sexual violence among teenage found that the demographic factors, like more remote areas, and socio demographic factors, alcohol usage or individuals psychological states, like low self esteem, had made the girl more vulnerable to be sexually abused. The researchers found

that the commonly separated risk factors are shared by perpetrator characteristics and victim attributes; for example, behavior such as substance abuse may heighten the tendency of teenage dating abuse, but it may also be an outcome made more likely by sexual abuse as it was found out particularly in Ackard et al.'s (2002) and Foshee et al.'s study (2007).

On the other hand it was found that families, school or neighborhood were factors that heightened the risk factor for dating violence. It was found that adolescents who typically have friends who use dating violence, are vulnerable for using dating violence throughout adolescence and adolescents who have strong friendships and girls who typically have friends with pro-social beliefs were found to be less vulnerable for using dating violence that led to pregnancy, throughout adolescence. (Foshee et al., 2009).

Lewis et al.,(2015); Abbey et. al., (2001) studies mentioned that drinking or addiction to alcoholism whether by the victim or the perpetrator was a possible cause of pregnancy outside of marriage as stated in Lewis et al., (2015); Abbey et. al., (2001) studies about alcohol and sexual assault. Abbey et al (2001) study which was conducted in the United States indicated that about 25% of women experienced sexual assault or rape. It was found out that those women passed through this experience while they and their partner were under the influence of alcohol. Another study published in women health issue magazine by Lewis et al. (2015) was conducted to investigate the influence of alcohol on women who practiced unsafe sex and the transmission of sexual diseases and others. It conducted 20 semi-structured and in-depth interviews with 20 sexually active women to identify the nature of unintended sexual actions and events that an intoxicated and unconscious woman passes through as well as the influence of this on health. The study used a purposively selected sample and interviews were analyzed using a grounded theory approach. The study found that five major unintended sexual events emerged: sex with new partners; alternative sexual activities, including unprotected sex; blacked out sex or sex occurring during alcohol-related amnesia and rape. An additional alcohol and prey, largely occurring in bars and nightclubs, emerged as an important precursor to many of the unintended described events.

Researchers found out that alcohol use was associated with a variety of often dangerous and unintended sexual events. This underlies the link between alcohol use and sexual victimization and the need for intervention and development to reduce the emotional and physical harms resulting from the unintended consequences of alcohol use.

In order to summarize what was mentioned in the previous study which did not address pregnancy resulting from such unintended relationships in the case of intoxication, pregnancy has the largest share the same as other venereal diseases following a sexual relationship in the absence of any awareness observed by either side. The research team found that the health consequences of a sexual relationship between two intoxicated people are sexually transmitted diseases and unplanned or unwanted pregnancy as well as the huge negative impact on the sexual health (Lewis, et al., 2015)

Another study, by Offenhauer et al., (2011) covered two types of literature qualitative and quantitative, and investigated and defined risk factors at adolescence and the spread of violence. The result of the study showed that regression analysis revealed the associations between physical dating violence and independent variables, including general violence, substance use, emotional wellbeing.

2.5.4 Socioeconomic status, poverty, physical abuse, and early marriage

Low socioeconomic status and sometimes parental educational level are one of the defining attributes to increase the risk of dating violence that lead to pregnancy (Foshee et al., 2009). For example, a systematic review of studies investigating the factors associated with adolescent pregnancy among 13–19 year olds in the European Union (Imamura et al., 2007) – conducted in 2007 – highlighted the strong relationship between socio-economic deprivation and adolescent pregnancy. A study in US shows that unintended pregnancy is mostly concentrated among poor and low-income women (Guttmacher Institute, 2013). In developing countries, issues like dowry marriage was documented to be linked with pregnancy and further added that poor and marginalized girls are among those more likely to become pregnant, not only after getting married very young but also because they may engage in consensual or forced transactional sex to support themselves and their families (UNFPA, 2013).

As stated in a study titled, “Peace building and reconstruction with women reflections on Afghanistan, Iraq and Palestine” by Valentine, and Moghadam, (2005) “the problems that Palestinian women face are early marriage and high fertility, the poverty of female-headed households, difficulties in daily life, domestic violence and sexual abuse, low political participation and representation, and absence of a legal framework of rights- which was originated due to the persistence of patriarchal gender relations, the Israeli military

occupation and non resolution of the national problem, and the conservative nature of the main political forces. Patriarchal relations are particularly acute in the refugee camps and small towns. There, Palestinian women tend to be married young, at about nineteen, often to close cousins.” This gives the researcher a documented idea about the social analysis of the woman in the Palestinian community. It describes the challenges facing the women including poverty and early marriage.

Following an investigation of the causes of pregnancy outside of marriage in Palestine, it was found by Women's Affairs Center_ Gaza; that poverty and early marriage were major causes of a number of problems like sexual assault and others (Syam,2015).

Poverty is associated with increased rates of teenage pregnancy (Cullinan, 2003). Economically poor countries such as Niger and Bangladesh have far more teenage mothers compared with economically rich countries such as Switzerland and Japan; poverty is associated with increased rates of teenage pregnancy. UNFPA revealed statistics showed that, “Every day in developing countries, 20,000 girls under age 18 give birth. This amounts to 7.3 million births a year. And if all pregnancies are included, the number of adolescent pregnancies is much higher.” (UNFPA,2015). It is evident that the younger the girl, the risk of being exposed to problematic pregnancy is higher.

Another case study as part of a 2015 situation analysis by UNFPA indicated the difficult economic hardship that followed the 2014 Gaza conflict. Economy problem driven families made their daughters marry early in order to improve the economic situation of the families, which indicate that the risk factors for such serious problem like pregnancy outside of marriage can be more than one interrelated causes. The results of the previous mentioned study showed that the rate of child marriage was in Gaza higher than that in the West Bank; 28.6 % of women in the Gaza Strip aged 20-49 were married before the age of 18, compared to 21.4 % in the West Bank. It seems here that the marriage before 18 years is higher in the poorest areas in Palestine in order to reduce and alleviate the financial burden on the family. This was explained in the two previous studies. Violence against women with all its forms increases with the low standard of living as expressed by a study titled, “Early Marriage and Reproduction in Two Egyptian Villages near Cairo” conducted by the Population Council/UNFPA Occasional Paper in 1994. It indicated that in early marriage, 44% of girls were married before the age of sixteen and 68% of them were married before the age of eighteen.

In another study done by (Mortagy et al 2005) found that in Egypt there were marriages called “summer marriages” since girls to poor families were married to gulf expatriates and Arab rich tourists in Egypt in return for high dowry and eventually end in divorce, from this finding its clear that those families financial situations as poor families made them encouraged to force their daughters to such early marriage for money gaining, which automatically made the marriage not the female own decision that led to divorce. As a result, those girls will look for love and stability in their lives, which can be by outside marriage relations that unpredictably caused pregnancies.

El-Masri (2000) conducted the first qualitative study on sexual abuse, in form of life stories. He studied the stories of 20 women who suffered from different forms of sexual violence perpetrated by different family members- father, brother, cousins, and uncles”. The aim of the study was to construct a deep understanding of the economic and socio-cultural context under which the assaulted and violated women had lived including the patriarchal system, social and legal systems. The research concluded that there was a strong connection between poverty and the low standard of living, sexual violence against women and husbands violence against their wives.

A study that done by Nalenga (2012) aimed at identifying the causes of unintended pregnancy among adolescent girls in Addis Ababa, Ethiopia, found a link between poverty and unintended pregnancy. It also showed that socio-economic factors and lack of reproductive health services are contributing to the increase of unintended pregnancy among adolescents in Ethiopia, such as economic status, education, religion, place of residence, peers and partners’ behaviors, family and community attitudes, gender and age, and mass media, as well as a lack of access to contraceptive methods and reproductive health education. As reported in the study, 4 out of 10 adolescents had sex because of lack of money or sex exchange for gifts, while 2 out of 10 did it for love, affection for partner and curiosity (Nalenga, 2012).

2.5.5 Political situations in Palestine and women statuses

Kevorkian (2010), explored Palestinian women militarization. She stated that “The militarization of the Palestinian space is a widely-used tactic of the Israeli military, and is reflected in the hundreds of military checkpoints, the attacks on Palestinian educational institutions and house demolitions. For example, since 1999, the Israeli military has destroyed more than 5,200 Palestinian homes, rendering 25,719 Palestinian women, men

and children homeless. It has been a powerful method of imposing Israeli spatial dominance and creating constant chaos that feeds into the spiral manner in which militarized violence functions in the everyday life of Palestinians.” Violence silencing violence against women in militarized societies and conflict areas became an integral part of the national security doctrine, One pioneering study that examined the crime of femicide, showed among other things the importance of acknowledging the effect of the Intifada on violence against women as important as other factors in the Palestinian state building period (Law and Society Review, 2003). Legal, health, religious and welfare systems reacted to inflict abuse against young girls and women during the first and second Intifada while Kevorkian (2004) in her paper examined the imposition of virginity testing from a critical racial and gender perspective. She found the continued search, examination and gathering of data about the virginity of the girls by forensic medicine a means to justify abuse and violence against them. Also, she conducted a study that is based on voice therapy with women while coping with political imprisonment; she found that the effect of the militarized society was not limited to the narrow political victimization, but was reflected in the way health and legal personnel dealt with cases of sexual abuses. This was also clear in her other study titled, “Imposition of Virginity testing: A Life Saver or a License to Kill”.

In Palestine and in the presence of the Israeli occupation it, cannot be denied the obvious impact of occupation on the Palestinians women status, which has been discussing in a national study done by Sawa, (2008) in cooperation with United Nations Development Fund for Women (UNIFEM) about Palestinian women trafficking and prostitutions in Occupied Palestinian Territory (OPT). Despite the difficulties and gap in literature related to such sensitive topics, and the nature of Palestinian social context that worked as barriers to go in depth toward such phenomena, eleven face to face interviews with policemen, lawyers and taxi drivers provided valued rich results. One of the major causes of women trafficking and prostitutions, was the Palestinian political situations and the presence of the check points that can prevent the families of the girls (those who worked as prostitute inside Israel) from reaching their daughters, which facilitated those victims involvement in the absence of their families. On the other hand women's characteristics were explored by Sawa, it was clear that most of them came from violated families especially the father and the husbands and they were battered continuously and forced into marriage. Their educational level were universities and school students. When the researcher exposed the

their socioeconomic factors, it was showed that the majority of women engaged in prostitution did it by their own “will” in comparison to a minority who are forced into it due to their dire economical situation and the need for financial resources. On the contrast of what was suspected, also the women lack of power and sexually exploitative was discussed as they experienced sexually exploitative relationships by a member of their family or during their marriage. It is this vulnerability and lack of power which render them the targets of sexual exploitation. Sawa research connected the nature of the political situation in OPT that aggravated the Palestinian women trafficking and the shortage of the community services and stigmatization of such topics. The lights were focused on the regional shortage of the needed shelter homes for those women's, one case was studied in the previous research to raise very important data related to the current study; by show that abundant was the work owner reaction; if one of the victims became pregnant. It was stated by the researcher that:" It should be noted that the lack of internationally recognized borders between Israel and OPT as well as the lack of control of the occupied country over the borders arbitrarily defined, the absence of a Palestinian State and the fragmentation of the territorial unity among the West Bank, Gaza Strip and East Jerusalem have all led to weakly and ineffectively combating trafficking of women. The two authorities do not communicate or regulate policies or strategies among each other to combat trafficking and sexual exploitation of women."(Sawa, 2008).

2.5.6 Gender inequality as cause of pregnancy outside of marriage

In a paper conducted by Harner (2011) to review the current state of the science regarding sexual violence occurring in adolescent dating and acquaintance relationships published by National Resource Center on Domestic Violence, it was found that the causes and consequences might be due to the imbalance between the balance of powers between males and females as well as lack of money. Even more, physical strength may expose younger females who are considered not equal to adult males to the risk of experiencing unplanned and unprotected sex, unwanted pregnancy, and exposure to sexually transmitted infections, including HIV and AIDS, (Harner, 2011).

Unintended pregnancy among adolescents study was conducted by Nalenga (2012) in Ethiopia The study found that the harmful traditional practices were contributing to unintended pregnancy; Half of interviewees were victims of Female Genital Cutting (FGC), 3 out of 10 girls were suffered an early marriage before the legal age of 18, and 1

out 10 was victim of sexual abuse or child labor. The study results also provide that contextual factors are important in shaping women's risks of physical and sexual violence. It is clear that the financial situation has the largest impact on women exposure to sexual relationships even if they were in the form of an assault.

In a recent longitudinal study in 2014 on, "Risk factors for unplanned and unwanted teenage pregnancies occurring over two years of follow-up among a cohort of young south African women", (Christofides et al 2014) investigated the relationship between gender inequality and gender-based violence and subsequent unplanned and unwanted pregnancies among the cohort. Also the range of risk and protective factors for incident unwanted and unplanned pregnancies occurring over 2 years of follow-up among a cohort of adolescent women in the Eastern Cape were targeted. The results of this study indicate that physical violence is one of the causes of unwanted pregnancy among adolescents while it was found that the good socioeconomic situation might reduce the risks of such pregnancy. It was also found that 174 pregnancies occurred over the 2-year follow-up period. Beliefs about relationship control were not associated with unwanted and unplanned pregnancies, nor were the experiences of forced first sex or coerced sex under the age of 15. Also in this study some of the measures of gender inequity were not associated with unplanned and unwanted pregnancies; there was evidence of the role of both gender power and socioeconomic status. This was evident in teenage girls who experienced physical violence and were more likely to have an unwanted pregnancy. This led them to come out with recommendations that the interventions to prevent teenage pregnancies needed to be tailored by socioeconomic status because some teenagers may see having a pregnancy as a way to have a more secure future. Studies also set a link between poverty and socio-economic marginalization and early and unintended pregnancy.

2.6 The consequences of pregnancy outside of marriage

2.6.1 Physiological effects

The pregnancy outside of marriage effects on the physical and psychological health. World report on violence and health in 2002 showed that in India, gynecological complications have been consistently found to be related to forced sex, which included vaginal bleeding or infection, fibroids, decreased sexual desire, genital irritation, pain during intercourse, chronic pelvic pain and urinary tract infections,(WHO, 2002).

Pregnancy is considered a big consumption of the women health, and it can lead women to very sensitive and real health problems. Pregnancies after sexual violence like rape or /and incest will be completely different if these women can pay their life for this serious experience that can complicates their lives during pregnancy and even may compromise their health. It was reported in (WHO, United Nations Children's Fund, United Nations Population Fund "UNFPA", & World Bank, 2012) that; Over 300 million women worldwide suffer from complication of pregnancy and delivery, of which obstetric fistula is one of the most severe forms of this pregnancy related outcome in women, on the other hand anemia has been mentioned as one of the major health problems common in pregnancy, where it is associated with negative birth outcomes (WHO, 2013).

The experiences and Perceptions of Pregnant Unmarried Adolescent Girls in Nigeria were studied in recent study by Asonye (2014) to have clear understanding of the contributing factors with this phenomena. This study aimed to develop an in-depth understanding of the perceptions and experiences of adolescents experiences toward their pregnancies which came without marriage. The finding show that ; there were negative reactions, negative community and family reactions, physiological challenges, lack of support from both family and community, and a need for serious health care.

(Banerjrr.,et al 2009) studied the early sexual activity among adolescents in Nigeria, and especially those who were unmarried. The pregnancies that came as a result of this sexual activity were also studied, because it can result in a variety of negative health, social, and emotional outcomes for mothers and their infants.

In WHO multi-country study the reports focused on violence against women especially sexual violence which might lead to unwanted pregnancy and result in critical health conditions such as abortion which is the incomplection of pregnancy period. As well as decrease entry into prenatal care, stillbirth, and premature labor and birth. In the same report the fetus complications were summarized as; fetal injury and/or low-birth-weight or small-for-gestational-age infants (WHO, 2012).

Based on Kevorkian study in 2000, femicide is generally understood to involve intentional murder of women or girls because they are women, but broader definitions include any killing of women or girls and it is always perpetrated by men despite the fact that sometimes female family members may be involved (WHO, 2012). Kevorkian study was based on an analysis of 69 cases that served between June 1,1997 and November 1,1999;

she found that nearly one-fifth (19.7%) of the clients who were included in the study were defined as “femicide” threats due to illegitimate pregnancies and deliveries, and 13.6% were due to rape and incest.

Many studies were done by WHO; the last report version in (2016) gave an account of all health impacts teenagers suffered from regardless of the fact that pregnancy was the result of marriage or outside of marriage. The consequences as mentioned by the sources were as follows:

Unintended pregnancy poses hardships for families and jeopardizes the health of millions of women and children (Casterline et al, 2003) It is, thus, an important social and public health concern. It increases the risk of abortion-related morbidity and mortality, (Glasier, 2006), The results of unintended pregnancy, from which 80000 women die each year and over 95% of these deaths occur in developing countries as mentioned by (Karim, 2009) Researchers also argue that unplanned pregnancy leads to adverse mental health consequences such as post partum depression (Reardon et al., 2002). Russo et al. (2001) has added the adverse impacts of pregnancy outside of marriage on antenatal care, breastfeeding and infant mortality.

UNFPA report discussed the health consequences on a girl less than 18 years old. It was evident that the bodies of those girls were not ready for pregnancy and birth, so they would end up having malnutrition. This matter was viewed as the second major cause of death of girls, as health problems are even more likely if a girl becomes pregnant too soon after reaching puberty. The risk of maternal death for girls under age 15 in low- and middle-income countries is higher than that for women in their twenties. These girls also face risks such as obstetric fistula. (Tens of thousands of adolescents die annually of causes related to pregnancy and childbirth. In fact, these are the second leading cause of death among adolescent girls, aged 15-19, globally), (UNFPA, 2015).

A qualitative study that was conducted by Kaye in 2006, about gender scripts and unwanted pregnancy among Kenyan women aimed to investigate characterizations of unwanted pregnancy among a sample of urban Kenyan women. The study found that unwanted pregnancy was a key risk factor for mortality and morbidity associated with unsafe induced abortion. In his study, Kaye found that the mother’s reaction to pregnancy was affected by the cultural norms like feeling shame due to the stigmatization of pregnancy, so they tried to get rid from their pregnancies by unsafe abortion that increase the mortality and morbidity rate among those women. Another result raised in the previous

study showed that unwanted pregnancy could affect the woman's readiness for mothering and child care. In the study the effect of unwanted pregnancy on the mother was raised, whether this pregnancy was with or without marriage, but the causes of such pregnancies were not explored. Adolescents aged 10-19 years account for 11% of all births worldwide; they account for 23% of the overall burden of disease (disability-adjusted life) due to pregnancy and childbirth Atuyambe., et al (2008). It is important to indicate that a significant percentage of pregnancies under 18 years of age in the world literature were pregnancies outside of marriage. Thus, teenage pregnancy consequences were considered as an health indicator in such place, Atuyambe., et al (2008) stated that maternal health services have a potentially critical role in the improvement of reproductive health.

Fourteen percent of all unsafe abortions in low- and middle-income countries are among women aged 15–19 years. About 2.5 million adolescents have unsafe abortions every year, and adolescents are more seriously affected by complications than are older women.(WHO, 2016).In Latin America, the risk of maternal death is four times higher among adolescents younger than 16 years than among women in their twenties (WHO, 2016). Many health problems are particularly associated with negative outcomes of pregnancy during adolescence. These include anemia, malaria, HIV and other sexually transmitted infections, postpartum hemorrhage and mental disorders, such as depression. Up to 65% of women with obstetric fistula develop this as adolescents, with dire consequences for their lives, physically and socially. Moreover it reported that the adolescents have to leave school, so this will have big effects on them as individuals, their families and communities (WHO, 2016).

UNFPA report on “Adolescent pregnancy: a review of evidence” by Loaiza and Liang (2013) described the costs and consequences of pregnancy before age 18. The first and foremost threat to girls and a breach of their fundamental human rights to education, health, life opportunities, and, indeed, to life itself, was this pregnancy under 18 years of age. More than 75 million girls are at risk over the next decade, so it is high time to end adolescent girl pregnancy. This report reveals that globally, the prevalence of pregnancy among girls before age 18 has not altered much from the recent past; however, social and health consequences included increased risk of maternal death, excessive bleeding, obstructed labor, anemia and birth related problems and still birth infants. (UNFPA, 2013).

2.6.2 psycho-social effects of pregnancy outside of marriage

A study that was conducted by Mu ugeta et al. (1998) addressed the consequences of pregnancy following rape the most important of which is victims self blame. Moreover, the consequences of pregnancy were found as follows 35% of the victims blamed themselves, 31% felt very anxious after the rape and 6% attempted suicide.

One of the studies which were reviewed was “Victim-offender relationship and sexual assault” by Ullman et al., (1993). It investigated the resulting psychological effects on girls in a random community survey. According to the victim-offender relationship few differences were found in sexual assault experiences whether the perpetrator was from inside or outside the family. Analysis of psychological symptom measures showed that sexual distress was more common among women attacked by intimates, fear/anxiety was more common among women assaulted by strangers. Depression did not vary according to the victim-offender relationship it's found that depression was the inevitable result in both cases especially if it resulted in pregnancy following this assault.

In study published in Chicago and conducted in 2015 by Giurgescu., et al,(2015) about Post pregnancy psychological symptoms and their relationship with support from the neighboring environment and their acceptance of the pregnancy. The results of the study found that lower neighborhood quality was associated with higher prevalence of depressive symptoms during pregnancy. The study on “ a prospective design” which was conducted in Chicago, by Giurgescu., et al, (2015) found that African-American women from a medical center in Chicago who enrolled in the study between 2009 and 2011, 30% of African-American women participants had a high percentage of depression symptoms due to the low social support. Moreover, the women who had a negative perspective about pregnancy were more vulnerable to depression symptoms. All this was discussed in the case of pregnancy within marriage. Perhaps pregnancy outside of marriage is the one that needs the support of the surrounding environment and approval in the mentality of the Palestinian society in particular so that the pregnant women will not suffer from these psychological consequences resulting from the mother’s acceptance of her pregnancy within a society that has already rejected it.

2.6.3 Disclosing versus silencing in the Palestinian context

Socio cultural determinants, such as the need to silence the occurrence of the rape, preserve female virginity, and privatize the crime in order to safeguard family honor and reputation revictimize and weaken the victim (Kevorkian, 1999). It is evident that pregnancy outside marriage has several social impacts on the victim and her family, so the solution to such problems would be full silence just to protect the reputation of the girl and her family (Kevorkian, 1999).

Social workers say that few of them reported that to the official authorities because they reached a solution between the two families and sometimes this solution is by marriage. (Interview with Human Rights with Area head Hebron and Bethlehem Nashat Ayouch conducted on May 15,2006). Palestinian women are routinely silenced and their unique form of agency is ignored by the outside world. Viewed through the lens of Western hegemonic practices, Palestinian women are considered as lacking all agency. However, in a similar manner, violence against women in the Palestinian context is often conflated with culture rather than with isolated incidents or with an examination of the mechanisms of the occupation, (Kevorkian, 2009).

In another case study, about the politics of disclosing female sexual abuse by Kevorkian, (1999) explored the socio-cultural context and the issue of sexual abuse and pregnancy in some cases. By contextual analysis of the data, it was revealed that acknowledgment of sexual abuse took place only in situations where the abuse was extremely traumatic, publically apparent, and the victim was absolved of blame. Disclosure resulted in approximately 10% of the cases in the killing of the victim. Responses involving measures such as hymen reconstruction, marriage to the rapist, and abortion were used by family and society to “nullify” sexual abuse. The intricacies bearing on the decision to disclose or not to disclose sexual abuse were discussed within a socio-cultural and political frame of reference.

2.6.4 Honor killing In Palestine and the region: one of the social consequences which lead to victim’s death

Maternal death is recorded as a direct or indirect cause of pregnancy and up to 42 days after she has given birth. Maternal deaths are normally rare events. Even in countries with well developed resources, it is remarkably difficult to collect death related data and there is not an agreed upon method that is the perfect way (WHO, 2006). This is due to multiple

reasons where large numbers of women die outside of institutional care which is not always beneficial. Therefore a woman's death in Palestinian society can be underestimated especially if it has to be hidden due to honor issues among the Palestinian families.

In Palestine there are several pictures of crimes in human societies, but honor crimes, which are the families reaction to sexual violence and/or pregnancy outside of marriage include the defense of honor particularly in motivation regarding inherited customs and traditions; the extent of penetration of the culture into the community increases the number of these killings in the Palestinian society, bearing in mind that honor crime represents a form of violence against women.

On another level and with some more details, Al Jareeri and Shadid (2006) counted a total of 12 teenage girls and women who were killed in the name of honor in the period between February 2005 and August 2006. In addition, there were 5 other domestic violence killings in the West Bank alone for the same period. The means of killing the women/girls by husbands, sexual intimates, and the blood relate like fathers, brothers, uncles and cousins, to protect family honor when they considered that the female killing in the name of "family/male honor" as a punishment for girls or women who attempted any act that violate the norms and traditions that applied by the society and families context like for example having sexual relation outside of marriage, losing virginity and/or being pregnant outside of marriage. For the same causes as protection of family honor Al Muntada (2010) coalition reported, 11 cases of femicide were documented under the pretext of family honor in 2009; they included 7 in the West Bank and 4 in Gaza Strip, while the Independent Commission for Human rights (ICHR) also documented 9 cases of femicide in West Bank and 4 in Gaza Strip in 2009. In 2010, ICHR documented 9 women who were killed under the pretext of family honor (NGO, forum to combat violence against women, Al Muntada Coalition, Annual report, 2010)".

Another recent report by Women's Centre for Legal Aid and Counseling Annual Report (WCLAC, 2013), stated that "In 2013, WCLAC documented 27 cases of femicide in Palestine; for the same causes (family honor) by considering the women did a shameful act that the issue has now reached a point of contention due to cultural and legal considerations"

In 2012, Alkhatib studied, the contributing factors to the occurrence of honor killing and the emotional, psychological and social effects of honor killings on the victim's family members. Alkhatib explored the psychological effects of what they call honor killing on the families of the victims; extensive explorations of the nature of Palestinian culture and

norms were integrated by Alkhatib as the results showed that honor killing resulted from a combination of several complex and inter-related factors, including the institutionalized patriarchy within the society, the culture, and the family. The honor code functions as an instrument to control female sexuality, political instability, institutional shortcomings, poverty, low educational level, and the inaction of religious and political leaders. The study revealed that, contrary to the expectations of perpetrators, killing female relatives for 'honor' generally did not achieve the goal of restoring family 'honor'. Close examination of the family members' lives and views revealed that their social standing and their family honor did not improve subsequent to the murder; conversely, HK weakened the families' reputation, isolated them from their close-knit communities and compounded their social marginalization, rejection, and stigmatization (Alkhatib, 2012).

In another study held in 2005 under the sponsorship of Amnesty International titled, "Women bear the blame" stated that the phenomenon of women killing might sometimes be the last stage of a long pattern of violence. They were killed following a long series of family abuse. The moment suspicions were raised around the daughter or sister which were viewed as bad and harmful for the family reputation even if they were not true, they would be sufficient reasons for killing the woman. Moreover, girls were killed by the mere fact the family breadwinner discovered that they were raped even if the rapist was a member of the family.(Amnesty International, 2005).

Regionally and as mentioned in the report, "Jordan Honor Killing of Women" Halaby (2000) gathered an analysis of multi reports done by " National Jordanian Campaign to eliminate the so called "Crimes of Honor "," Jordanian Parliament Supports Impunity For Honor Killings", Human Rights Watch Honors, Jordanians Oppose "Honor Killings" and " National Jordanian Campaign Committee to Eliminate Crimes of Honor (Jordan) by Abu Ayyash; the aim of this report was to collect thousands of signatures to emphasize the desire of a large percentage of voters to cancel Article 340 of the Jordanian Penal Code and to work extensively with all means available to abolish this inhuman practice. They found that rape was widespread among poorer, less educated, tribal societies with a tradition of self administered justice, such as Jordan's and underdeveloped countries in the Middle East, North Africa, Central Asia and South America, (Halaby, 2000).

2.6.5 Palestinian Legislation and community reactions toward pregnancy outside of marriage and what is called honor killing

Some have recently heard so many stories about women killings. Unfortunately, most of the talking on the streets blamed the killed women for assuming that she must have committed something wrong; this is what is being passed by word-of-mouth. There is no separation between a femicide without hearing rumors about the honor of that girl since the Palestinian society as the rest of other eastern societies under the pretext of honor would kill women.

In the West Bank and Gaza there are no laws which protect women from being murdered and prosecuted as reported in Europe & Middle East News by (Salam, 2012); it was added that the Egyptian laws which were implemented in Gaza and the Jordanian Laws implemented in the West Bank discriminated between men and women, and protected the murderers of women. "Honor" has become a justification for murdering women and protecting the murderers as well keeping the power in the hand of the men who lead the society, and impeding women from reaching power. This is a clear threat for all women who seek equality in their rights with men. (Salam, 2012).

Its reported in United Nations Development Program (UNDP, 2011) that related to the factor of the prevailing patriarchal culture in Palestine, the woman might be beaten, humiliated and exposed to all types of violence for causes seen by her male family members as obscene; this might be due to different cultural and intellectual causes; a woman might be abused and this might reach physical abuse or even death for being on a date with somebody outside home, going to a male gynecologist or leaving home without prior permission of husband or father. Undoubtedly, in a society where a woman is abused for the previous simple reasons, she might be killed in this same culture if she engages in a sexual relationship outside of marriage. What makes it more unacceptable is that this woman might be killed by the same perpetrator who might be a family member. All these incidents and scenarios which are in violation of human rights first and women rights in particular are incidents that would not have happened if there were legislations and laws that would stop them from happening and deter the perpetrators. In fact these legislations reward the perpetrator by letting him marry his victim without paying attention to her feelings and emotions toward him. It is worth noting that the absence of sufficient punitive action against those men whether they were the sexual assailant or killer of this girl has greatly contributed to the spread of this phenomenon.(UNDP, 2011).

According to the Europe and Middle East News by Salam (2012) article on victims of incest and abuse in Palestine, the local media have never exposed these crimes and the problems caused by the hidden epidemic of incest (Salam,2012). This issue is always forbidden and censored by the criminals. Even the police, in the few cases which reach them, tell the murderers that they did “a great thing, something honorable” (Salam,2012). The laws in force in Occupied Palestinian Territories do not give women sufficient protection from gender-based violence. Salam added that the laws were extremely broad, subject to varying degrees of interpretation by legal institutions and law enforcement officials, and are seldom enforced or institutionalized. Two sets of laws, broadly speaking, address issues of violence:

- Article 340 of the Jordanian Penal Code, enforced in the West Bank as Law #16 of 1960, grants sex exemption from prosecution or reduced penalties for husbands or male blood relatives who kill or assault their wives or female relatives on the grounds of what they claim is “family honor”.
- Article 308 of the Jordanian Penal Code allows legal proceedings to be dropped against a rapist who marries his victim.
- Articles 285 and 286 of the Jordanian Penal Code stipulate that if a girl wants to file a complaint for violence or abuse, the complaint must be filed by a male relative.(Amnesty International, Conflict, Occupation, and Patriarchy).

Similar types of Egyptian laws are enforced within Gaza. In addition to the Jordanian Penal Code and Egyptian laws, the Palestinian Criminal Law, passed by the Legislative Council in 2003, has no provisions to protect women from gender-based violence. In the same way that the Jordanian Penal Code allows for a range of exemptions, the Palestinian Criminal Law allows perpetrators of violence to use a variety of excuses to avoid prosecution.

“Palestinian society has traditions and customs and the judge is a member of the society. The honor cases are considered as criminal cases and the sentences depend on the sentiments of the judge,” said Sharqawi, the human-rights lawyer, (UN, 1995). “The judge's background is part of this society and it normally affects his decision. But the judge must implement the law, which is also under the control of the court.” Sharqawi said that the addition of Jordan's first female judge, her name (Hikmat, 2003) will affect the sentences in these issues. “She is also a human-rights activist who works for the defense of the women's rights,” he said. “Our society needs rehabilitation in this issue and the civil institutions have a lot to do.”

2.7 Summary

The review provided that sexual topics are considered taboo and sensitive topics; therefore, very limited studies were conducted about sexual abuse and few of the studies addressed the experiences of women with pregnancy outside of marriage in the Palestinian society. The review also showed that many studies broadly addressed violence against women with little emphasis on pregnancy outside of marriage. Most of these studies are quantitative with limited samples. Therefore, this study will add to the body of the literature as it does not only address the causes of pregnancy outside of marriage but also its effects on women' physical, emotional and social well-being.

Chapter III

Conceptual Framework

3.1. Introduction

In reviewing the literature on sexual violence against women, there are a number of approaches and theories that have been used to explain the social structure, cultural traditions and personal behaviors that lead to abuse and violence (Campbell et al., 1993). Numerous researchers have also put forward various theories and frameworks that have been used to explain violence in general. In order to provide a better understanding of abused women experiences, perceptions, and behaviors based on a more inclusive contextual framework, Bronfenbrenners ecological theory was adopted for the present research.

Bronfenbrenner (1979) ecological approach is suitable, since it attempts to understand people not only as individuals removed from the context in which they find themselves, but instead as individual interacting into their own environment (Perilla, et al., 1999). Based on the literature review, research questions, and findings from previous studies, the conceptual framework for the present research adopted the ecological approach to help provide a more comprehensive understanding of the experiences of sexual violence that lead to pregnancy outside of marriage among Palestinian women, and those of the victims, their families and that of the societal perception of pregnancy outside of marriage; this may influence their help-seeking of the available services in the Palestinian community.

3.2. Ecological model

Bronfenbrenner (1979) developed the ecological systems theory to explore the relationship between an individual and the environmental contextual factors in order to understand human development. The ecological model consists of four nested systems: Microsystems, Mesosystems, Exosystems and Macrosystems. (Belsky,1980); these systems helped in explaining women abuse and neglect. Since then, the model has been applied by various theorists and has been conceptualized in numerous ways (Heise et al, 1998). It has also been widely applied as an analytic framework in a considerable number of violence research, such as intimate partner violence.

The World Health Organization (WHO) has also adopted this framework as a public health approach to understand the risk factors of violence, and to develop preventive measures to this effect (WHO, 2004). Locally, Al-Rafai adopted the ecological model in her study

(Sexual Violence Against Female Teenagers in the West Bank: From a Gender Perspective, 2006), and Heise (1998) also adapted the ecological model for her study of intimate partner violence. The four levels in the adapted version of the ecological model as described by Heise (1998) are briefly explained below. As in Bronfenbrenner's (1979) ecological model, the first level is the individual level which corresponds with the Microsystem in Bronfenbrenner's (1979), and it includes factors, such as personal characteristics of the individual as well as their perceptions, and beliefs. The second level is family/relationship level, or the Mesosystem (Bronfenbrenner, 1979); it examines the social relationships among families, partners and friends. The third level is represented by community/social structures which is similar to the Exosystem in Bronfenbrenner's (1979), and it encompasses both formal and informal social structures, such as social networks. The fourth level is the societal level, or the Macrosystem (Bronfenbrenner et al., 1979); it refers to the availability of social support, and the larger society, including legal and policy frameworks (Carlson et al., 1984; Heise et al., 1998; Levinson et al., 1989 and WHO, 2004). The ecological framework thus illustrates the various factors at the different levels and attempts to link sexual violence to the broader social environment (Depanfilis, et al., 1998). The basic assumption driving this model is that "the ecological perspective implies reciprocal causation between the individual and the environment" (McLeroy et al., p. 354). This shows that each of these levels individually affect behavior, as well as interact with each other to affect health behavior (McLeroy et al., 1988). While discussing the result of this study, the ecological system thinking was applied in order to provide a conceptualization of the problem by identifying influential factors at multiple levels and discussing their interactions. Figure 1 provides a diagrammed representation of this model. Figure (3.1) show Ecological model adopted from Heise (1999)

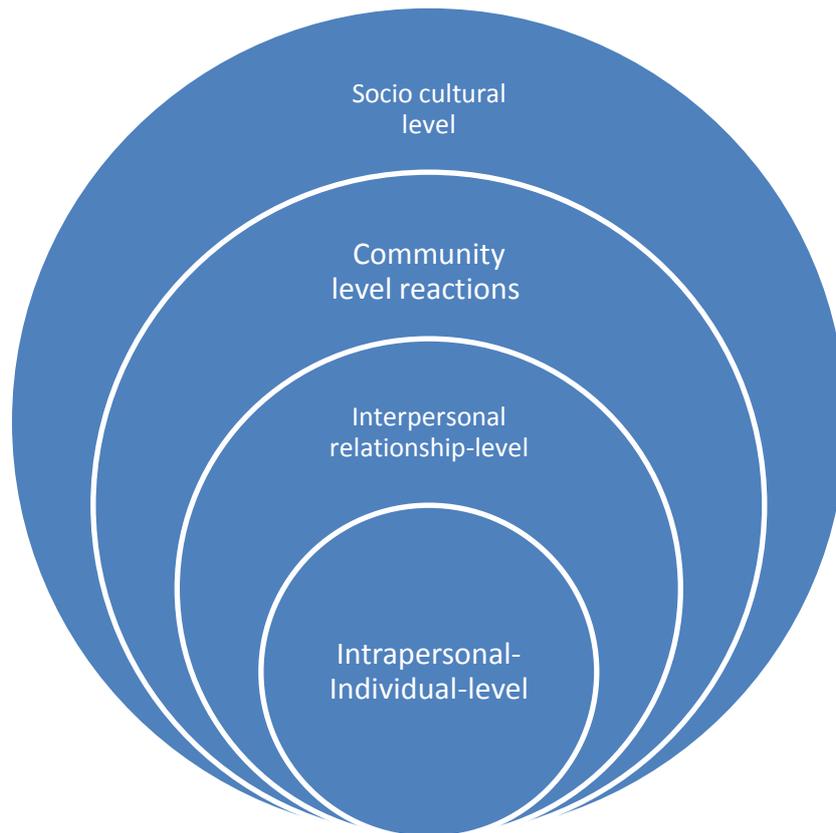


Figure (3.1) Ecological model adopted from Heise (1999)

3.3. Adopting the ecological framework for the present research

In an effort to provide a more comprehensive understanding of the experiences of sexual violence and pregnancy outside of marriage among Palestinian women, the researcher utilized the ecological model to join the interrelated factors involved in Palestinian women sexual relation outside of marriage that led to pregnancy outside of marriage, as well as their perceptions and the consequences of such experience. These were organized into the four nested levels of the ecological model. It is worth noting that although some of the variables that apply to each level will be indicated separately in the model, many of them invariably overlapped and interacted with each other.

Using the ecological model as a guide, the researcher clarified how factors at one level influenced factors at another level in order to better understand the causes of pregnancy outside of marriage. With the dearth of information on the pregnancy outside of marriage situation in the Palestinian community, using such model offers a framework for understanding the complex interplay of all factors affecting the occurrence of pregnancy and provides a more thorough and comprehensive understanding of the emotional and social effects of the pregnancy outside of marriage than that of what is known at present.

3.4 Intrapersonal-Individual-level:

Influences were intrapersonal and included personal history and factors that increased the likelihood that an individual would become a victim of sexual violence, sexual relations outside of marriage, and/or rape that lead to pregnancy outside of marriage. It focused on the nature of life that those women lived that increased their tendency to be pregnant outside of marriage. This study also focused on the personal and demographic characteristics of the individuals (pregnant women outside of marriage). Demographic factors included the educational level of the woman, and socioeconomic level status. etc. Other involved individual factors included emotional factors, early marriage and forced marriage and high sex drive and personal history. On the other hand, the victims' reaction was studied in this level, by studying the physical (health status) and psychosocial reactions of those women toward pregnancy outside of marriage. In the present study, the ecological model was adapted from Bronfenbrenner's in order to explore women's reactions toward pregnancy outside of marriage.

3.5 Interpersonal relationship-level:

Influences are factors that increase the risk of pregnancy outside of marriage because of relationships with peers, husbands and family members. In this study, the researcher focused on factors such as family structure and family interactions including an examination of the dynamics between family members and relationships inside the home. For example, it examined disrupted family relations like the victims relations with their mothers and sisters; it also examined the nature of the victims' lives to find out whether in their parents' home, they experienced sexual harassment and rape due to losing boundaries inside the family.

Also, the quality of spousal relationships, if participants were married, the couples relations, physical abuse, polygamy and disappointed with the life as well as any physical problem of the husband that affects his sexual ability came in the same level.

Finally, friends, family members and husbands effects on womens experiences were studied. In this level, the reactions of families, husbands, and perpetrators were studied.

3.6 Community level reactions

It refers to the community contexts in which exist community services like health centers “hospitals”, psychosocial supports for those women, shelter homes, and police stations available in the Palestinian community.

In this study, the community level was studied to assess the quality of care and services the victims with pregnancy outside of marriage received from the community institutions. It assessed the availability of supportive community services to enable many pregnant women outside of marriage and/or sexually abused women to know where they can turn to when they are faced with pregnancy outside of marriage and the complicated psychosocial and physical consequences. The ecological model provided the researcher with an organizing framework from which it would explore the relationships among various factors of interest from different systems in the community level of pregnant women outside of marriage and the services that those victims still need.

3.7 Socio cultural level

Norms, social beliefs and economic systems within the Palestinian society are considered the social factors that influence pregnancy outside of marriage; therefore, this model was adopted to help in the understanding of their complex interplay in influencing pregnancy and its consequences.

In this level, it was crucial to focus on Palestinian societal norms, cultural and traditional ideals in the Palestinian context, such as maintaining family honor (Al shraf) and the notion of shame; these may also have important implications on how women respond to pregnancy outside of marriage and on their help-seeking processes. At this level, it was also important to focus on women access to power and resources. This study focused on examining the availability of formal support such as social support for women with pregnancy outside of marriage, social norms and the nature of Palestinian social context that are placed to intervene in pregnancy outside of marriage and thus affect Palestinian women lives directly or indirectly.

At the core of the approach, there was a strong emphasis on the multiple and dynamic interactions among risk factors within and between its different levels. For example, structural inequalities between women and men which are related to the Patriarchal Palestinian society, social constructions of masculinity and gender norms are risk factors for sexual violence or/and rape that cause pregnancy outside of marriage among

Palestinian women that would primarily be situated at the societal level of the model. The previous risk factors, which were related to the nature of the Palestinian context, affect the reactions of the individual, family, friends, and the support women received after experiencing of pregnancy outside of marriage, based on the image of those victims among the Palestinian society.

3.8 Definitions of Terms

Health:

Health is a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity,(WHO, 1946-2003).

Sexual health:

It is defined as a state of physical, emotional, mental and social well-being in relation to sexuality and it is not merely the absence of disease, dysfunction or infirmity (WHO, 2002).

Incest:

The crime of sexual relations or marriage taking place between a male and female who are so closely linked by blood or affinity that such activity is prohibited by law (WHO, 2011).

Pregnancy:

It is defined by Department of Health and Human Services, (2013) as “The term used to describe the period in which a woman carries a fetus inside of her, in the most cases, the fetus grows in the uterus. Pregnancy usually lasts 40 weeks, or just the last menstrual over 9 months, as measured from the last menstrual period to childbirth. Pregnancy is divided into three trimesters”.

Reproductive Health:

The world Health Organization defines reproductive health the processes, functions and system at all stages of life. Reproductive health, therefore, implies that people are able to have a responsible, satisfying and safe sex life and that they have the capability to reproduce and the freedom to decide if, when and how often to do so, (WHO, 2016).

Poverty:

It is defined by the United Nations (UN) as the state of one who lacks a certain amount of material possessions or money. Absolute poverty or destitution refers to the deprivation of basic human needs, which commonly includes food, water, sanitation, clothing, shelter, health care and education. Relative poverty is defined contextually as economic inequality in the location or society in which people live (UN,2011).

The poverty line by national standards for Palestine, as set by PCBS in 2011, is 2,293 NIS (\$637) per month for a family of two adults and three children. This line is based on the average consumption of essential food, clothing, housing, housekeeping and personal supplies, health care, education, and transportation.(PCBS, 2011).

Physical abuse:

It includes slapping, beating, arm twisting, stabbing, strangling, burning, choking, kicking, threats with an object or weapon, and murder. It also includes traditional practices harmful to women such as female genital mutilation and wife inheritance (the practice of passing a widow, and her property, to her dead husband's brother),(UNICEF, 2012).

Psychological abuse:

It includes behavior that is intended to intimidate and persecute, and it takes the form of threats of abandonment or abuse, confinement to the home, surveillance, threats to take away custody of the children, destruction of objects, isolation, verbal aggression and constant humiliation (WHO, 2005).

Economic abuse:

It includes acts such as the denial of funds, refusal to contribute financially, denial of food and basic needs, and controlling access to health care, employment, etc. as stated in human rights year book (Parekh, 2010).

Unsafe abortion:

Abortion is, the termination of a pregnancy, accompanied by, resulting in, or closely followed by the death of the embryo or fetus as a spontaneous expulsion of a human fetus during the first 12 weeks of gestation, compare to miscarriage. Induced abortion is a procedure to end pregnancy: stillborn birth (still birth) is the death of fetus after 5 months while it is still in uterus. Unsafe abortion is defined by the World Health Organization (WHO, 2014) as a procedure for terminating an unintended pregnancy carried out either by

persons lacking the necessary skills or in an environment that does not conform to minimal medical standards, or both.

Maternal mortality:

It is defined by WHO in health statistics and information system as “ the death of a woman while pregnant or within 42 days of termination of pregnancy, irrespective of the duration and site of the pregnancy, from any cause related to or aggravated by the pregnancy or its management but not from accidental or incidental causes”. (WHO, 2016).

Sex: It refers to the biological and physiological characteristics that define men and women.(WHO,2016)

Sexuality:

The working definition of sexuality is:“a central aspect of being human throughout life encompasses sex, gender identities and roles, sexual orientation, eroticism, pleasure, intimacy and reproduction. Sexuality is experienced and expressed in thoughts, fantasies, desires, beliefs, attitudes, values, behaviors, practices, roles and relationships. While sexuality can include all of these dimensions, not all of them are always experienced or expressed. Sexuality is influenced by the interaction of biological, psychological, social, economic, political, cultural, legal, historical, religious and spiritual factors.” (WHO, 2006)

Gender:

World Health Organization: The word gender is used to describe the characteristics, roles and responsibilities of women and men, boys and girls, which are socially constructed. Gender is related to how we are perceived and expected to think and act as women and men because of the way society is organized, not because of our biological differences (WHO, 1998).

It is how you socially exhibit your sexuality? Gender is how you are socially constructed as a man or a woman (Diamound, 2002).

Community:

It is a social group of any size whose members reside in specific locality, share government, and often have common cultural and historical heritage. It shares common characteristics or interests and perceived or perceiving itself as distinction in some respect from large society within which it exists (Sociologyencyclopedia, 2016).

Perpetrator:

A perpetrator is defined as a person who perpetrates, or commits an illegal, criminal or evil act, or at least done something pretty bad he must be found and punished to the fullest extent of law (Mathis, 2016). The word perpetrator is so often associated with crime that police officers and other criminal justice types sometimes abbreviate it (Mathis, 2016), In this research, the perpetrator as a term was used to describe that man who had sexual relation with the participant against her will and as a result she became pregnant

Chapter IV

Methodology

4.1 Introduction

This chapter describes the methodology of this study; it describes the study design, study population, study setting, sample size, eligibility criteria, sampling process and data collection. It explores the strengths and weaknesses of each and discusses the ethical considerations concerning this study.

4.2 Study design

A qualitative descriptive design was used in this study; the researcher interviewed women and/or girls with pregnancy outside of marriage who delivered or received care and protection from HFH, or /and admitted to Mehwar shelter home in order to obtain rich data. The qualitative research was also used to gather the participants' accounts for the purpose of understanding reactions of both the participants and their families. This method provided a wider understanding about pregnancy outside of marriage and its context rather than narrowly focusing on numbers. Because actions and reactions of a group of people cannot be tallied, the qualitative method was the most suitable to collect data for this research.

Pregnancy outside of marriage is a sensitive topic that is related to human sexuality and its delivery contexts is complex. It has multidimensions and involves many meanings; its social aspect is unique and varies from one culture to another; the researcher in this study decided to use the qualitative method of data collection as it is a flexible method used to study social phenomena.

When the researcher used qualitative design, there was a good opportunity to search for more in-depth understanding about research questions and explanations as, “why pregnancy outside of marriage happened” (Jenkins et al, 2004). The qualitative design is flexible and it allows researchers to obtain more information by asking follow up questions for clarification. When the topic of the research is sensitive, it can increase the reliability of responses (Ritchie & Lewis, 2003).

4.3 Study recruitment strategy

The first objective was to assess the proposed methods for locating and accessing pregnant women outside of marriage, or those who experienced pregnancy outside of marriage. It introduced the victim to the study then it allowed the researcher to gain access to the institutions. Establishing and maintaining collaboration with the professional co-workers who had access to the victims at the selected recruitment sites were crucial. These sites are one centre or shelter home that offer protection and care to the women with pregnancy outside of marriage. These centers were chosen by the researcher as the preferred recruitment site for the study as they provided access to victims of sexual violence and pregnancy outside of marriage in a safe and controlled environment.

At first, the managers of the recruited sites were informed by a letter of the purpose and significance of the study and the necessary ethical approval was obtained. Once the consent of the managers was given, a meeting was held with them one by one; the professional co-workers were briefed on the purpose of the study, the recruitment procedure, the inclusion criteria for selection of participants, and the role of the researcher in the study. This meeting was important; to ensure the cooperation of the co-professional workers in informing the researcher of any admission of cases of pregnancy outside of marriage because of the low probability of having such violated women with pregnancy inside the institution. It was also crucial to gain their approval to take part in the study due to the high sensitivity of the topic. That made the researcher in continuous contact with these institutions looking for any new women who have been admitted due to pregnancy outside of marriage.

The professional co-workers were requested to gently inform victims of the nature of the study and to ask them, without any pressure, whether they would be willing to meet the researcher. If the women responded positively, the researcher was summoned. The researcher was introduced to the participant in a private room where she explained the purpose of the study verbally and also by means of an information document. Afterwards, the pregnant woman could choose to discuss the study with the researcher for more clarifications if she agreed to take part in it.

4.4 Plan for data collection tool

To hold the semi structured interviews, the interviews guide was applied with regard to research objectives. Three lecturers from AL-Quds University in the West Bank, who have good experience in scientific research were recruited to examine and evaluate the validity of the interview questions. Some modifications were made following their comments on the subject matter of the study. Questions were read and tested for ambiguity and quality by pilot study prior commencing data collection, then all questions were approved prior to conducting interviews.

Data collection was done by semi structured interviews with pregnant women who are known as social cases in HFH, and with those who experienced pregnancy outside of marriage and are still admitted to "Mehwar" sheltering home during the period of this study whose aim is to gather information about how and why they had this experience and to let them talk openly about their feelings so as to assess their health status, and to explore the psychosocial consequences on them. The questions were open-ended and this was designed to allow for maximum flexibility. The intent for semi structured interview guide was to foster open discussion to elicit rich detail in responses. The questions were based on the main research questions that influenced the study. The interview guide includes questions that focused on grasping women's experiences of pregnancy outside of marriage, by three major questions; First, what were the causes that led to pregnancy outside of marriage? Second, what were the reactions of the woman and her family to this pregnancy, and what were the services that were offered by the community to those women? please see (annex no 3) an interview guide.

One of the study strength and in order to enrich the data, was by variability of data resources in conducting additional five interviews with the professional coworkers who were in direct contact with the participants to explore the shared characteristics of both the women and their families and their reactions to pregnancy outside of marriage; those professionals helped to explore many contributing factors of the occurrence pregnancy outside of marriage. On the other hand, they helped the researcher to identify many consequences whether physical or psychosocial of this problem, and they helped to provide an understanding of the nature and kind of services as well as the referral system of the women with pregnancy outside of marriage.

4.5 Study settings

The health care system is typically the first and sometimes the only institution with which women victims of sexual violence come into contact. Regrettably, the system is ill-equipped to be able to deal with such cases as a high level of professionalism and sensitivity are required. The current study was held at Holy Family Hospital (HFH), Bethlehem. On the other hand "Mehwar " the sheltering home for women was visited to find out the cases of violence and /or incest; the women found protection in this place through coordination with Palestinian Ministry of Social Affairs.

4.5.1 Holy Family Hospital and the Crèche (HFH):

Holy Family Hospital (HFH), Bethlehem was founded in 1882 by society of the Daughters of Charity; it is a non-governmental gynecological and obstetric hospital, which serves the towns of Bethlehem area, neighboring villages, four refugee camps, and Bedouin settlements. The hospital also acts as a referral center for a number of nearby hospitals. It is an authorized place to attend the delivery of those women and gives care and shelter for baby after delivery, and the women with pregnancy outside of marriage were referred to HFH to give birth there. The hospital has certain regulations pertaining to these women who are referred to as "social cases". The Social Affairs Ministry in the West Bank has authorized the HFH in order to protect and help these women to continue their pregnancy under safe environment until delivery. Additionally after child birth, the babies are taken away from their mothers by arrangement with the "Crèche"(French name for the internal home for the babies in the same hospital). Because of pregnancy outside of marriage, either due to rape or incest, it may lead to difficulties during and after pregnancy causing negative outcomes for both mother and child. Hence, special considerations should be taken to prevent negative outcomes such as death of mother or unsafe abortion. The goal of Holy Family Hospital (HFH) team and sisters is to provide both care and safety to these victims.

4.5.2 Mehwar Center for the protection and emancipation of women and families

The Ministry of Social Affairs (MoSA) is the main reference in OPT (Occupied Palestinian Territory) for providing physical and psychological protection to women exposed to violence. It is the main body supervising shelter services for women victims of violence and is the primary body responsible for building a national referral and follow-up system for VAW victims,(Diab,2001).The first national and multi-purpose center in the Occupied Palestinian Territory, (Mehwar) was established in Bethlehem (Beit Sahour Municipality)

in the south of West Bank and it is funded by the World Bank and the Italian government. The center was opened in 2007, and it provides empowerment and community awareness activities while offering social and psychological and legal counseling services. In addition, it is a shelter for women and their children, and it aims to protect and reintegrate women, children and those who were exposed to domestic violence.

Mehwar has guaranteed protection and empowerment services to women and children who had been exposed to domestic violence by providing temporary shelter for about 3 months on average for every family, psycho-social assistance, vocational training, legal assistance in court, educational services for children, and health care support to the integration of women in the society. From 2008-2012, Mehwar center had provided assistance to 286 women and 79 children. Moreover, the Ministry of Social Affairs provides the liaison between institutions working on the protection of women, including women institutions, the police and shelters when needed. Women cannot access shelters in the OPT without first acquiring a permit and report from MoSA (Diab, 2011).

4.5.3 Family Protection Unit (FPU)

This unit of the Palestinian Police was established in 2008 after significant increase in the number of cases of all types of abuse within the family. This unit is run by a qualified staff the majority of which are holding a high university degree in Human Sciences. They receive and deal with battered women and children as well as sexual assault cases where they take complaints and then investigate with the aggressors and take legal measures against them under full confidentiality.

The work with this unit is not only limited to referring cases to the judiciary; it also works to maintain the social relations and family bonding where there is correctional role to provide other services through network of professional relationships with partner institutions and ministries.

4.5.4 Palestinian Family Planning and Protection Association (PFPPA)

PFPPA as written in their website is a non-governmental health center; the Palestinian Family and Protection Association, established in Jerusalem in 1963, is an independent non-profit association enjoying a full membership of the International Planned Parenthood Federation (IPPF) offering family planning (F.P) services and antenatal care and various services in sexual and reproductive health where it offers training for young leaders and staff from other governmental and non-governmental organizations. Moreover, it provides

unique medical services in women health, laboratory tests, counseling, awareness raising, advocating women rights, conducting applied research and organizing lobbying and advocacy campaigns to influence national policies. The women with pregnancy outside of marriage seek help in such place where these case are expected to be present in them.

4.6 Data collection

Once the interviews were scheduled, each participant was interviewed by the researcher who explained the purpose of the study. The interviews were conducted with women or girls who are known as (social cases) in HFH, and they received care from both HFH and sheltering home (Mehwar); three participants refused to share in the study for many considerations related to their deteriorated psychological and social statues, another two cases refused to be studied by the professional co-workers related to the seriousness of their situation. Data collection phase lasted about eleven months it was started from the beginning of April 2015 till the end of February 2016, it continued until saturation of data achieved. Another five semi-structured interviews were also held with professional co-workers during March 2016.

Interviews lasted between 60-100 minutes and hand written notes were taken by the researcher. A semi-structured interview was conducted to gain good amount of detailed information that could be gathered. Additionally, semi-structured interview allowed for the clarification of questions and responses, probing, and flexibility throughout the interview (Berg, 2009). Participants felt at ease to share their experiences and they were allowed to guide the direction of the interview at a pace they are comfortable with, which provided an empowering experience for them as suggested by feminist researchers (Oakley et al, 1995). Face to face interviews are concerned about reliability of information and interviewer biases; it allowed the interviewee to tell her story in whatever form she wanted and discuss whatever events or actions she liked; audio recordings of the interviews were not done because of participants refusal due to many considerations related to Palestinian culture and the sensitivity of such experience for those women. (Gill et al, 2008).

Then the interviews were transcribed by the researcher. The next stage was transcribing the experience; it was performed through transcription of oral interviews which were fully recorded into written discourse. Individual characteristics of expression have been preserved. Then an assessment of the experience has been done; a careful initial reading of the narrative has allowed for the researcher to form a general idea of the individual

experience, while the focus of the researcher in the other readings was on the constant meanings of the narratives.

4.7 Study Population

The target population of this study included all Palestinian women pregnant outside of marriage, who have received care in HFH and delivered their babies by referral from the Social Affairs as a case of pregnancy outside of marriage and all pregnant women outside of marriage who were admitted to Mehwar in the period this study was conducted.

Moreover, the study included professional co-workers who were in direct contact with those women who experienced pregnancy outside of marriage; they work in several institutions in the West Bank such as "police station, maternity hospital, shelter home, NGO primary health care clinic, and child home" and their experience in this field exceeds 5 years.

4.8 Eligibility Criteria

4.8.1 Inclusion criteria

The participants were Palestinian pregnant women who were unmarried, or married but became pregnant from another sexual relation and not from their husbands, They have received care from Social Affairs home (Mehwar), and HFH in the West Bank and have a history of pregnancy outside of marriage.

The professional co-workers who have long experience exceeding 5 years in dealing with those women. Those coworkers gave health, legal or social care to those women with pregnancy outside of marriage.

4.8.2. Exclusion criteria

The referred pregnant married woman whose pregnancy is legal and inside marriage will be excluded, non-Palestinian pregnant women who received care from HFH will be excluded. Other cases referred to HFH or Mehwar due to virginity or due to previous experience of any kind of harassment will be excluded. The professional co-workers with short period of experience with those women who experienced pregnancy outside of marriage, and their experience was less than five years were excluded.

4.9 Sample size

A review of the literature emphasizes that data collection in qualitative research should continue until it has achieved saturation point (Guest et al, 2006), Therefore many researchers provided some criteria for estimating sample size. Moreover, in situations where time and resources are limited, 16 interviews were held, 11 purposive interviews were conducted with victims who experienced pregnancy outside of marriage; another 5 interviews were made with the professional co-workers and this provided a reasonable likelihood for saturation. Marshall (1996) and Guest (2006) based the sample size in qualitative research on answering research questions rather than on generalizability of the research results. In this research, data collection and sample size were continued until new categories and themes stopped to be emerged and reached saturation of the themes.

4.10 Ethical Considerations

Ethical approval was sought prior to collection of data from the participants in the study; the research represents an intrusion into people's lives as it often requires participants to reveal personal information about themselves that may not be known to their friends and associates (Neuman et al, 2006). Thus, in any type of research, ethical concerns are essential factors that must be given due consideration. Moreover, when a research is conducted on issues or topics such as sexual violence, it sometimes may bring some discomfort and emotional pain as participants recount their experiences of sexual violence; it was extremely important to consider the ethical concerns. This includes ensuring participants' safety, minimizing participant's distress, assuring confidentiality, and obtaining informed consent, (Ellsberg & Heise, 2002). Other ethical guidelines also include the participants' right to know about the nature and purpose of the study, and the consequences of participating in the study. The researcher took upon her responsibility and ensured that the research will not lead to more suffering of participants or harm them in any way. It will not further traumatize the participant. Furthermore, the researcher respected the respondent's decisions and choices of the local institution. Where necessary, confidentiality (no names were written on any document), and consent to participate in the interview was made verbally since all of the victims refused to sign the consent, the institutions managers and/or the social worker like Mehwar home and the crèche home in HFH signed the agreement and consent to share in this study. This reflected their concern about social context, and fear of Honor killing; the participating professionals co-worker

signed the consent to share in this study. The researcher used initials (codes) in the text to keep confidentiality. Participation was voluntary, and no payment was offered to participants. To guarantee confidentiality, special papers prepared by the sheltering home (Mehwar) were signed by the researcher and the sheltering home to guarantee confidentiality as a kind of protection and legal considerations, and as one of the institution protocol please see (annex No.5), This has to do with the socio cultural sensitivity of the women's situations and the threat on their lives that they might face if any of the data comes out in public. As one of the institutional protocols and for the safety of those women, the institution signed the consent on behalf of the women, for taking part in this study as one of the internal considerations to protect them; moreover, the researcher explained to participants that their participation was voluntary and there were no negative consequences if they refused to take part in the study or to answer specific questions. The researcher ensured that each participant understood the nature of this research, the purposes of the research, the potential risks and benefits to the participants' participation, and the fact that they may withdraw from participation at any time. All questions that an individual may have before and during the semi-structured interview were allowed; each participant was asked whether they had any questions before they proceeded to the next question. If an individual did not want to talk further about a topic, the researcher respected that; the participants were told about how the obtained information from the interviews would be used.

The information sheet and the informed consent form were made available in English and also in clear Arabic language of the participants please see (annex No.1) and (annex No.2). Finally the written consent was not taken from the interviewee for several considerations like confidentiality, anonymity, and protection rights of all people involved; names of key informants, and participants in the study will not appear throughout the research; all interviews documents were kept in a safe place in special cabinet with the academic supervisor at Al- Quds university and will be used for research purposes only, because in such research it can be a life threatening issue for the participants.

4.11 Data Analysis

A qualitative data analysis approach was used to identify themes that emerged in the interviews. They were more descriptive approaches; this approach sought to identify conceptual categories within data set and determine how they explained the phenomenon under study

A preliminary data analysis, using qualitative data analysis methods, was done immediately after data collection, and after copy and read through and by made notes in the margin when relevant information is found. The findings that were formulated from the first three participants in the pilot phase provided rich data during the interviews, and they were satisfied by the research methodology. It contributed to the decision to start the main study.

Interviews were verbatim, and the transcribed interviews were reviewed and coded several times in cooperation with the academic supervisor. Based on discussion, several themes emerged. On secondary analysis, codes in the first five interviews were categorized, collapsed, and reordered to create secondary and approved codes by the researcher and the supervisor; this has further informed the emerging themes. Codes fell into three to four categories: causes of pregnancy outside of marriage, including individual level (Intrapersonal level), relations level (interpersonal level) and (socio cultural levels) and the consequences of pregnancy. The following table no. (4-1) show one example of initial data analysis:

Table No.(4-1) An example of data analysis

Participants own wards	Open code	themes	subthemes
"My husband was very poor and he stopped going to school because of no money"	Chr. Of the family ; Low Financial statues and lower educational level of husband and its relations.(memo)	Cause financial hardship Under-education husband	poverty, low socioeconomic
Talking about her husband:"Never he told me that he loved me, never he told me any sweet ward"	Causes: - no love, and care, or intimacy -blaming husband	-causes	Lack of love
"To die is better than this life"	- prefers death instead of her conditions now	Psychological consequences	-wish to die

The individual levels were analyzed to find out the intrapersonal factors that made the participants more vulnerable to pregnancy outside of marriage, and the physical and psychosocial effects of pregnancy outside of marriage on the victims themselves. The interpersonal level was separately analyzed and coded by analysis of the victims' relations with the families, husband, perpetrator and peers. As causes of pregnancy were analyzed

and coded as interpersonal reactions to pregnancy, the social reactions were also analyzed and coded separately.

During open coding, the words and phrases that appeared to be similar were grouped together into the same category. After this stage, the identified categories were re-examined to determine how they linked and then they were combined to create subthemes. In the last step, themes were identified and verified in order to confirm the themes and their patterns. During that period of data analysis several times the categories were reviewed and examined if some categories can be merged, or if any themes need to be sub-categorized, several reviews done on the first transcript to be sure that all the data that need to be categorized have been emerged (see table 4.1).

4.12 Trustworthiness

In qualitative research credibility, dependability, transferability, and Confirmability are known as trustworthiness criteria (Guba,1981;Schwandt et al,2007).

To test validity of an instrument, the interview questions and the open end questions were submitted to three supervisors (Teachers with long experience in qualitative research at al Quds University) (please see annex No.5) for comments, prior to the field work and data collection. The questions were reviewed, discussed and refined by the researcher and the research supervisor.

4.12.1 Credibility

Since the purpose of qualitative research is to describe and understand the phenomenon, the participants/ readers are the only ones who can judge the credibility of the result which involves establishing whether the results of the qualitative research are credible or believable from the perspective of the participants in the research.

To ensure credibility of the research, regular meetings with academic supervisor during data collection and analysis were held. The transcripts were reviewed to ensure objectivity of the research analysis of data and to avoid any biases. The reviewing of the transcripts helped in testing emerging designs and hypotheses to 'keep the inquirer honest' (Lincoln et al., 1985). Three of the interviews were coded by the researcher and supervisor separately and then compared in order to enhance credibility, transparency and dependability of this study. Additionally, a review of codes was carried out with supervisor in AL-Quds University to encourage consideration and exploration of additional perspectives.

Checking and verifying codes by asking direct questions to the participants enabled the researcher to check these codes against the original meaning in the raw data. These two measures added more credibility to the data. In this research and during the levels of coding, the researcher used the participants' actual words as suggested by Strauss (1990).

4.12.2 Confirmability

Qualitative research tends to assume that each researcher brings a unique perspective to the study. According to William (2006), confirmability refers to the degree to which the results could be confirmed or corroborated by others. There are a number of strategies for enhancing confirmability. The researcher can document the procedures for checking and rechecking the data throughout the study. After the study, one can conduct a data audit that examines the data collection and analysis procedures to make judgments about the potential for bias or distortion (William, 2006). In this study the researcher explained the reason for favoring interviews and the reason to use why she used them as data collection method. The findings of the study were represented regularly to the supervisor for analysis and evaluation. In this study, the researcher interviewed the victims and professional co-workers to add more variety to the data sources.

4.12.3 Dependability

The researcher is responsible for describing and providing detailed descriptions of the data collection procedures, sampling decisions, analysis and synthesis procedures were constantly reflected on and the means by which the researcher reached the theoretical construct have been described; To obtain dependable findings, the researcher has to establish clear and repeatable procedures for the research and to reflect on the position she takes as she performs them (Gasson, 2003).

The researcher was keen to explain the research design and its implementation, and it explained what was planned and what was executed on a strategic level; details of data collection have addressed clearly what was done in the field.

4.12.4 Transferability

Transferability refers to the degree to which the results of qualitative research can be transferred to other contexts or settings with other respondents it is the interpretive equivalent of generalizability (Bitsch, 2005; Tobin & Begley, 2004). According to Bitsch

(2005), the “researcher facilitates the transferability judgment by a potential user through ‘thick description’ and purposeful sampling”.

4.13 Summary

In this chapter the study design was discussed as qualitative descriptive design to collect data and to develop an in –depth understanding of the experiences and perceptions of the pregnant women, her family, society and the community services that are offered to those women among Palestinian society. Using descriptive approach was helpful to generate data about women with pregnancy outside of marriage. Semi structured interview were used, with the purposive sample, in this chapter the inclusion and exclusion criteria were explored, the ethical considerations were clarified, and the study settings were also considered as a part of this chapter.

On the other hand the data collections and analysis were also discussed in this chapter and one sample of data analysis was shown. To determine the validity and reliability the meaning of meanings credibility, transferability, dependability, and conformability, were discussed in this chapter also.

Chapter V

Findings

5.1 Introduction

This chapter presents the analysis of the findings that were concluded from the interviews with women who experienced pregnancy outside of marriage and professional co-workers; this result will be presented in this chapter to explore the causes and the effects of pregnancy outside of marriage and the experiences of those victims after this experience. Data was taken from both the victims who experienced pregnancy outside of marriage, and the professional co-workers who were in direct contact with the participants.

A qualitative descriptive research approach was utilized to explore the participants' experiences of pregnancy outside of marriage. The themes that emerged from the interviews with eleven women and five professional co-workers, have been organized in a manner that encompasses as many important elements of each victim's story as possible. These themes will be discussed in a descriptive manner, using the victims' and the professional co-workers' own words to illustrate the identified patterns and areas of importance.

5.2 Characteristics of samples

The study sample consisted of 11 participants of women who experienced pregnancy outside of marriage. Their age ranged from 17 to 35 years; the mean age for women was 26 years; 5 of them were 17-25 years old (45,45%), 3 of the participants ages were of 25-30 years old (27.7%) and the other three were 30-35 years old (27.27%).

The participants came from different geographical areas south,, north and centre of the West Bank. 6 participants came from villages, 3 of them from camps and 2 were from cities. 10 participants were Muslims (90.01%), and one was Christian (9.09%). As for the family structure, 7 out of 11 participants lived in nuclear families (63,63%) while 4 of them came from extended families (36,36 %). Just 2 participants (18.2%) were employed while the rest (9) were unemployed (81.81%). In relation to education, only 1 participant was a university student (9.09%); another participant had a diploma (9.09%); a participant never went to school (illiterate) (9.09%), while the majority of the participants (8) of them with primary education (72.7%).

Based on the Palestinian Central Bureau of Statistics, (PCBS,2010), poverty line in the Palestinian Territories, (PCBS, 2009-2010) was defined for the reference household (two

adults and three children) in 2010 at 2,237 nis equivalent to (US\$ 609) and 1,783 nis (US\$ 478) respectively; therefore, seven of the participants were from low socioeconomic level (63%), while just one (9.09%) of participants lived in middle socioeconomic status, and three of the participants were with good socioeconomic status (27.2%). 6 of the women (54.5%) were single; 3 of the participants' (27.2%) were married, and 2 (18.18%) were divorced. For married and divorced women, the number of children was between (3-4).

5.3 Professional Co-workers characteristics:

The professional co-workers were chosen from several institutions like: Staff midwife from HFH (Holy Family Hospital) female(45 years old), Social worker from the (Crèche) male 49 years old in HFH, female social worker from Mehwar (Protection and Empowerment of Women and the Family Center) in Bethlehem 52 years old, female. A social worker from Palestinian Association For Family Planning and Protection, female 32 years old, and a police man from (Family Protection Unit, Bethlehem police) male 33 years old.

Three of the professional co-workers were females; this equals 60% of the participants, and two (40%) were males. They had different qualifications: One of them had a Master degree in Social Work (20%); two social workers had a Bachelor degree (BA) in the same qualification; one worked in the family protection unit, but he graduated with a major in Accounting (BA). The last one was a registered midwife with a high diploma in Midwifery and (BA) in Nursing (20%).

The professional co-workers' ages ranged between 20-50; one of them was between 20-30 (20%), another one was between age 31-40 (20%), three (60%) were in the ages between 41 - 50.

Four of the professional co-workers were married (80%) one was single (20%). As for the professional co-workers religion, four are Muslim (80%) and one was Christian (20%). Finally all of those professional co-workers were living in middle socioeconomic status (100%).

5.4 Causes that lead to pregnancy outside of marriage:

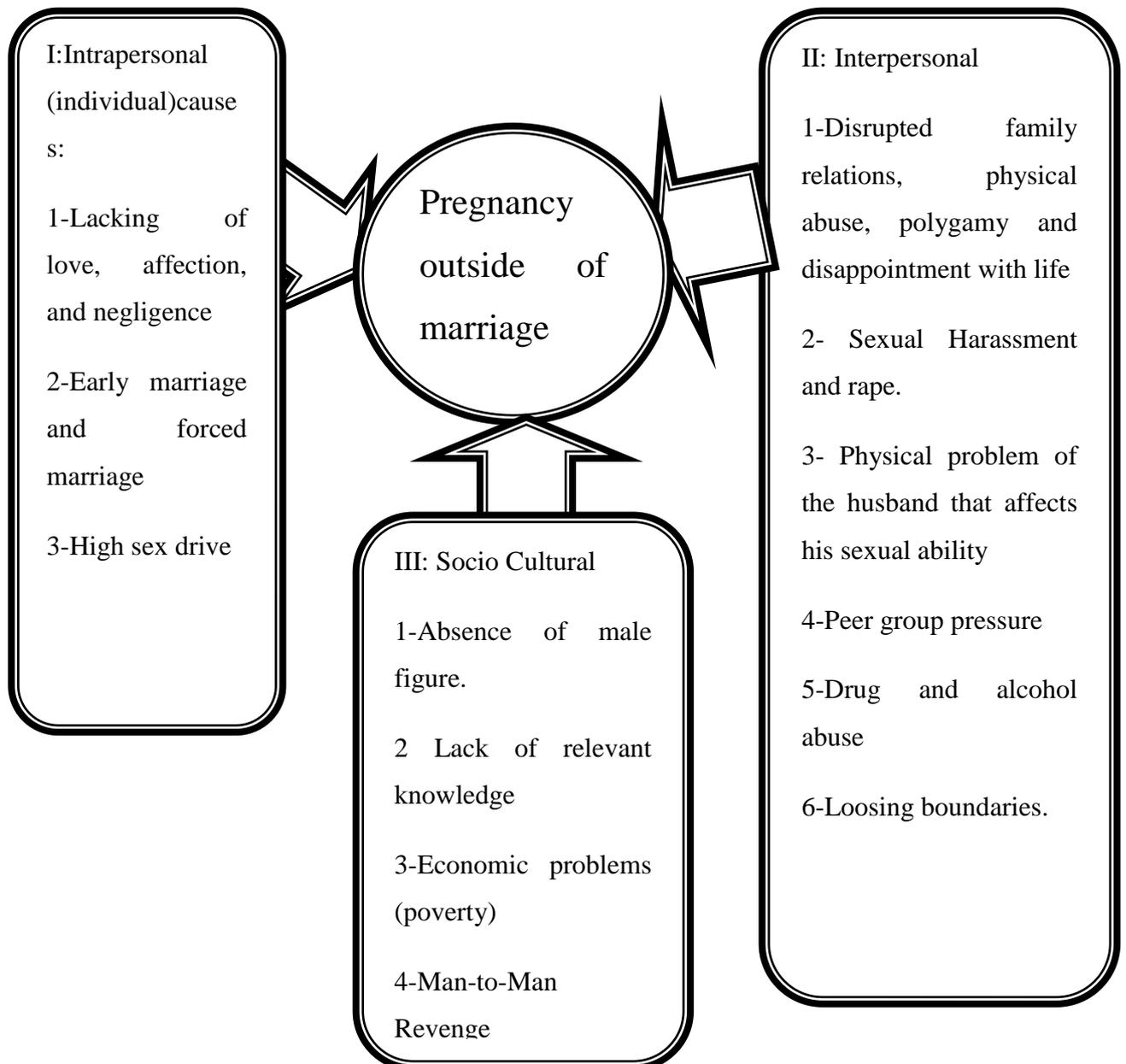
Three themes were emerged regarding the causes of pregnancy outside of marriage; thus, they showed that the causes of pregnancy outside of marriage were complex and varied; that included:

5.4.1 Intrapersonal (Individual) causes

5.4.2 Interpersonal (family, friends, peer group) causes

5.4.3 Socio cultural causes

Figure (5.1) the causes that lead to pregnancy outside of marriage among Palestinians women



5.4.1 Intrapersonal (Individual) cause

Individual problems represent lack of emotional support within the intimate relationship and emotional disadvantage for the women. This made them seek love outside of marriage. In addition there are other individual causes that the participants revealed and they include:

5.4.1.1 Lacking of love / affection and negligence

The findings from this study showed that the interviewed women equated between their extramarital relationship and love; in fact, they described their marriage as unhappy. The loss or lack of love interaction between the women and their husbands led to negative consequences, which from the women's points of view, led to pregnancy outside of marriage. For example, some victims reported their feeling of being unloved by their husbands or even by their close family members (mothers) in case they were single. This made them lack self confidence and view themselves as unlovable individuals as mentioned in the following excerpt:

“This will never happen if I were with a man who appreciated me and loved me,. If he took care of me, we would have lived a respectable life with kids, but he never loved me or even made me feel that I am a beautiful woman”. (A6F35)

As reported by the participants in this study, absence of intimacy made women do various behaviors such as looking for love from another person to make up for the absence of love from the husbands as a mean to compensate for their feeling of lack of affection. However, data from this study showed that women became emotionally sensitive and vulnerable. This made them more susceptible to being emotionally and sexually exploited by other men as shown in the following excerpts:

“The problem was that I imagined him as my husband, even I called him by my husband's name. I was missing my husband, just I wanted someone to take care of me. I miss my husband too much; I need him to tell me that I am beautiful”. (A5,M,31)

Another participant revealed that the affection and love she had from her lover was never there between her and her husband. This showed that the woman was looking for a romantic relationship with another man as a result of her husband's inattention, disinterest or underestimation of his wife's emotional needs:

“I had been married for ten years; however, I never heard sweet talk like this”. (A3S28)

On the other hand, single women also reported their struggle with the instability of relationship inside families and that their families were unable to provide them with

necessary emotional support which was reported to be one of the reasons of having romantic and sexual relationships outside of marriage:

“My mother never loved me”. (A9GH18)

Data from this study showed that sometimes husbands were reported to be neglectful as they sometimes did not communicate with their wives or even did not stay at home. This increased women suffering and their feeling of rejection and disappointment.

Consistently, one professional co-worker reported that, from his experience, most of the married women who came to his unit with sexual relations outside of marriage and/or pregnancy outside of marriage complained that their husbands were neglecting them and they looked for love, because they were forced to marry their husbands.

“A married women told that:" my husband is neglecting me, and I don't love him, I never lived on love, because they forced me to marry him when I was young”. (B1,32,I)

Some of the victims also indicated that they had been neglected by their husbands, which is considered a reason for feeling unloved. Being neglected refers to “the feeling of being excluded from the husbands life and being invisible”

"He never came home, just for his needs, then after he took what he wanted, never staid at bed to sleep closed to me, but he continued his night with his first wife ; she is his cousin and he prefers her, even when he married her it was just to provoke her because she left his home, then my family agreed to make me marry him just to get rid of me and my trouble he spent most of the time with his other wives..... Never with mejust the humiliation I had from him.....never we loved each othereven he stayed several weeks without coming to the home".(A3S28)

Data from this study showed that participants' feeling of negligence by their parents or their husbands led them to look for other men who were emotionally providers and supporters for them and for their children:

"Because he appreciates me, not like my husband who spends his time sleeping, and he started to come to my home ; asking if I and the kids needed anything, and he was very kind with us and always asked about us ".(A6F35)

Some participants reported that husband never showed jealousy toward them in the presence of other men, as some women considered men jealousy kind of love. For these women, they needed to feel their husbands' jealousy in order to feel loved and needed. The following excerpt showed that some husbands were unaware of the necessity of showing

jealousy for their wives and how this might ward off closeness between both of them and lead women to search for intimacy outside their marriage:

“He never asked me where I was going, and from where I came, never I felt that he was jealous despite that I am a beautiful woman. My husband started to leave him at our home at night and went to his bed. I wished if he showed jealousy towards me”. (A6F35)

The majority of the participants revealed one or more characteristics of the lovers or perpetrators that showed that they provided them with the needed emotional support. For example, some participants in this study revealed that they felt secure during their relation with the other man compared to the life they suffered from previously. As a result of lacking love and affection, they were looking for comfort, care and affection which were fulfilled in their relations with their lovers.

“He was hugging me, touching me, but with him I felt more secure than with anyone else; he understood me, but I didn’t want that to happen”.(A7,R,26)

“I didn’t know how he touched my hand and how he hugged me, I removed him and stopped him but in reality I felt secure when he did this”.(A6,F,35)

5.4.1.2 Early Marriage and Forced Marriage:

The professional co-worker and women in this study reported that women who got married at young age and that their marriage was not their own choice might compensate for the lack of support and love through their romantic relationships and particularly when their relationships with their husbands were a source of harm:

“They forced me to marry at the age of 15, my mother did this to get rid of my problems in reality she was hitting me too much, and she never loved me”. (A9GH18)

The professional co-workers after their long experience with women revealed that most of those women complained that they got married at early age and related their extramarital affairs to that reason:

“Most of them said that:”They made me marry at early age and by force”. (B1,32,A)

Not only early marriage but also the age gap between the women and their husbands led to this pregnancy. Some women reported that the age difference between them and their husbands, under education of the husband and being a second wife exacerbated their feelings of emotional deprivation:

“I was 17 years old and he was 40 years when they made me marry him, and he had married another two wives and he had kids, and he was not educated, and never went to school”.(A3S28)

“They made me marry my first husband when I was 14 years old, then they made me marry in (---) small village close to (----) without asking me and I was the 4th wife and I was 15 years old and he was forty years old”. (A7R26)

Forced marriage was revealed in some interviews as one of the causes that led to affairs outside of marriage. This indicated that when women did not choose their partners and lacked love in their relationship with their partners, they would seek another relationship in order to fulfill their emotional needs. In some instances, their relationships led to unpredictable pregnancy outside of marriage:

“My family forced me to marry him even they didn't ask me in order just to get rid of me, both my parents died two years ago, my old brother forced me, all of my brothers are married they are living just for their wives and kids and no one takes care of me”. (A3S28)

One of the interviewed professional co-workers stated that those women had many emotional problems related to early marriage and being subjected to forced marriages. In addition, there was a big age gap between the women and their husbands which might create emotional deprivation and lack of love problem:

“One women came. for example was divorced because she was married at age 17, and the divorce took place after six months, then she married another old man his age was 75 years, while she was 27 years. and there was a big age difference between them”.(B3,32,M)

As a consequence having a relationship with other men, some women revealed that they felt being loved by the (biological father/perpetrator) or they started to become more emotionally involved with these men. Some men made unrealistic promises to marry them in order to continue their sexual relationships with women. This in turn, made women involved with more risky sexual relations that ended up with their pregnancies:

“But he was reassuring me by telling me, you will be my wife, and I love you very much and he told me that I am the most beautiful woman. He wishes if he would have me all his life. Even he loved me and brought gifts to me and protected me because of all of this he is very good man to me”. (A3S28)

As a result of being forced to marry their husbands, some of participants enjoy being loved by other men as for them they were their own choices. Despite social restrictions on having extramarital relationships, women revealed that their experiences provided them with pleasure; therefore, they did not want to lose such feelings. Some reported lacking any feeling of guilt or remorse for having sexual relations outside forced and early marriage because it is their right to be loved and for them the lovers proved a better substitute.

“I enjoyed the time with him, and I never had this feeling before with my previous old husbands”. (A5R26)

“No, I never felt guilty, you know why? Because, I want that to happen, because I want love and affection and I found that with him”. (A7R26)

5.4.1.3 High sex drive:

The data from this study showed that having sexual problems with the husbands was the another cause for women in this study to start looking for sexual relationships with other men. One participant revealed that, she had high sex drive since childhood which made her like sexual relations especially after she was exposed to sexual assault by one who was supposed to be her lover while she was 13 years old. This made her more interested in having intimate relationships, and she reported that she needed to be treated for high sex drive, but no one helped her for solving this problem; this made her continuously practice sex until she became pregnant outside of marriage:

“When I was child, I was examined by doctors, and they told my mom that I needed hormonal treatment because I like sex, but my mom had no response and did not treat me”.(A2R29)

Some of the participants mentioned that they had been sexually active in the past years because they started sexual activity at early age which left them emotionally affected especially when it was (anal sex). From their points of view, this was one of the reasons for their needs for this relationship to fulfill this drive:

“When I was teenage (13 years old),I fell in love with a young man, but he exploited me,I thought that he loved me, and I gave him myself, but he abandoned me, he also let his friends sleep with me even with not normal sex. No one helped me“. (A2R29)

Some participants revealed that they had a long history of multi sexual partners to the extent that they no longer knew whose child it was.

“Since I went out with so many men, I can't know the father of the baby, because I was a girlfriend of man from(-----), and he was married and had 2 sons and one daughter. He once slept with me and another two men from(-----), but the one from (-----) was my preferable one and therefore I decided to be his sincere”.(A2R29)

(At the period when I became pregnant, my husband was sick I didn't sleep with him too much. I almost slept with my lover every other day”. (A7R26)

5.4.1.4 Lack of relevant knowledge

The conservative nature of the Palestinian families and excessive closed over women were reported by most of the participants as a main cause of pregnancy outside of marriage. Professional co-workers reported that low education, lack of sex education and lack of freedom of women made women lack social abilities to protect themselves from exploitation by other men. For example, some described them as naïve women who believed men's promises for marrying them due to their lack of knowledge that made men exploit them in order to have sexual relationships:

“Those girls have not enough social immunization to give them the strength to defend themselves in front of the perpetrator. While there are individual differences between them like, the education, the mental maturity, and the social backwardness is very clear with them”.(B249 I)

The professional co-workers interviews supported this finding since most of professional co-workers reported that those girls shared naivety, low IQ (intelligence quotient) level, and low level of education and social cleverness, As mentioned by the professional co-worker:

“Also it was noticed that they had very low level of thinking and low IQ and simple closed mindedness; they showed naivety and some of them still think that the perpetrators loved them and they would marry them, and they shared weak personality characteristics”. (B4 52 A).

Some of the professional co-workers clarified that living in highly conservative families with lack of sexual education about protecting their bodies enhanced having relationship outside of marriage. For them, sex education provided women with knowledge about social norms, risk of sexual relationship and social and physical consequences:

“They came from closed and conservative families; all of us are conservative, but here we have to distinguish between the different meanings, to be closed family is not to get out from home, not to be educated women and this is the conservative and closed that I mean”. (B452A)

“There is no culture of awareness or sexual awareness in those families; this played a big role. How the brother could abuse his sister sexually?!, while this behavior is forbidden,

the absence of sexual awareness lead to those cases in addition of broken and divided and disturbed families”. (B545F)

5.4.2 Interpersonal causes

Personal relationships with family, friends, husband and peers in this study influenced the risk that the participants would become victims of sexual relations outside of marriage. Interpersonal and family causes as shown in figure (5-1):

5.4.2.1 Disrupted family relations

(Physical abuse, polygamy and disappointed with life)

Family relations appeared to have a main role in leading to pregnancy outside of marriage; the majority of the victims revealed that relations inside their original families were not so strong, or even weak; one of them stated that each one of her brothers had his own life, while another one said that she never had support from her brothers when she was complaining of her husband’s abuse as he always sent her back home.

“In reality, I am very weak, no one supported me; I am always alone in this life ; all react with me as if I am a low wall. In reality I used to go to my family home after my husband treated me badly, but my brothers were hitting me and turned me back to him; I was broken, then he abused me more than before. No father no mother for me, my brothers are all busy with their own family: kids and wife. They never showed me any affection, not to me nor to my sisters, so to whom will I go”. (A3,S28)

The professional co-workers and women agreed that women lived in families within weak relations, lack of supervision, no affection, and were neglected emotionally:

One of the professional co-workers said:

” Most of them came from weak and divided families; no family direction or guidance, no supportive members inside the family”. (B4,52,A)

The professional co-worker also revealed that those women usually came from families with several social problems and weak relations inside their families:

“You will find for example that her mother was dead or/and polygamy, or/and divorce poverty..etc., and the relations inside those families are not strong, and there is no love and affection inside those families”. (B4,52A).

While in previous results, women lacked love and affection from their partners or families, some women reported that dissatisfaction and physical abuse were factors that led them to seek romantic and sexual relationships outside of marriage.

For example, two victims stated that their life was very difficult because of the physical, financial abuse and emotional negligence by their husbands. For them, they sought extramarital relationships in order to have emotional support, comfort and companionship.

“My life with him was difficult; I never had happiness in one day”. (A3S28)

“I stayed with him ten years, but all these years we had problems; he used to hit me and assault me in front of his other wives; he never respected me, even he hit me if I asked for money for me and my kids”. (A3S28)

“I married at age of 14 years; I was separated because he was a weak person and particularly in front his parents,(moali), "This word is used in our village, and it means that he is weak person, he never decides alone; his parents controlled all his actions", and he is from my village and he used to hit me. I remarried after 7 months to a man who was married to 3 women. He used to hit me, and assault me; therefore, I asked for divorce. However, my mom never supported me or stood beside me, but I complained to my older sister, and when I got divorced, I was beaten by (the husband of my mom)”. (A7R26)

The same woman mentioned that her life was full of difficulties and lacked happiness because of being a second wife. This put her in lots of conflicts and disputes with the other wife and her sons. This appears in the following excerpt:

“After 7 months that I lived with man with polygamy, I was the 4th wife,with 9 children from his wives; life is full of troubles, assault, abuse. (A7R26).

5.4.2.2 Sexual Harassment, incest and rape

Sexual harassment was salient in the majority of the interviews, and it was divided in two kinds of harassment: The first one was inside the family and the second one was outside the family. Data from professional co-workers and women showed that sexual harassment from family members and men outside of the family made those women more likely to indulge in reckless and unguarded sexual experimentation:

"You can feel that they have no boundaries for their bodies".(B,A,52)

Two participants revealed sexual harassment inside their family; one of them was harassed by her uncle, another participant reported unsupportive family members especially her

sister because her sister's husband harassed her; therefore, she found comfort by having sexual relations outside of marriage.

"I had one sister; our relation is not strong because of her husband; he wished to have me. When I told my sister about her husband, she kicked me out of her house and she defended her husband and left me alone".(A2R29)

The data from professional co-workers and women participants showed that the majority of women were sexually abused by close family members such as fathers, brothers and uncles or people who had a direct contact with families. For example, one of the interviewed women was raped by her teacher; another one whose husband was in prison was raped by a man for whom she worked at his home as a maid.

"You found them telling you that "I worked at home to clean and the man raped me, another told us that her teacher raped her".(B1,32,I)

The professional co-worker revealed from his experiences with those women that some of them were afraid because the perpetrators were from their families and they threatened them with death if they disclosed their sexual attack.

"A short period ago, we worked with an 18 year old girl; her brother got her pregnant; she didn't talk easily, because her mother and her brother threatened to kill her, such case needed shelter and protection". (B1,32,I)

Another professional co-worker disclosed some striking institutional' statistics related to perpetrator of rape, and incest. Based on his long term experience with such cases, he reported that those girls came after rape to his institution; About 50% - 60% of the perpetrators were from the same family, and he ranked the level of relation with the women as mostly brothers then uncles and last fathers:

"No doubt that they had shared characteristics, as those girls who experienced rape, from my observation and the 13 years experience, I can tell that about 50%-60% of those rape cases are incest, and you can tell that the 1st level perpetrator is the brother, the 2nd level perpetrator is uncle from mother or father side, and the father is the 3rd level perpetrator inside the family". (B2,49,E)

Early experience with sexual activity with the father made the women risky for sexual relationships with other men as reported by most of the interviewed professional co-workers and women. Some of the interviewed women disclosed that lack of social interaction with their social network made young girls unable to recognize social boundaries, values and norms about sexual activity. This is reported in the following

emotionally charged excerpt by a woman and her sister who were raped by their father for many years without understanding that this was an unacceptable or immoral behavior in the society.

“Our father never let anyone visit us; moreover he did not let us go out of home; all what I had remembered that he was sometimes hitting us and assaulting our mom because she died and left us; he never let any of our aunts visit us; that meant that I and my sister were in prison with him, and know nothing about the world. We were in a cave; he kept us like this to keep using us, how could he do that to his own daughters”. (A10S17)

“He forced me to drop out of the school from 9th grade, because he said we have no girls who go out. God will not forgive him; he never liked the girl being out of home; he always said that the girl’s only school is the kitchen”.(A11KH33)

5.4.2.3 Physical problems of husbands that affects his sexual ability:

Two married participants revealed that they were sexually unsatisfied with their marriage as a result of their husbands’ physical problems. Therefore, the inability of husbands to fulfill their women’s sexual needs played a significant role in extramarital sexual relationship.

" My husband has enlarged and inflamed prostate and urinary problems, even this affected our sexual relation, and we never had a relation; if it happened it will be minimum because he will have congestion and pain. He used to sell chicken and he was always with bad smell. He never did his duties as husband and if he did, he was just caring about himself ". (A6F35)

“My husband was busy with his sickness, and he was sleeping so early. we (I and my lover) enjoyed our time together, I started to feel that I can't live without him. At that time, my husband was not sleeping with me at all, it seems that his medication affected his sexuality”. (A6F35)

“I had married him when and he was double my age; he was sick with diabetes and hypertension. Never he will discover me while he is sick and sleeping most of the time, and we never had sexual relation just once or twice each month. The period I got pregnant my husband was very sick and he didn't sleep with me”. (A7R26)

5.4.2.4 Peer group pressure, drug and alcohol abuse

Some of the participants in this study revealed that, their friends played a big role in being involved in such sexual relations outside of marriage, especially after they started to become drug and alcohol addicts. One of the participants reported that one of her friends made her try hashish and then she became addicted on hashish and alcohol and even to multiple sexual relations, especially in the absence of her mother's role:

“I started to be friends with the girls and their mothers (they are addicts and have sex with men) I started to be like them, addict to drugs, and get out with men and no one from my family cared about my behaviors or absence”. (A2R29)

“The friends can destroy each other, and if your mother didn't care about you, you have to take care of yourself”. (A2R29).

In the Palestinian society, mothers are responsible for nurturing their children and also for their daughters' behaviors and chastity, (Pagano, 2012). Therefore, women in this study carried the same beliefs as the society and blamed their mothers for their own behaviors. Another participant reported the effect of the perpetrator on her by making her involved in alcohol drinking and practicing sex with other men while she was drunk and under the effect of smoking drugs.

“My friends and then his friends took me around for a tour, and then they made me drink with them, smoke but not" marijuana" regular cigarettes smoking and after that they slept with me”.(A9GH18)

Professional co-workers and women revealed that the characteristics of lovers or/and perpetrator. The excessive alcohol usage among perpetrators and its effects on losing control over their bodies and mental status made them unable and unaware to recognize the differences between the right or the wrong behaviors and led them to sexually abuse their relatives as mentioned by one of the professional co-workers:

“I mean that there is a good percent that the perpetrator are drinking alcohol and using Hashish; this what makes them disoriented to what they are doing whether it is right or wrong”. (B5,45,F)

Some participants mentioned that people who were drug addicts had no social boundaries and this made them disrespectful of social norms of chastity; therefore, some of the girls in this study were sexually abused by them.

“What I knew that "he was addicted, and he did that for us while he was not awake ". (A10,S,17)

“In fact, he drank alcohol all the time, and he was almost crazy; he never respected any one. What I know is that, they said that he was addicted that’s why he did that because he was not awake”. (A10S17)

“In fact, I don’t know them but I heard my brothers saying that they were alcoholic; they are never afraid of God even they were thieves. God will not forgive them”. (A4H24)

Some participants also reported that engaging in alcohol drinking made them more vulnerable to sexual relationships. For example, one the participants, who had a history of drug abuse and alcoholism, revealed that she engaged in sexual relationships with other dealers whom she used to interact with, shared them in drinking alcohol and smoking hashish and in some occasions had sex with them for drug. Sometimes, she related her multiple sexual relationships with men for blackout as a result of heavy drinking:

“I was sleeping with drug dealers; we were drunk and smoked Hashish together”. (A2R29).

5.4.2.5 Losing boundaries:

The majority of the participants mentioned that when women were left without proper supervision and lack of clear boundaries in their relationship between them and other men, they would be more exposed to sexual activity and pregnancy outside of marriage. For example, one of the interviewed women revealed that she spent her childhood without a father. She mentioned that she was raped by her biological uncle who married her mother.

“In the first Intifada, my father died and left me and my little sister; my mother had just give birth to me one day earlier; then my mom married my uncle, but I then I discovered that strange men were better than him because he harassed me and my sister but not his real daughters”. (A7R26)

Consistently, the professional co-workers reported that, the families of those women lacked privacy in all life aspects and added:

“Those victims came from families without boundaries in everything. What you find is that everything is expected to happen as there are no closed doors for the bathroom, no door for the bedroom at homes”. (B4,52,A)

Some women, whose families lacked supervision, clear family values, care and lack of dialogue between members, were more prone than others to be engaged in unaccepted social behaviors such as having sexual relationships outside of marriage:

“I never wanted to have what happened to me, but my life and what I had suffered from drove me to the present situation; no one asked about me when my husband was arrested, In God’s name, I hold them responsible for all what happened to me”. (A5M31)

“No one asked me from where you brought the money or from where you came, until I felt that everyone wanted to use me, no one stood beside me; they brought me to this situation and to this place (shelter)”. (A2R29)

As it was mentioned elsewhere, one of the participants and her sister who were raped by their father revealed that the early rape of both of them by their father was at the age of 8 years after the death of their mother; he made them think that this was a normal relation between a father and his daughters, and this led to their inability to protect their bodies. Thus, those girls lacked moral boundaries about what was accepted and prohibited in sexual relationship. This led them to perceive their sexual relationship with their fathers as a normal relationship.

“He made us (me and my sister) sleep between his shoulders, and he said that he played with us; I woke up in this life while I was in this situation; I didn't know when it started. I used to think that fathers had to do what my father did to us ; I can't imagine my stupidity level, I started to be 12 years old while I cannot understand anything, and not recognize that what happened was wrong, until I and my sister were fighting who will sleep with him”. (A10S17)

5.4.3 Socio cultural causes:

Social problems represent one of the most important causes of pregnancy outside of marriage. It reflected conditions that played a role in motivating sexual relations outside of marriage. Data from this study showed that many social and cultural factors which were reported by the participants influenced the occurrence of pregnancy outside of marriages shown in figure (5-1):

5.4.3.1 Absence of male figure

Some participants reported that the absence of male relatives played a significant role in leading to sexual relationship with other family members and particularly with those who provided them with family needs. For example, one of the interviewed women elaborated that the difficulties she had faced were because of absence of her imprisoned husband, this made her face life challenges alone with her kids in the light of limited support from her family and her family in-laws:

“I didn’t want what happened to me to happen, but the difficult life that I faced after my husband’s imprisonment, and the absence of my brothers’ support during my husband’s imprisonment lead me to this conclusion. God gave my brothers money, but they were not so good with me; they didn’t show affection toward me nor towards my children, just they gave us little money once in several months; they never came to see me and my children even if one of my children was sick”.(A5,M,31)

This absence of both husbands and brothers and in general a male figure in the women’s life made it easy for a brother in-law to compensate for their roles. One of the participants reported that her brother in-law provided economic support to the family, so she accepted to have sexual relationships with him. This was exemplified in the following excerpt:

“On that day, I returned from my husband’s visit in the prison and it was not allowed for me to see him. I cried all the way home; I was so tired and my emotional state was very bad due to the lost effort and then he approached me, comforting me and what happened had happened between us”. (A5M31)

The same participant revealed that her relationship with her family- in- laws started to be stronger because they provided emotional and financial support to her children. However, this affected negatively boundaries between the women and the male relatives which ultimately led to having sexual relations.

“Their visits increased after their brother was in prison, and they started to spend nights at my home to take care of their brother kids, until it started to be a normal view to see them all the time in my home; even I started to go to my bed while they were still in my home and this situation was comforting to me because I never liked to sleep alone. I felt better when there was voice at home, and they brought what they could to the kids”. (A5M31)

Another professional co-worker reported that the extended family, and the absence of boundaries and regulations inside those families can be one of the most important causes of pregnancy outside of marriage. She repeated this many times in her interview:

”As we mentioned before; they came from extended families, without any boundaries and regulations and roles for what was allowed to be done and what was not allowed to be done”. (B545F)

5.4.3.2 Economic Problems (poverty)

In this study, the majority of the women complained of their financial problems which are related to their unemployment, or to the absence of a breadwinner.

Most of the participants almost ten out of eleven participants, revealed that they had economic problems as they lived in poor family or suffered from financial problems or were dependent on relatives extended family members for living. As reported by the participants, this rendered them economically vulnerable and forced them to exchange sex for money in order to fulfill their own and their family daily needs. Therefore, having relationships provided them with their personal expenditure:

“They were spending money on me and bought me sandwich, and took me around , and charged my phone with money for credit and sometimes they gave me 50 or 40 shekels, and if I don’t have money I was asked for it”. (A9GH18).

“I lived in a poor family and our monthly income did not reach 600 shekels; this barely covered our food; my father was our breadwinner. It was not like now,when my father died, I decided to study and be superior in my study to help my mom; I wanted to be a teacher to help my mom and my brothers and sisters. My poor mom worked as a maid at homes to let us survive”. (A8K17).

5.4.3.3 Man-to-Man revenge

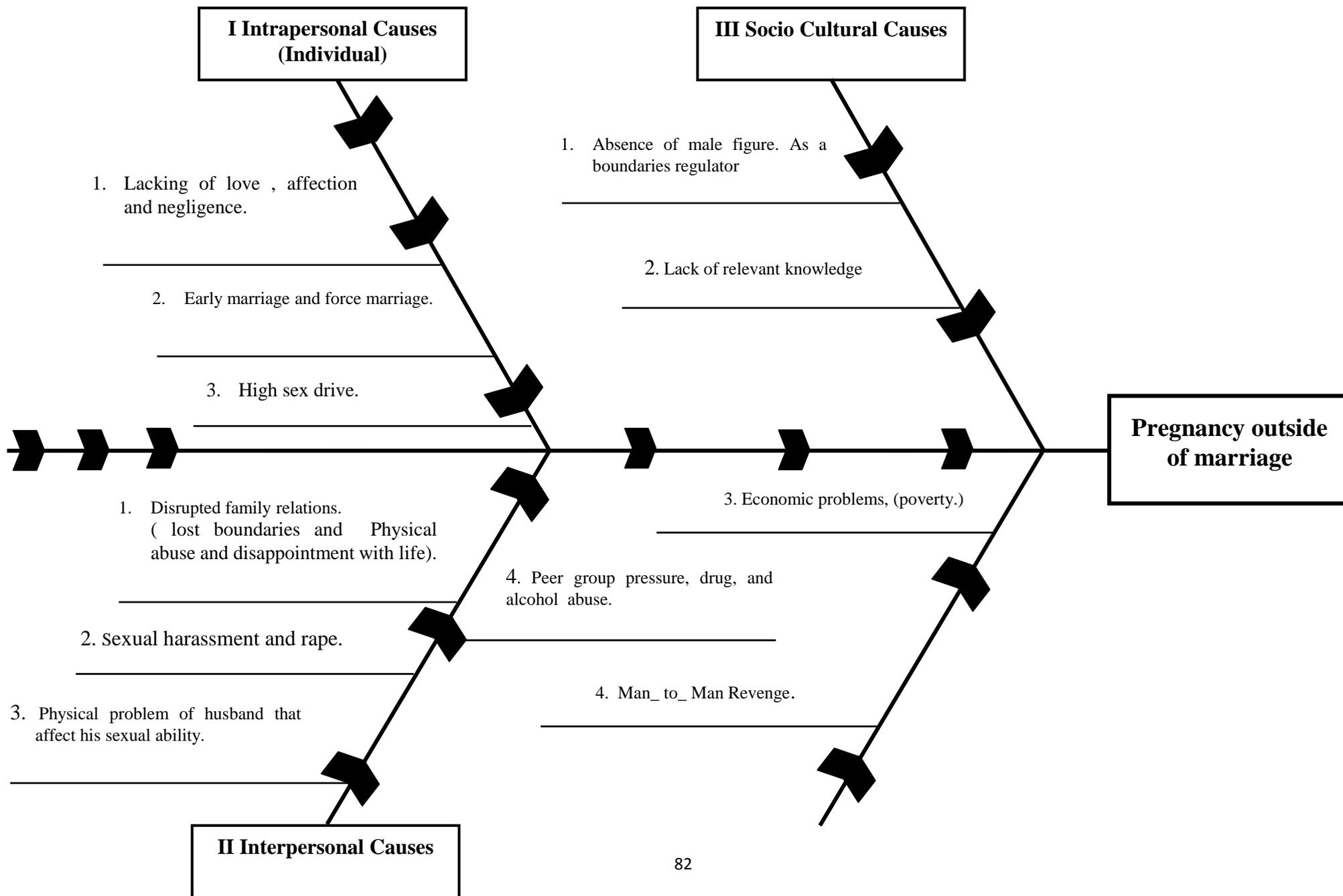
Apart from causes related to nuclear families relationships’ difficulties, the data from this study also revealed another aspect of the factors that led to pregnancy as one of the victims reported being raped by three men who sought revenge from her family:

“What I am on today was because of troubles between my brothers and other men; those men were planned to take the shop of my brothers; that shop was the source of our living; they decided to remove them from their shop by force. God will not forgive them as they

did many troubles and they continued to disturb my brother and my family which led to a big fight between them and my brothers. In the last fight, my brother broke one of those men bones. This made him hospitalized then they started to threaten my brothers many times; they tried to burn their cars like Mafia does. I mean they revenge from my brothers using me in order to break him emotionally and socially”. (A4H24).

In the above case, the abusers who were outsiders and unknown to the victim used rape as away to tarnish family name and reputation; therefore, family considered this attack as an attack on all family members:

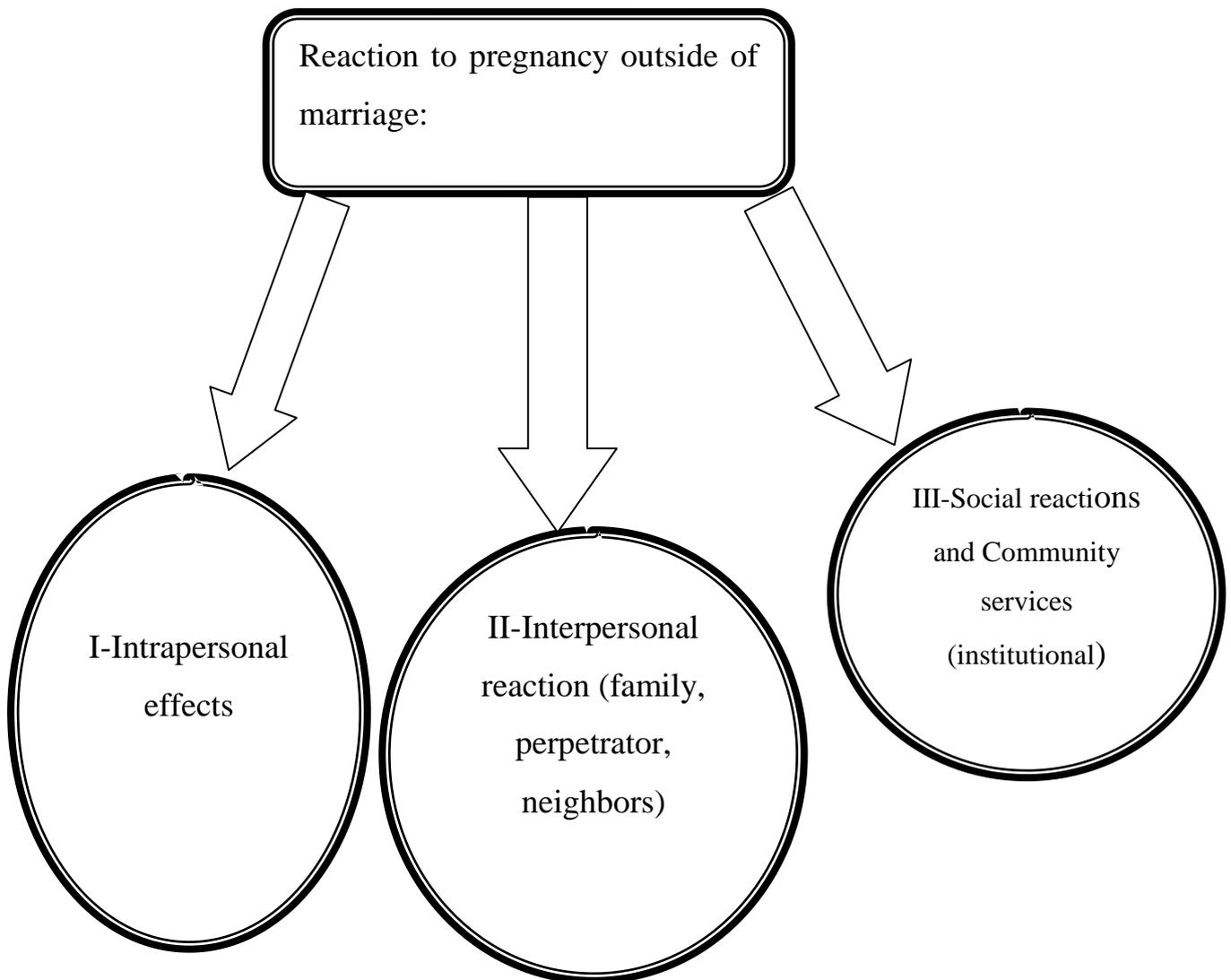
Figure (5.2) Ecological frame work for understanding the causes of pregnancy outside of marriage among Palestinian Woman



5.5 Reactions for pregnancy outside of marriage:

The findings of this study and the analysis of the data showed that women who had pregnancy outside of marriage suffered difficulties at different psychological, social, financial and physical levels as a consequence of their pregnancies. The data also showed that the families of those women faced many difficulties at many levels. The effects of pregnancy outside of marriage were classified into four emerging themes as shown in figure No (5.3)

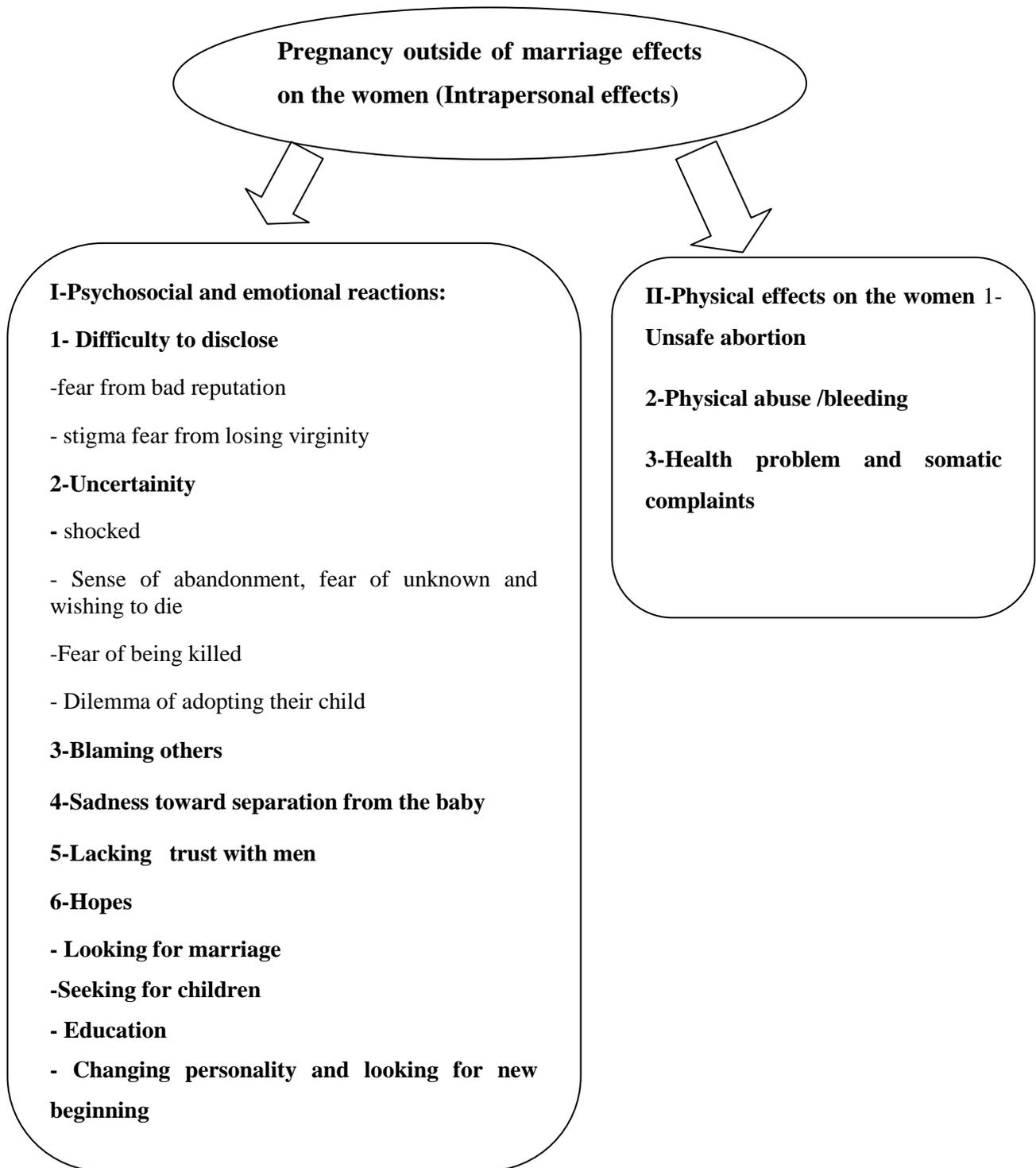
Figuer (5.3) The effects of pregnancy outside of marriage:



5.5.1 Intrapersonal effects

It described varied reactions of women in relation to discovery of pregnancy outside of marriage and it was subcategorized into psychosocial and emotional reactions and physical reactions is shown in figure (5.4)

Figure (5.4) Pregnancy outside of marriage effects on the women (intrapersonal)



5.5.1.1 Psychosocial and emotional reactions

It is a group of reactions that appeared on the participants after pregnancy outside of marriage as shown in figure 5.3

5.5.1.1.1 difficulty to disclose

-Fear from bad reputation

The Palestinian society is one of the conservative eastern societies. It attaches great attention to what people around the individual think of him/her, especially if the topic is related to family reputation. Thus, the girls put all responsibility that is related to the disgrace of family reputation upon themselves. Therefore, as a consequence of social fear, woman and her family pay a lot of attention to keeping the pregnancy private and ensure secrecy of the action in order to keep family reputation and participant's safety.

The professional co-workers reported that:

“Their biggest concern is to get finished with the topic in big privacy because of the fear related to their reputation. They never think about any physical problems just to find a solution for the sake of reputation”. (B133I)

On the other hand, professional co-workers reported different data as they differentiated between the women who engaged in sexual relations on their own free will and rape victims. Their point of view was that the women, who were involved in such social problems on their own free will, didn't care about family reputation as much as the ones who were forced to have such problems like rape:

“Afraid of bad reputation. Afraid of killing. But there are some differences related to that so you can find that the one who was involved on her will was not so scared like the one who was forced to be involved in such a problem”.(B249E)

The different reactions between women might be explained by women's previous expectations of becoming pregnant as a result of their sexual acts; therefore, their reaction was rather controllable.

As a result of women and their family concern about family reputation, they placed a lot of attention on concealing pregnancy as much as they could. Therefore, they were concerned about minimizing health consequences and complications during delivery as a way to hide their pregnancy from their social network:

“I have to know how to hide myself, and hide my pregnancy because he abandoned me; there was nothing to do just to cover and keep my secret ; I went twice to visit my husband

in the prison while I was pregnant ; and I put on big clothes he didn't notice my pregnancy. I was afraid to have bleeding or any complications during pregnancy and be discovered ;I started to avoid all, I liked to stay alone and prayed to God to help me and cover me for my husband and children sake and for my family who didn't give me any care. I am really worried if I deliver the baby in a cesarean section I will be discovered". (A5M31).

As a result of adopting the strategy of concealing pregnancy, family members and women were forced to make up stories about women absence to their close social network. This critical decision was carried out in order to save their faces in their society:

"Some of them never ask about the baby; their only concern is to get over this trouble for their reputation sake. Of course, the majority always gave good reasons related to their absence from parents home, usually unreal one to defend their reputation and the girl's reputation". (B4,52,A)

- Stigma fear from losing virginity

As a result of social judgment and fear for family reputation, almost most of the single women were wondering about virginity repair, and hiding any mark of getting birth experience like episiotomy:

"I am just worried about hymen graft. Is it successful operation?". (A1,GH,22).

"I just want to know how they will return me virginity as before. I don't want any stitches during delivery in my lower body, ask them not to cut me, not to be discovered. This is my major concern to return my virginity after graft operation. To live a normal life". (A4,H,24).

All the professional co-workers reported that the virginity and the virginity repair is the first and most important concern for those women. From their observations, this is related to many reasons and the Palestinian society norms of modesty that connect the honor of the girl to the presence of the hymen:

"The girls as I told you the most important question they raise was: "how they will repair the hymen ? how they can return me a virgin ?" because it's the proof of the honor of the girl". (B252A).

There are some health services measures taking by the victims and their family to face the stigma as professional co-workers revealed that many fears of the victims and their families were related to social reactions in such situations; this made most of participants look for repair of the hymen to convince the society of the virginity that is identified by the social norm that the hymen is still intact.

"You find them not worried about themselves as they are worried about what the people would say about them; that's why in my long period of experience in this place I noticed that most of them just wanted to graft the hymen; we are society who doesn't want the truth, but we want those who lie to us. For sure they lied and did the graft because they are afraid of being killed".(B249E)

5.5.1.1.2 Uncertainty

The participants revealed uncertainty in several form, like, shocked, sense of depersonalization, fear of unknown, fear from being killed, wishing to die, worried about loss of virginity, and dilemma of adopting their children

-Shocked

For each social problem, there are many reactions from the individual, families and the close social network. Pregnancy outside of marriage is viewed as a taboo in the Palestinian society. Therefore, in this study, many participants reported feeling of shock and distress when they were informed about their pregnancy outside of marriage. Some of them didn't feel their bodies; another said that she thought that she was dreaming. Another participant stated that she didn't know what to do at that moment. This reflected the complicated and their deep emotional effects as a result of the religious, social belief and moral values inside the Palestinian society that women should save pregnancy for marriage.

"In the hospital I was sometimes awake and on other times disoriented, even I was thinking that I was dreaming. When I started to be well oriented, I started to shout at my mother: Is this the teacher who is like my father. While I was still feeling that I was dreaming, I felt numbness in my whole body". (A8K17)

"I didn't believe it; and I had looked many times to the pregnancy test result while I did not believe what was going on. The problem that after two days there will be a visit for my husband in the prison. I started to imagine how I will show him my face, I started to feel like I am not in this world; my body started to be very cold. I started not to know what to do or where to go. I sat on the stairs with my sister not knowing what to do or where to go. I felt like I had long nightmare". (A5 M31)

These reactions of participants as a result of their pregnancy outside of marriage were consistent with the professional co-workers statements as they noticed that the majority of women who came to the institutions were shocked, frozen and numbed. However, other professional co-workers reported different data as they observed that some women had no

reactions at all, and some professionals described it as similar to emotional insensitivity. It is the professional co-worker's point of view that the low level of reaction was due to lack of awareness of the extent of the problem size:

“There was no reaction at all when she knew about the pregnancy or maybe she was shocked or cannot express herself and general silence or never recognizing the problem size. It is something like emotional insensitivity”. (B3 32 M)

One of the professional co-workers also reported similar findings as she noticed that women had no reactions; this might reflect the lack of the woman's awareness about her situation and its consequences in the future:

“When they reached our center, they did not have the full awareness of the size of the problem that they were involved in; some of them thought that there was no danger on their life; some of them said that: " my problem is very small" and they were promised to be married, but they were wrong to believe these promises and they lived in the illusion of love”. (B452A).

However, for other professional co-workers, the lack of reaction might be the result of the overwhelming stress that women encountered as a result of understanding the social consequences of the pregnancy and their expectations of the negative reactions by family members. She added that women were unable to find a way out; this actually reflected on women negatively; they faced difficulties due to their inability to share the news of pregnancy with family members.

“Most of the time, they were shocked and they never knew what to do; most of them needed another one to act on their behalf; due to the catastrophe size they don't have any reaction (just shocked) They were in need for another one to decide on their behalf because they could not decide at the moment, and it's very difficult for me to understand their facial expressions”. (B5,45,F)

The above information was supported by the data from many of the participants who revealed that they were very sad and extremely worried about their pregnancy outside of marriage. This problem made them cry constantly, so this could explain the difficulty in sleeping and distress they had during this period of time as reported by most of the interviewed women:

“I don't know what to do; I continued crying because I was so afraid”. (A3,S,28)

“I swear in the name of God that I never slept throughout the night because of my busy mind. I was not relaxed both at day or at night. I was all the time crying”. (A5M31)

In contrast, some participants revealed that they started to find sleep as the best way to get rid of their sadness or it could be a way to deal with her excessive fear so they started to have more sleeping hours than before:

“But my mentality is not good at all due to what had happened with me ...just I wanted to stay asleep, I never wanted to see anyone or to talk with others, and there is nothing worthwhile in this world”. (A1GH22)

-Sense of abandonment, fear of unknown and wishing to die

The majority of the participants revealed a sense of a dereliction which means to them that their life had ended and that they had no good future; this is more related to Palestinian society stereotypes of such women. This experience made the participants feel guilty toward their families because of tarnishing their honor:

“My life and me were lost. There is no life for me. I wish my life ended I am tired of everything”. (A11KH33)

“Never I will return like I used to be before. My life has already finished. All I finished, my family was lost, the main problem is that I made them lost, I hope that God forgives me”. (A5M31)

“What will be my emotions ; I wish if the earth will open and swallow me ; my life is stopped and destroyed, how my brothers will marry after what happened with me, I just want to return as before a virgin and to keep my family honor as before”. (A4H24).

Professional co-workers considered the emotional effects as the most common reactions among women because most of women were feeling abandoned, ashamed, regretful and blamed themselves because they and their families encountered many troublesome experiences with their social network along their way.

“Most important is their fear and worry about their family, and their reputation; they always say "what did I do to my family!!" (B1,32,I).

Most of the participants faced a multitude of difficult emotional decisions and reported their excessive fear and apprehension of the unknown future. This was added to their feelings of disappointment and loss of the meaning of life, especially after they lost virginity. Therefore, most of them started questioning what would happen to them, and how they would continue with their life afterwards. The moral value of chastity affected them emotionally and it might explain their feeling of being lost:

“I don’t know how I will deliver the baby and what will happen to me afterwards, and my hymen the one I lost. How this one will be corrected.oh God.....I don’t know anything. I am disgusting. I don’t want to live anymore”.(A4H24).

The professional co-workers reported that some women attempted suicide because of their feeling of regret and shame which indeed exacerbated their emotional pain.

“Many years ago there was a suicidal attempt in the monastery, by throwing herself from the 2nd floor; this made us as an institution to reconsider the idea of sheltering women in our institution”. (B2,49,E)

In contrast to being afraid of being killed, some of interviewed women revealed that they wished to die as a way to get rid of their guilt feelings toward their relative, or even not to be blamed by others because of pregnancy outside of marriage:

“I am the most one who hates herself, and I feel if I die will be more comforting, I will never forgive myself for what I did to myself, my children and my husband. I wish if my life is finished because there is no motivation in my life. When I return home I want to kill myself. I think to put kerosene on my body and burn myself, but I am worried about my kids, and about what the people would say about me. I thought of throwing myself under big car”. (A5M31)

- Fear of being killed

One of the participants’ major and very important psychosocial reactions to pregnancy outside of marriage was their tremendous fear of being killed by one of their family members in order to clean family reputation. Their fears were entirely rational when viewed in the context of the restricted moral values in the Palestinian society as voiced by most women and professional co-workers in this study:

“There are many women who were afraid of being killed because there was a real danger on their lives. Even the one who came to the center with her mother, also you can see the mother afraid for her daughter and she doesn’t want anyone to know. While for some girls even their mothers were dangerous because they try to kill their daughter who experience pregnancy outside of marriage. That means the issue is not easy”. (B4,52,A)

“I swear in the name of God if my brothers knew about that, they would kill me”. (A3,S,28).

The professional co-workers’ interviews elucidated the link between fear and difficulty to disclose. They mentioned that women fear for their life forced them to adopt the strategy of concealing their pregnancy. As reported by professional co-workers, figuring out the

adopted strategy (concealing pregnancy) by women would make people understand why women and their families decided to throw their children in the street or in the institutions. This tragedy was the result of the restricted moral values of decency and chastity and the inability of the society to forgive who violated this code:

“But because they are afraid. We are a scared population. That’s why they never ask for help so this reason makes us as institution for children find the newborn thrown close to a street or under a tree. Fear made the women throw their babies in order not to be killed, because of this the mother is confronted with two choices whether to throw her baby or to be killed”. (B2,49,E)

Another professional co-worker reported similar experiences of women’s deep concern about not disclosing pregnancy related to their fear of losing their lives.

“The majority of them were afraid, and it was difficult for them to disclose, and the most repeated word is death, "if my family knows, they will kill me"...."if my uncles know, they will kill me". Even their crying in labor room reflects social pain and worry about what will happen to them later”. (B5,45,F.)

-Dilemma of adopting their children

As mentioned before in relation to psychosocial care that is offered to those women who had to get birth outside of marriage, HFH prevents the early attachment to happen by preventing skin to skin contact, breast feeding, and even preventing the mother from seeing her newborn baby in order to decrease that suffering which will be produced as a result of developing mother to new born attachment. Despite their understanding of the scientific rationalization of this, the majority of mothers who had been separated or going to be separated were suffering and asking to be attached to their babies.

“Newly, I knew that she is girl. I don’t know what happened to me when I saw her heart beat, she will stay in HFH in the incubator. The physician said that he will give me medication not to have milk, but I swear in the name of God that I want to see her. I will have girl that I don’t know nor will her brothers. OH God what did I do!!! Death is better than this, I had these feelings like I am dreaming or that I do not exist! Why not to see her, just why!!!”. (A5,M31).

Another participant showed ambivalent feelings, by wishing the baby would die then by, missing her. The fact that the mother should give up her child for adoption made this mother in emotional pain as the future of the baby will not be clear, so her demonstration of feelings of regret might explain her conflicting emotions towards her baby.

“Even when I saw her pulse, I started to feel with her, and I started to be afraid from abortion. May be if she dies it is better for her instead of living as an illegitimate girl "Girl of haram", what is her guilt. I saw her in my dream, I feel with her. I don't know to feel with her or with myself”. (A4,H,24).

The professional co-worker also mentioned that women felt pressure in giving up their children for adoption and insisted on keeping their children but they could understand that the stigmatized social environment will prevent them from attaining their wishes.

“But mothering emotions will raise after getting birth. They started asking to see the baby, and asking why she is not allowed to see the baby?. Many sad emotions toward the baby were raised up”. (B2,49,E)

5.5.1.1.3 Blaming others

In contrast to the above findings about self blame and wishing to die, some women blamed other people in their life for engaging in immoral behaviors. From the point of view of professional co-workers, some women tried to have comfort through blaming their mothers and other involved persons in order not admit responsibility for their actions:

“Then she started to look for compassion, looking for cause, and wanting to find someone to carry the responsibilities; sometimes they said, “my mother was not good with me, or my husband betrayed me and I did that as a revenge to him.” Another one said that her uncle was threatening her if she did not comply with his sexual force”. (B1,33,I).

5.5.1.1.4 Sadness toward separation from the baby

Despite the emotional effects of becoming pregnant and the social consequences of the pregnancy on family reputation, the data from this study showed that women were emotionally affected because of their concern over their children future. The policy inside institutions prevented women from keeping their children after delivery which inflicted extreme emotional harm on women. For example, one of the professional co-workers explained the reason for not letting women even touch or see their babies after delivery as to avoid having an attachment with them. From their point of view, this policy will not lead women to have emotions and bonding with their babies, and it will minimize their

emotional suffering, while the participants revealed that they started to suffer from the reality of separation and felt guilty toward those babies.

“For the future, the midwife didn’t put the baby on his mother breast, and she didn’t allow any bond to be formed. It is scientific basis action, because if skin to skin done after birth it will create strong mother -child relation and this is what we don’t want in this special social issue to decrease suffering. But mothering raised after delivery and they started to ask how they can see their babies and they wanted them, and why they can't have their babies, and many sad feelings were raised up at these moments”. (B249E).

”I knew that they will take the girl. And they will prevent me to see her. Please let them make me see me my daughter it's very sad, I love her. Why do they do that to me why?”. (A4H24).

5.5.1.1.5 Lacking trust with men:

As a result of having these harsh experiences, women lost their trust in men and considered them as the ones that women have to be careful when dealing with them.

"They have not to believed men because all of them are bad and dirty; they just think about (sex)all of them will abandon her if the girl had any wrong relation with them ...there is nothing called love in this life; all the men are the same; we just want love, affection and to be understood, but men just want to enjoy themselves; they never know what is love ".(A7R26)

5.5.1.1.6 The women hopes

The women hopes after delivery included as shown in figure (5.4)

-Looking for marriage

While marriage is a relationship between a husband and wife to have babies and share care for those kids, most of the participants recognized that the serious social experience they passed thorough can affect or even prevent this need to be fulfilled. Therefore, data in this study showed that marriage was one of the most concerns of interviewed women. Thus, most of the participants revealed that they wished to marry after this experience; some of them would like to marry the perpetrator especially those whom they are emotionally attached to in order to continue their life and to make the baby grow up with his parents.

“If he confesses his fatherhood, we will marry and I will take the baby and everything will be different even me”. (A2,R,29).

“I need to rest and to go out from here and to marry. I want to bring my kids with me”. (A3,S,28).

-Seeking for children

There is no stronger love than what the mother feels towards her children in normal life, and how it will be if this mother was separated from her children for reasons related to her; it will be complex varied emotional difficulties such as ; self blame for missing them, worry about them, and feeling guilty:

“I mean in this month who will take care of my children. No one will feed them like their mum. I am worried about them”. (A5,M,31).

“I have one boy and one girl. I swear in the name of God that I love them and I miss them”. (A3.S,28).

The consequence of pregnancy outside of marriage had its impact on children which compounded the women’s emotional suffering for losing their children. For example, one of the participants who was divorced as a result of having sexual affairs with a man was prevented from seeing her children. The following emotionally charged excerpt indicated the level of suffering and regret of women for carrying the full responsibilities of destroying her marriage and the life of their children.

“Since that time, I didn't see my children; he prevented me from that. I feel sad. I broke my home by myself. Their father threatened me if I asked for my children by court, he will scandal me by showing document that he had secondary infertility and that he could not have a baby and if my family knew they will kill me. I don’t know what to do so my children equal my end of life "crying"”. (A6F35).

-Wishing to continue Education

The finding of this study showed that women with pregnancy outside of marriage were prevented from continuing their education; therefore, most of the participants expressed their wish to continue their education.

“Do you think my parents will allow me to return to my university after what happened with me!! I wish to continue my education, and to graduate with my colleagues” (A1GH22).

“As you can see, the education was my only hope in this life. I lost it after what had happened. My mother will never let me go outside the home, so how will she agree to send me to school after what happened”. (A8,K,17).

-Changing personality and looking for a new beginning:

The majority of the participants after the difficult experience of pregnancy, revealed that they need or wish to change their personalities in order to be more straight or to be more strong. Some wanted to have a normal life that any woman wishes to have, and/or to change all the conditions around in order to start with new life. This harsh experience had its effects on women’s personality.

“I start feeling that I have to be more clean after getting birth. I knew that what happened with me was because of my mom and my uncle. I didn’t like to be like what I am now. I wish to be like any girl living a normal life, and loyal to my husband”. (A7R26)

“After getting birth and after my husband will be free of the prison, I will convince him; to live alone far from all the extended family, because I can't see him (perpetrator) I don’t want to see him; I never want anything to make me remember him. I wish to travel away from all this country. I never want to see him all my life because he will remind me of a disgusting issue. Pray for me to forget and to be able to face the people around and to face my husband”. (A5M31).

5.5.2 Physical effects on the victims

The physical effects on the women also emerged from the interviews with women and professional co-workers as shown in figure(5.4)

5.5.2.1 Unsafe Abortion attempt, physical abuse /bleeding

One of the strategies that was adopted by women at the time of realizing about pregnancy was aborting their children. From the women’s point of view, their critical decision to carry out abortion was in order to feel psychological comfort and not to be blamed by others. It is worth mentioning that most of the participants decided whether by themselves or by force to abort. Their failed trials were done with the help of their closed kin such as mothers, sisters, friends or even by the perpetrators themselves. Knowing that such attempt of unsafe abortion is critical to their health, this did not deter them and their families to make these decisions. It seems that, women and their families found abortion as their only choice in order to avoid a disgrace of family reputation:

“In the 1st week I started to hit my abdomen, jumping, letting the kids jump on my back, I started to do hard work at home to put effort on my body, by lifting heavy things, but without result. I went to the pharmacy to buy pills for abortion, but the pharmacist refused. I started to have an access to the internet to watch YouTube video, then I saw that the ancient people used the rolling pin and I did it by my finger”. (A6F35)

As reported in the above findings, some of the participants admitted that unsafe abortion was not their decision but it was their supportive person’s decision like sister, friends or perpetrator or it was a result of beating them, which led to severe bleeding.

“In fact, I suffered from many forms of physical abuse by my mother and uncle from mother’s side, then I started to have severe bleeding which forced them to send me to the hospital in the same week that he (the perpetrator) married me ... I have been abortedGod will not forgive him for that”. (A8K17).

Another participant revealed a similar experience as she was severely beaten by the perpetrator after she informed him about the pregnancy. He blamed her for getting pregnant. Therefore, he decided to unsafely abort her despite of its health consequences on her life and knowledge of its negative outcomes.

“He started to hit me on my abdomen. I felt killed because of severe pain but without result nothing was coming out”. (A11KH33).

The above mentioned result of unsafe abortion trials was supported by professional co-workers who mentioned that this decision was the first action and solution of most of women and their families. Again, fear of shame and social pressure were the primary justification of families’ decision of making this decision:

“They reached our institution at the time there was no other solution but continue the pregnancy, after many trials by her, her friends, her family and the perpetrator to abort her by unsafe methods. As you know the Holy Family Hospital (HFH) is a catholic Hospital and abortion in all of its forms is forbidden by the hospital polices, so the victim was susceptible to many health problems before reaching us like unsafe abortion consequences”. (B2,49,E)

5.5.2.2 Health problems and somatic complaints

It is known that pregnancy made many changes in the woman’s body and hormonal levels and homeostasis; these changes can be more exacerbated if this pregnancy is compounded with serious social problem like pregnancy outside of marriage. Some of health problems

were related to lack of antenatal care, iron deficiency anemia, bleeding, general fatigue, heart burn, weight loss, loss of appetite, difficulty of sleeping and increase of cigarette smoking.

The previous health problems were revealed by the majority of the participants and coworkers after the pregnancy outside of marriage. As a result of fear of a bad reputation, seeking antenatal care was difficult for women in order to not be discovered by their close social network which caused health consequences. The following information about health consequences were reported by all participants in this study.

“No my mother didn’t notice, but I lost too much weight. I stopped eating, what I just wanted was to continue sleeping, so my mother started to be worried about me. My hemoglobin level started to be 8; I felt dizziness and fatigue. I never took any iron supplements that the physician prescribed to me after abortion, because I wanted to die, Actually, my mother didn’t bring it to me. I never ate good diet, even if the food is available, I had no good appetite as you see me I started to be smoker”. (A8K17).

By the same token, the coworkers stressed that the participants’ experiences towards their health status and inability to seek medical help showed the complexity of the situation that they faced in light of restricted moral values of getting pregnant outside of marriage. Professional co-workers reported various health complications and how this endangered woman’s health including antepartum bleeding, and premature labor related to lack of antenatal care, in addition to the ineffective postnatal care related to short time of hospitalization, as a result of their fear of being seen or discovered under the umbrella of fear of bad reputation:

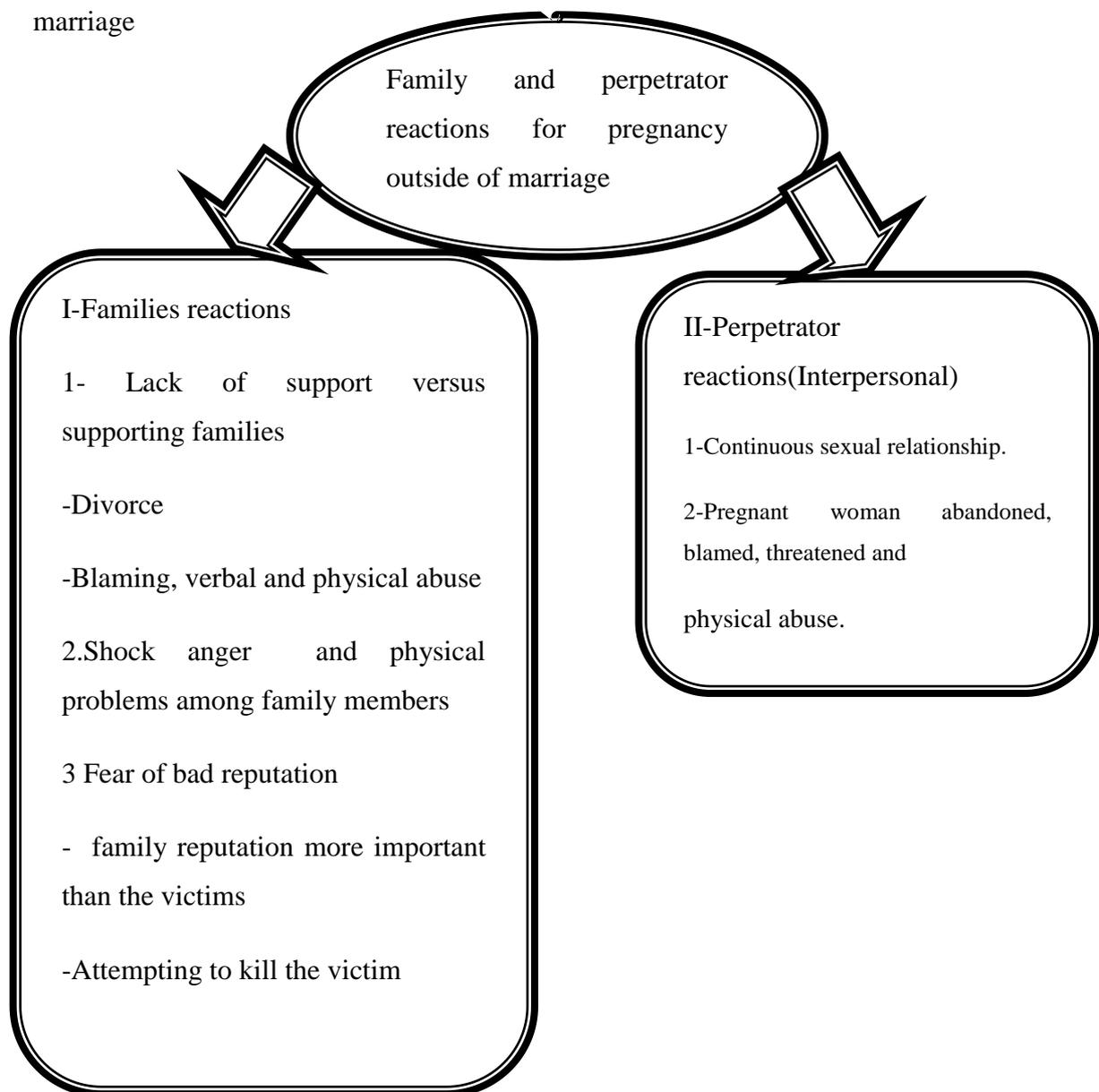
“Most of them came to the hospital with anemia, premature labor, or antepartum bleeding because of no or lack of antenatal care, and I can add that those women never stayed in the hospital enough during postnatal period to receive the care they needed, because their aim was just to deliver and leave the hospital as early as they can not to be discovered by others due to their concern about the family reputation”. (B5,45,F).

5.5.3 Family and perpetrator reactions (Interpersonal)

The family is a major social institution that directs much of a person's social activity. It is a social unit created by blood, marriage, or adoption, and can be described as extended (encompassing other relatives) or nuclear (parents and children) (Fields et.al.,2001). Additionally, it included the extended family members because of the collectivity nature of

the Palestinian society. Therefore, extended family members such as uncles, aunts and cousins can make decisions and interfere with nuclear family business. While the family in Palestine is the basic unit of the general society, it is important to understand how pregnancy outside of marriage affects families and siblings as well. In this research, fear at family reputation was the main theme that describes families' response to their female relatives' pregnancy outside of marriage. Eight subthemes were emerged regarding the reactions of the family members (whether close or extended family members) after pregnancy outside of marriage as shown in figure (5.5)

Figure(5.5) represents the family and perpetrator reactions to pregnancy outside of marriage



5.5.3.1 Lack of support versus supporting families

The majority of the participants in this study reported lack of support from their families after they became pregnant outside of marriage; one of those participants summarized that lack of family support before and after pregnancy:

“My brother is not at home; the other one is addicted; this is what we gained from occupation. No one from my family is standing beside me for all my life, not just after pregnancy but before also, everyone is living alone in my family”. (A2R29).

Lack of support from the family was reported in many forms, physical, verbal and psychological abuse, abandonment and blaming the participants. It is worth to mention that mothers and sisters also inflicted abuse upon women. This indicated the cultural sensitivity of pregnancy outside of marriage and its effects on all family members' image inside the society:

“My parents sent me to my uncle's home who made me hospitalized for two days due to huge hitting I faced from him”. (A7R26).

“My mother knew while I was in the 5th month of pregnancy; when I told her she reacted in very cold way telling me "manage by yourself". When I told my sister, her husband started to harass me because he is bad man. When I told my sister about her husband harassment she kicked me out her house”. (A2R29).

“The woman will be left alone.” This recommendation was reported by the woman who was divorced because of her pregnancy outside of marriage; her brothers were not supportive of her and the husband was abusing her; she was living in her sister's home; her sister was the second wife; the perpetrator was the son of her sister's husband from the husband's previous wife. He made a sexual relation with her while she was living in her sister home. He promised her of marriage and then she became pregnant; she revealed that no one from her brothers was supportive, and they left her alone:

Never trust anyone, because life is difficult and everything will appear on the girl, and the people never feel with you. The woman has to take care of herself and of her children, and to be patient for her children's sake, because, no one will help; never your sister nor your brother. You will be left alone”. (A3,S.28)

Supportive families:

Although the majority of the family members were embarrassed by their daughters' pregnancy outside of marriage and were worried about how family, friends, and neighbors would react, some of them were supportive of their daughters. The primary justification of this was mentioned by professional co-workers who insisted that family members were concerned mostly about keeping the pregnancy private. Therefore, they provided a lot of support to the woman in order to find quick solutions as a way to protect family reputation. This was supported by the interviewed women and particularly those who were raped. They mentioned that their families provided a proper support and understanding at the time of informing them about pregnancy,

“When my family knew about the pregnancy, they became worried about me, and they stood beside me. My older brother was the one who stood beside me most and he helped me; if it were not for them, I would have been exposed or maybe my uncles would kill me. My brother left his work and came to help me; I swear in the name of God that I loved my brother too much. He came from abroad and we met in-----”. (A1GH22).

The data from this study showed that family members especially the supportive persons adopted difficulty to disclose strategy in response to pregnancy outside of marriage in order to keep the woman safe and to protect family reputation.

“My brothers told the people around us that "I went to another city to take care of my old grandmother who is 85 years old and she has Alzheimer”. (A4H24)

It is worth to mention, that the wife of the adulterer was supportive, and showed a non-blaming approach to women because of her fear of society attitude towards her. One of the participants mentioned that she was supported by a wife of the adulterer because she was concerned about the blame of her husband's behavior by the society, since the society always judged the women for their inability to satisfy their men's sexual drives, so this made men seek other sexual relations.

“In fact, no one knows but me, him and his wife even his son doesn't know. His wife stood beside me and she said that she was treating me as a psychiatric case; she did that because she was worried for her husband's reputation, and not to be blamed by others that she is not doing all her duties as wife that's why he had a relationship with me and so she supported me”. (A11KH33).

In addition, some mothers supported their raped daughters in order to not be killed by the extended family such as uncles and cousins:

As a consequence of the fear for family reputation, family members did a lot of effort to justify the absence of female relative while they were in the institutions.

“For my family to justify my absence from my home, my mother told the neighbors that my father who was in the(other Arab Country) he had an accident and I went to take care of him; this was in coordination with my father”. (A1GH22).

-Divorce

Whereas, the data showed supportive attitudes by some family members and particularly nuclear families, it also showed unsupportive attitudes mostly by husbands who directly divorced their wives when they knew about pregnancies outside of marriage. This was done because in the Palestinian society the husbands were considered outsiders and the original family usually carried the responsibilities of their women’s misconducts and the one who should be punished is the women. Therefore, by divorcing the woman, the husband restores their honor and reputation.

“When my husband knew, his face became unexplainable; angry face, he started to question me about when and how?? He asked me to see the doctor. He kept silent and then divorced me on the spot (in the hospital) and he said you have your family and they know how to deal with you”. (A6F35).

-Blaming, verbal and physical abuse

The data from professional co-workers showed that family members usually reacted by blaming women, abusing them physically and verbally whether they were raped, exploited or did this act on their free will:

“Many girls came to our station, while they were already being hit by their male relatives such as brothers and fathers and even they caused them bone fractures”.(B133I).

“In the case of incest; the family reaction and the way they dealt with the girl is almost the same. They blamed her and made her carry all the responsibility as any girl who became pregnant on her free will. This issue is very obvious and we noticed this when worked with families and women. This means that the girl is always blamed".(B249E)

“My mother continued to verbally abuse me every day by telling me proverbs like "the problems of females continue until death ",and telling many things as if I was the responsible and I wanted what happened to me; my father stopped talking with me, and he started to pray to God every day for my death by telling me:"God will break you as you broke our reputation”". (A4H24).

5.5.3.2 Shock and physical problems among family members

Given the strong influence of pregnancy outside of marriage in family members' reputations, it is not surprising to find that family members were emotionally harmed when informed about pregnancy. The data from this study showed that mothers, fathers and siblings were reported to having feelings of distress, shock and sickness and in extreme cases had stroke when they were informed about their daughter's pregnancy outside of marriage.

"My mother, brother and sister knew about that; and they were shocked". (A1GH22).

"In October, I didn't have my menstrual cycle. I thought that it was irregular. I never thought that I can be pregnant; I never had my menses in November, nor in December I told my middle brother; he start to be crazy and started to hit his head against the wall". (A4H24).

"My Grandmother had stroke since that time; she is bed ridden ever since and can't talk. My aunts and I take care of her". (A10S17).

5.5.3.3 Fear of bad reputation

-Family reputation more important than the victims

In this study, many reactions by the participants, their families, husbands and perpetrators had strong link to community beliefs about modesty and social image. For example, women and their families decision regarding avoidance of antenatal care was related to their fears of social stigma and linking the honor code to women's behavior. The patriarchal nature of the Palestinian society and its effect on considering the women the ones to protect family honor led to public beliefs that women should carry all the responsibility of being raped or exploited by men. For example, a 17 year old girl, became pregnant by her 35 year old teacher, who harassed her several times and she told her mother about this, but her mother did not believe or support her. However, when pregnancy happened, the mother physically abused the victim and the extended family members did the same especially her uncle who arranged marrying her to the perpetrator for short period of time just to convince others, that the family's honor is still intact ignoring the young girl's body and human rights in order to avoid stigmatization.

"They make me marry him, just in front of people, for family honor; my uncles stopped talking and visiting us after that, I just wanted the people to forgot what happened to me; all the neighbors, friends and relatives stopped talking or visiting us"(A8,17,S).

In relation to family reputation, many strategies were unconsciously or consciously performed by the families in cooperation with the institutions to find out the best alternatives and solutions in order to protect family reputation and prevent social rejection. In this sense and while the family reputation was more important than the victim as it was found in this study, many families avoided and ignored the general rights of those girls which can be observed and attained by the country's law through avoiding any involvement of the police. The majority of families and/or the participants kept a silent approach until there was pregnancy. Despite loss of virginity, family members ignored the abused woman's rights of prosecuting the adulterer. Therefore, families practiced no action response to the rape incident until the pregnancy was discovered. This fact showed the extent of emotional harm inflicted on the women who were raped and neglected emotionally by their families. It also showed the over concern of Palestinian families over reputation of family and insensitivity toward women's emotional needs. This is exemplified in the quote below which made it understandable why families chose not to report the rape incident to the police.

The data from this study showed that both family members and women were concerned about extended family reaction about pregnancy. This triggered extreme fear and again they found it difficult to disclose the pregnancies to anyone else and particularly the extended families.

“When my mother knew, she started to close the windows not to make my uncles hear us and then it will be a scandal for us”. (.A1GH22).

The professional co-workers from their long-term experiences reported that, the virginity loss can be hidden or repaired. This made the family overlook the issue of ignoring the assault of the victim's body and not attaining her rights as long as this act is not discovered; this is a clear indicator that the families were caring and still care about the reputation much more than their care of the women rights in the punishment of the rapist.

“But in relation to virginity, it can be hidden or even treated, and there are many girls who did the hymen repair, and hide what happened with them, even after delivery outside of marriage. Certainly, because families consider pregnancy a big problem that can't be easily solved or hid, losing virginity can be treated by any physician by payment of money. Sometimes I received many calls from women asking about virginity repair which is out of my job description and, for sure I can't refer them. The indicator for this is that the family doesn't care about the victim, her rights and her body as much they care about the family reputation. It is because pregnancy can lead to a scandal, but losing virginity is difficult to

be discovered until marriage and it's easy to repair it by what they call (hymen graft)". (B249,E).

Consistently, the interview with the police man reported that the family reputation was more important than the victim herself as he observed that losing virginity was not a problem to families until the pregnancy was discovered:

"So the family situation is very weak; they were very worried about the reputation. Finally they reached the point that they just want to solve the problem because they don't want any scandals. We need to work with family even more than the victim herself. Of course, they needed big confidentiality so as not to have bad reputation; once it happened, it will be difficult to be forgotten. In my opinion, no one can know about the virginity if it was lost but pregnancy makes many changes on the body, and there is a baby ; that all can never be hidden, while the reputation of the family is their most concern; that's why they came to us asking for solutions". (B1,33,I).

-Attempting to kill the victim

The data from professional co-workers revealed that women who approached the institutions or were brought by police were threatened by killing or their families tried to kill them as a consequence of fearing at family reputation.

"Because in our traditions, the brothers want to kill as a result of their uncontrolled anger when they knew about the pregnancy". (B133I)

The danger on woman's life was real because of social pressure and moral values of modesty and honor code which caused much embarrassment for family members and mostly for male family members when they did not follow the proper action against women who were engaged in this act.

Similar to data that were revealed from women's reaction in response to pregnancy, family members as a whole were reported to be excessively worried about families' bad reputation. There were many dimensions for family reaction, like difficulty to disclose.

Professional co-workers supported the above data, as in their long experiences in working with women who were pregnant outside of marriage. The members of the family as a way to keep good family reputation intact, they made many fake reasons to excuse the woman's absence.

"Of course, it's usual as we mentioned that this society is only worried about scandal, and bad reputation. That's why it's normal to find that the major concern of the family is the top privacy and secrecy, even more important than the victim herself". (B249E).

“The most important thing for the family is no one must know for the reputation and gloat; they are afraid that the mistake becomes known, but they don’t care about the mistake itself. Those cases were admitted to hospital under different reasons than delivery like ovarian cysts in order not to tell anyone about the issue”. (B545F).

5.5.4 Perpetrators’ reactions (interpersonal) toward pregnancy outside of marriage

The reactions of the perpetrators that emerged from this study were as shown in **figure (5.5)**

5.5.4.1 Continuous sexual relationship

The perpetrator reactions were reported by participants depending on the situations; some participants revealed that he continued the sexual actions even after the pregnancy occurred, and kept promising women of marriage as a way to make them continue the relationship.

“But pregnancy didn’t prevent him to have sex with me. We continued but he continued to tell me to ask for divorce after delivery in order to marry me and make the child grow up with his biological father”., (A6F35).

5.5.4.2 Pregnant woman abandoned, blamed, threat and physical abuse

The majority of the participants revealed that they were abandoned by the perpetrators and /or lovers after discovering the pregnancy and that they were extremely angry at them. This might be explained as a way to make the woman hold all the responsibilities by herself, and to protect himself from any social consequences or blame as mentioned by the interviewed women.

“He didn’t agree to give the baby his name, and he stopped answering the phone and asked me to manage by myself by abortion”. (A2R29).

“He is the one who told me that he loved me; now he denied that he touched me”. (A8K17).

“I suggested telling my sister, but he asked me not to mention his name. In fact, he was a scoundrel with me and abandoned me. His main concern was himself”. (A5M31).

Ironically, most of the participants reported that they were blamed by the perpetrators for getting pregnant, and for aggravating the sexual drive of the perpetrators, especially if the perpetrator was one of the family members, hence, the women was always the one to be blamed:

“After he started to hit me, he told me that I did a scandal for the family; he started to close my mouth for he didn’t want me to shout. I saw another one in front of me but not my uncle. He is the one who did it. He wanted to kill me. He said that I destroyed the family name. I frankly don’t know what will happen to me afterwards. I was afraid that he would continue to believe that this pregnancy was not from him. He always said: “how can you become pregnant from one time". While he was hitting me, he was blaming me to wear such clothes (he means that my clothes provoked him) if you tell anyone, I will kill you”. (A11KH33)

This category was confirmed by the professional co-workers who mentioned that the Palestinian society always put the responsibility for victims of rape on women because they carried the full responsibility for sexual actions:

“Even if the girl was a victim of rape, but no one will give her any excuse; the society and the family always blame the girl for being raped even if the perpetrator was her brother. The girl is always blamed in our society”. (B4,52,A).

Threat and physical abuse by the perpetrator were also reported by most of the participants especially if the women failed to abort. The following emotionally charged excerpt showed the greater levels and constant fear that the victims had for their life:

“When I was disobedient with him, he hit me especially on my abdomen, and threatened me, but God wanted this baby to come to this life”. (A5M31)

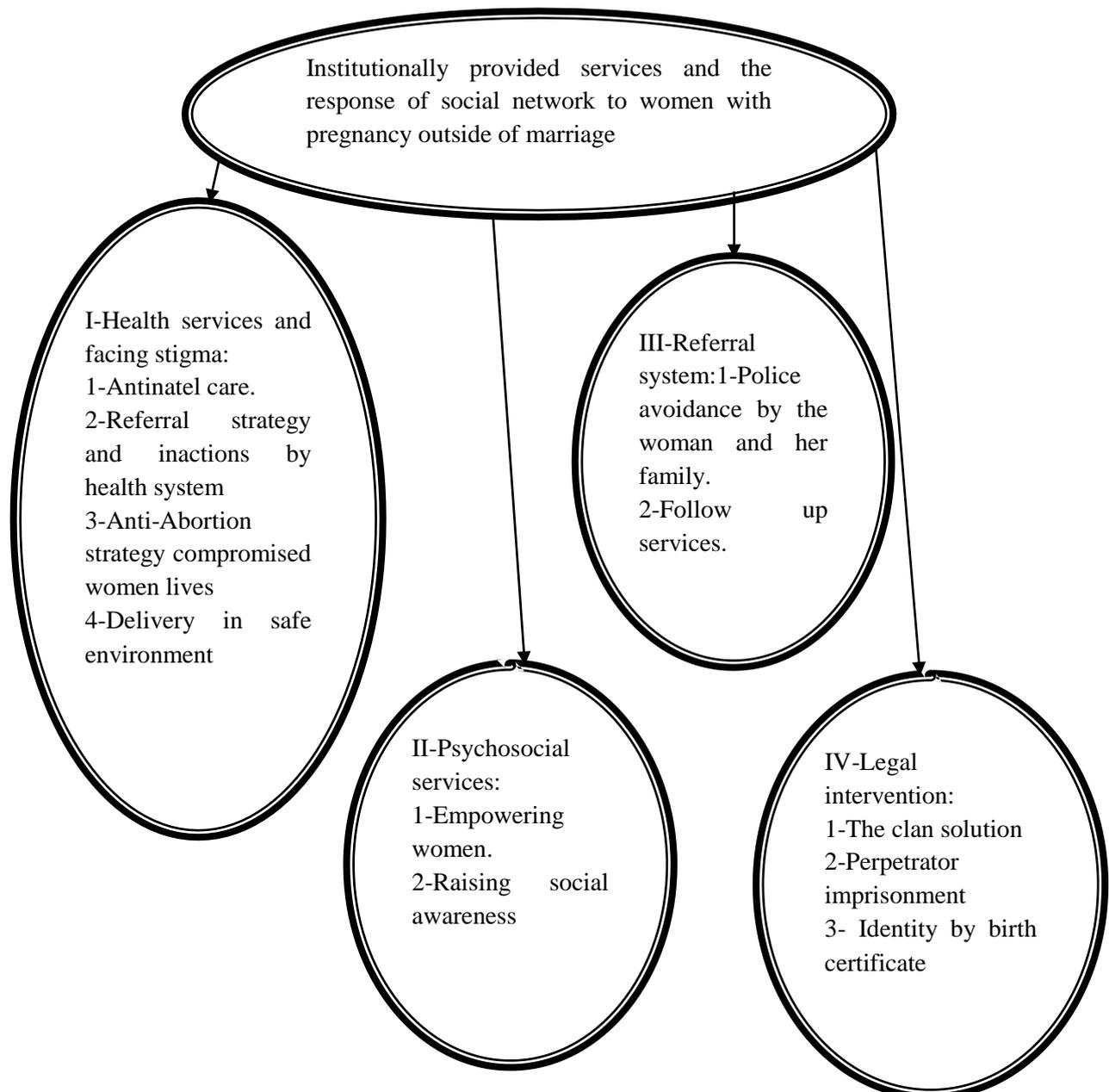
The participant who was raped and became pregnant by her uncle reveals that he threatened to kill her if she reported him to the police or told anyone about his actions:

“My uncle admitted that he had committed a crime. Now he is in the prison. He swore to me that he would kill me. I am scared I don’t want to die”. (A11KH33).

5.5.5 Institutionally offered services and response of social network to pregnancy outside of marriage

The services that were offered to those women by institutions and social network as shown in figure (5.6)

Figure (5.6) represents the institutional provided services and the response of social network to women with pregnancy outside of marriage.



5.5.5.1 Health services and facing stigma

While pregnancy outside of marriage may have lifelong consequences, including emotional trauma, lasting physical problems or other serious health problems like any pregnant woman who experiences pregnancy within marriage frame, and even death, Pregnancy complications can be much more frequent in pregnancy if there is no antenatal care. As revealed from the interviews, health services subcategory include:

5.5.5.1.1 Antenatal care

For some women, pregnancy outside of marriage might make them feel too inhibited or ashamed to disclose or to seek services. Seeking services may be one of the ways that can make the pregnancy discovered by others; this could create many serious social problems (such as stigma) for them and their families:

“I was afraid to go to any institutions in order to not to be scandal, because the institution will keep me in, and all the people will know about my pregnancy; I am afraid to be stigmatized”. (A5M31)

The majority of the participants and the professional co-workers in this study revealed that avoidance of antenatal care in the case of pregnancy outside of marriage was related to the complexity of disclosing the pregnancy to social network. As mentioned previously, both women and their families did not consider women’s health, as their main concern and priority in the light of their tremendous fear was their reputation. Additionally, families were thinking about terminating pregnancy more than curing or saving it.

“We offer her antenatal care and lab test, but it is never used or asked for by women or their families because the basic concern for them is not to continue this pregnancy but to abort”. (B3,32,M).

However, when women are admitted to the institutions, the institution usually offered the needed antenatal care especially if those women were sheltered until delivery time:

“But when they are admitted to our center, waiting for delivery, the usual check up and antenatal care will be offered to them here in the Crèche, by the hospital physician, multivitamins are also offered for them in addition to ultra sound”. (B2,49,E).

It was reported by the participants that the given care was insufficient and the professionals carried the same cultural beliefs about modesty; therefore, they judged the women, and insulted them. For example, some nurses and some doctors gave them bad impressions especially when they dealt with them as a social case by treating them in a disgusting way,

gossiped with each other at them and showed curiosity. This might be one of the reasons why the women avoid receiving antenatal care.

“In the hospital, when they knew that I am social case, they start to gossip about me, some of them tried to ask me about my story, I was very frustrated and tired so I avoided talking to them, but some were good with me”. (A7,R,26)

“All were dealing with me as if I were a bad girl; when the doctor and the nurse examined me, they started to gossip and to talk in another language so that I will not understand what they were talking about”. (A11KH33)

“Also I felt that the physician was looking at me as if I were a bad girl. I don't like to do check up at all”. (A3,S,28).

On the other hand, the women in such situations thought about the solutions of pregnancy outside of marriage, so they did not seek health services as well to minimize contact between the women and the private doctors:

“I mean the health status is not important; you can see the women dying but they were not concerned about their health; just she wanted to solve her problem. I mean she never went to the doctors to seek treatment”. (B1,33,I).

5.5.5.1.2 Referral strategy and inactions by health system

The data from professional co-workers provided detailed information about the implemented referral procedures for women who seek health care showing that police roles would be stopped directly after admitting women to these health care centers

“As I mentioned before, we don't have any interference level in our association because our role will end if there is any level of danger or threat on the women; then the women will be referred to social affairs and governmental associations. After that our role is stopped”. (B3,32,M).

As reported by professional co-workers, strategies for referral depend on priorities and needs of women; therefore, women were sent to institutions that provided them with health care and safety. The care that was provided to women included providing antenatal care, care at time of delivery, postnatal and follow up care when it was applicable.

“Some of those women with pregnancy outside of marriage reach us by referral of social affairs then to the " Crèche " because we are the semi official place for the antenatal, delivery and post natal care and the follow up of each case”. (B2,49,E)

“The hospital informed the police, and they sent me there, then to the safe home in Jericho. When I became 8 months pregnant, they brought me to Mehwar in Beit Sahour”. (A7,R,26).

In addition, the data showed that women were referred from private clinics as a means to provide safety for them.

“The physician said: do not be scared there are institutions which can offer you help, and he started to calm me down; he said that there are social affairs and Holy Family Hospital I have to refer you to them. When I came to HFH, they referred me to Mehwar and they said that I have to stay there”. (A5M31)

However, data also showed that some physicians provided no action when they discovered pregnancy. This might be explained by their fears of social consequences or because they hold the same traditional beliefs and prejudgments about women:

“When the physician told me that I have a 27 week fetus in my abdomen, I lost my conscious. When I was awake, I went home. The physician didn’t do anything. May be because he is also the same as them”. (A1GH22).

“I tried to abort, but I failed; this was because of Dr. (-----) he didn’t help or did not want to help me”. (A2R29).

It's clear that there is no role of the private clinics in referral system; it made this woman go home while there was a real danger at their life. This no action procedure reflects the traditional beliefs about women who were engaged in sexual acts and the effect of stigma on even medical and health professionals who may endanger women’s life by their inactions.

Its reported by the professional co-worker that despite fear of stigmatization and family reputation, some women approached institutions directly because of the advices that they received from their friends or relatives or the offered free hotline services for women in danger.

“But some of the victims reached our organization in all its branches in the West Bank by themselves. We advised them to come to our institution through talking on the free lines”. (B3,32,M).

It's also reported that some of the cases reached the institutions on their own and without any referral.

“ Or she will come by herself without any referral. and this was what happened with the cases I dealt with”. (B3,32,M).

Some of the professional co-workers related the direct way of coming to the institution to many social considerations especially fear of bad reputation and stigmatization.

"Some cases reach us without referral, but with one relative, due to the fear and loss trust in others; even those victims who reached our institutions could never think or decide, because of fear, and it is known that the one who is under stress and fear never thinks".(B2,46,E)

5.5.5.1.3 Anti-Abortion strategy compromised women’s lives

Almost all of the participants thought about abortions when they faced the reality of being pregnant outside of marriage; however, the data from this study showed that institutions’ policies were clear in refusing abortion of women.

“The doctor refused to abort me, and she said it is forbidden by God, he (baby) was completely formed, he is 3 months now and when we went to another doctor he said the same thing”. (A5M31).

However, anti-abortion strategy led to several consequences as women should stay in the shelter home till delivery and this could compromise woman’s life if the public knew about the pregnancy and her "misconduct". This could explain why women sometimes avoided seeking help from women institutions and attempting to abort themselves despite of its health consequences:

"If I knew early about the pregnancy, maybe it would have been better so I can deal with, or to abort which is better than staying here; imagine if the neighbors knew about it, it will be big scandal"(A1,GH,22)

5.5.5.1.4 Delivery in safe environment

Offering a safe and healthy place to deliver those women with pregnancy outside of marriage is one of the measures that are offered in addition to many other social services.

“For sure the Holy Family Hospital, Bethlehem in cooperation with sisters of charity and social affairs, delivered those cases in healthy and suitable circumstances as any pregnant mother; this is good for them”. (B5,45,F)

Thanks to the availability of safe and healthy environment, professional co-workers mentioned that they had a full awareness of social sensitivity of this issue and especially if the victim was not married by choosing the mode of delivery in such cases, and he reported that the cesarean section was the preference for many considerations for the victim’s future:

“Then delivery plan be will put, and most of the single girls preferred to deliver by cesarean section C/S; also the hospital offers newborn examination after delivery by the neonatologists who is present at the hospital”. (B2,49,E).

5.5.5.2 Psychosocial services offered by the institutions

One of the professional co-workers reported that there was shortage or even no special psychosocial support offered to those women due to the short stay period for such cases in the family protection unit, and their referral to another station.

“In fact, the psychological aspect is not our job; we transfer them to the specialists in order to work on their emotional difficulties”. (B1,33,I)

This was also mentioned by another professional co-worker who indicated that the limited time they had in working with women made it impossible for them to provide the necessary psychological help.

“The time is short to work on the psychological aspect, because the victims do not stay in our institution for a long time; they just come for check up before delivery; they don't stay or take shelter here in the Holy Family Hospital, but in Social Affairs Mehwar. We are professional social workers; we try to assure the victims, to solve the problem and follow them up and protect them. Most of the problems they suffer from are fear and loss of hope about their future”. (B249E).

One of the professional co-workers summed it up by indicating that the psychosocial aspect is done for such cases by keeping their privacy and not even trying to know their story because it’s forbidden by the rules of the institution to do so. She also added that the midwife can be a good listener if those victims wanted to express their pain; it is the

victim's decision to talk or not, so the midwife is not allowed to talk or even ask about the women psychosocial needs. She clarified that the midwife's role is just to make her deliver safely without paying any attention to other psychosocial services because it is not the medical team job. On the other hand, she also revealed that there were some medical teams in the same hospital who psychologically abused those women by giving them bad impressions and especially by calling them "social cases" which is a special name given by the hospital for such cases. This labeling indicated extreme prejudgment of them.

“We have to keep a high level of privacy; it is forbidden to have a conversation with them or even to ask about the case of the pregnancy. This is one of the hospital regulations especially when the hospital labels them as “a social case”. We don't talk except when the victim herself wants to talk or to express the pain she suffered from after the violence she faced ; we can be good listeners, while some of them are just silent, so we respect this silence. But some of the colleagues do not respect the hospital rules regarding this issue so they try to know the stories due to their curiosity without paying any attention to psychological aspects of the victims and they deal with her as if she were a bad girl”. (B5,45,F).

One of the interviewed professional co-workers revealed that the central philosophy is protection, enlightenment, increase of self esteem of the victims of violence whatever the type of violence is. Psychosocial support is given in the center by the social workers who work on women empowerment, and legal guidance is provided by a lawyer.

“Our role is protection, enlightenment, increase of self esteem, psychosocial empowerment, legal guidance, and psychosocial guidance and support”. (B2,52,A).

5.5.5.2.1 Empowering women

Regarding women empowerment, the professional co-workers elucidated that there were many programs in their institutions intended to meet this goal by giving those women psychological rehabilitation and training in several aspects like computer skills or hair styling so as to give them a chance to gain their livelihood and to be independent economically. This was done in order to support those women to continue with their lives.

“There are psychological programs to rehabilitate women, to increase their self esteem and empower them. There are professional programs like coffee given to women during the time of shelter., We try to give her a chance for having her own livelihood and we work as network of institutions to make her advance”. (.B4,52,A).

From the women's side, they revealed that institutions were supportive and provided them and their families with proper strategies of protection from killing.

“The workers are very good with me; they help me in everything, and they taught me how to be strong woman; it is good that there is a place like this or I would be killed”. (A7R26).

5.5.5.2.2 Raising Social awareness

The professional co-workers brought to light that to spread the awareness about violence is a very important aspect of primary care to prevent such problem, especially in the marginalized areas adjacent to the apartheid separation wall; it can be achieved by many ways; pre marriage counseling and lectures about violence in all its forms based on their observations. The majority of these problems came from conservative and closed societies.

“As I told you we work on empowerment and debriefing meetings. Sometimes we interfere to prevent violence before it happens by spreading awareness in the form of consultation before marriage, sessions related to violence in the marginalized areas close to the wall. It is noticed that most of these problems came from those areas. We held many meetings for debriefing of the women's feelings especially those who experienced harassment before they reached pregnancy outside of marriage to prevent that before it actually happens”. (B3,32,M).

5.5.5.3 Referral system and Police avoidance by the woman and her family:

In relation to referral of those women, the data collected from the participants showed that most of them were referred to the right place by one or more party whether it was health care center or police station then to Ministry of Social Affairs (MOSA). However, avoidance of police was clear. According to data collected from the woman herself or her family members, it is indicated that women considered involvement of police as a major threat to them and their families; therefore, police involvement should be avoided.

“No, I never went to the police, just to HFH... No, if the police knew what happened, I will have scandal”. (A3,S28)

“I heard the word police, so I was scared and I said that scandal will occur then I started to beg them not to tell the police”. (A5,M,31)

One of the participants reported that her avoidance of the police is related to the bad impression they gave her about her situation as the women accused some police men of harassing them sexually:

“Even the police can harass us,,, it's better to avoid them”. (A2R29).

As mentioned by some professional co-worker that, some of those women were became pregnant by that on their own will in order to marry the man they loved by putting her parents in front of a reality; the co-worker professional considers this behavior as shameless or vulgar.

“Some of them came to put their parents in front of a reality so as to let her marry the man she loved. I called that vulgar. We saw that many times in order to marry her lover by the solution of the clan. Then you found them spoiled and got used to do whatever they want”. (B1,33,I).

Some participants revealed that the professional co-worker in the police station didn't show any respect toward them or even they didn't believe their complaints as well:

“In the police station, when we told them about the pregnancy, they didn't believe me, and they deal with me as if I did that on my own will. They justified this by saying: 'why you didn't inform us at the time of rape and before discovering the pregnancy’”. (A4,H,24)

5.5.5.3.1 Follow up services

Post-shelter follow-ups are one form of intervention which are offered by professional co-workers to provide support and advocacy to women who get out of the shelter to establish a new and safe life and to facilitate their adaptation with the external society, and to implement the empowerment that the center taught her through continuous contact with women either by both phone and visits her to check and support her successful involvement with external society, and they call this "weaning period".

“Of course after the victim is discharged from the home after rehabilitation, we continue contacting her by phone for at least six monthsand we call this period of time as weaning time”. (B4,52,A).

5.5.5.4 Legal services offered to women with pregnancy outside of marriage

Legal services that are offered to women with pregnancy outside of marriage as indicated in this study as shown in figure (5.5)

5.5.5.4.1 Clan solutions

In some cases of pregnancy outside of marriage, the clan solutions would attempt to negotiate a solution, whereby the family guarantees the woman's safety, or they find a relative who will take the woman in and protect her. Some solutions focused on forcing the perpetrator to marry the victim, as a means to protect family reputation especially if she was pregnant.

“And sometimes such stories are solved by clan. And they make the perpetrator marry his victims and cover the story”. (B4,52,A).

The coworkers reported that they facilitated the clan solution. The mostly preferred solution is to let the adulterers marrying the women according to the clan judgment:

“We tried to solve it smoothly without any problems, or by making them marry the perpetrators; it happened many times for the baby’s name. It’s more complicated if there is pregnancy. Investigation with the accused will be done if he did not deny. The solution will be to make them get married, and the issue will be referred to the clan solution for the baby name; they make them marry if the girl agreed”. (B1,33,I).

Ironically, some of the participants appreciated the decision to marry them to the perpetrators even if they felt disgusted of them. Although, some of them were divorced after one week, it released them from any social consequences and judgment:

One of the professional co-workers revealed some measurements that are taken by her institutions in corporation with clan and/or police in relation to women discharge plan for safety after sheltering due to pregnancy outside of marriage or any form of violence. This highlighted the role of the clan (AL-Ashair), as legal services that are still adopted and highly appreciated by professionals and the public. The plan included finding a male relative in the family to promise to protect woman life after discharge:

“...Also in building the plan of survival after getting birth, it will guarantee her return to the external society without any danger; this is carried out with the participation of the center, family protection unit and the governor who represents the president. For sure the clan agreement will be with the key person in the family who can constitute the most dangerous person on the women like the father, the eldest brother, the grandfather, the oldest in the family.” (B4,52,A).

5.5.5.4.2 Perpetrator imprisonment

The data from this study showed that the preference of woman’s family or the victim herself was to keep silent, but when the rape is documented by the police, some perpetrators are sentenced for their crime:

“If rape is proved without pregnancy, the perpetrator will be in the prison; rape is a crime which equals 7 years in prison. One of the victims that we worked with, still her brother is in the prison, waiting until investigation. "This is known as incest which identified as the sex practice with those who have family relations and have same roots like brother, father, uncle, by the consent of both although the female over the age of 18".(B1,33,I).

It’s noticed that rape with pregnancy is excluded from legal punishment to escape social criticism and preference not to disclose pregnancy and rape incidents and instead marrying the victims to perpetrators. This left the perpetrators unpunished and left victims of rape and especially those who became pregnant dissatisfied and relied only on God for revenge:

“They took them for short time to the prison but they got out by bail (money payment) by good lawyer, nothing was proved to make them guilty in front of the police, as I told you they are "mafias".....(crying)...God will punish them”. (A4H24).

5.5.5.4.3 Identity by birth certificate

One of the most important legal considerations as services offered to the women and her baby, who was born outside of marriage frame is giving this baby a birth certificate. This verifies his/her identity, while this baby will stay in "Crèche " until the marriage of both the mother and the perpetrator. One of the professional co-workers revealed that according to the policies of the institution and the Palestinian Authority, the baby’s right is to have a birth certificate; this certificate has to be given for both unknown parents e.g. the babies

found left in the street “ foundling”, or the one with just a known mother. The professional co-worker emphasized that those babies will take fake four names and birth certificate.

“The baby takes a birth certificate in coordination with the official institutions, and our institution as "Crèche" is the responsible one for emergency intervention in coordination with family protection unit and Ministry of Social Affairs. A birth certificate is the baby’s right; it's given whether the parentage is known or not; this baby will take four fake names”. (B2,49,E).

The women who faced the experience of pregnancy outside of marriage reported a feeling of satisfaction and comfort as their baby is given a birth certification.

“It's enough that they will make me give birth and they will take care of the baby girl. They will take her and make a birth certificate for her”. (A4H24).

The professional co-workers clarified the criteria for a baby to stay at the Crèche; those criteria that prevent his mother from going home with her baby but she could take him back if she married to the perpetrator and if he admitted that the child is his.

“If she is not married, the baby will take a birth certificate by decision and coordination of both the social affairs and the court, but the baby has to stay in the "Crèche", and the mother has no right to take the baby until the perpetrator confesses his parentage or by marrying the victim”. (B1.32,I).

The professional co-worker also revealed more details about legal services regarding the baby’s birth certification, registration and parenting. He reported that, if any married woman gets pregnant from another man not her husband, the parenting will be for the husband, not for the biological father. He added that, the parenting test (DNA) is not usual until there is homicide case.

“I have to stress that when the victim and the pregnant woman who gives birth outside of marriage in HFH(Sisters of Charity), our role is to inform and report birth which is the baby’s right; this information will include the real mother’s name. As for the father’s name, a space is left empty, but if she is married the name of her husband will be registered on this paper of information even if he is not the father because the law tells that;(The baby will be for the husband), until the husband refuses that but the husband has 40 days to reject it; if not the baby will continue to hold his name. This is the legal core law, also the (DNA) test to test fathering is not allowed until there is homicide issue”. (B249,E)

5.6 Summary

In this chapter the characteristics of the participants and professional co-workers were described, the finding of this study were also explored in details and it were supported by the participants own words in a systematic ways. The major themes of each part was discussed using the participants and professional co-workers coding, which presented the principal themes that emerged from the data. This chapter summarize, analyzes, and interprets the findings in the context of the conceptual frame work that was adopted by the researcher

Figure (5.7) consequence of pregnancy outside of marriage (A)

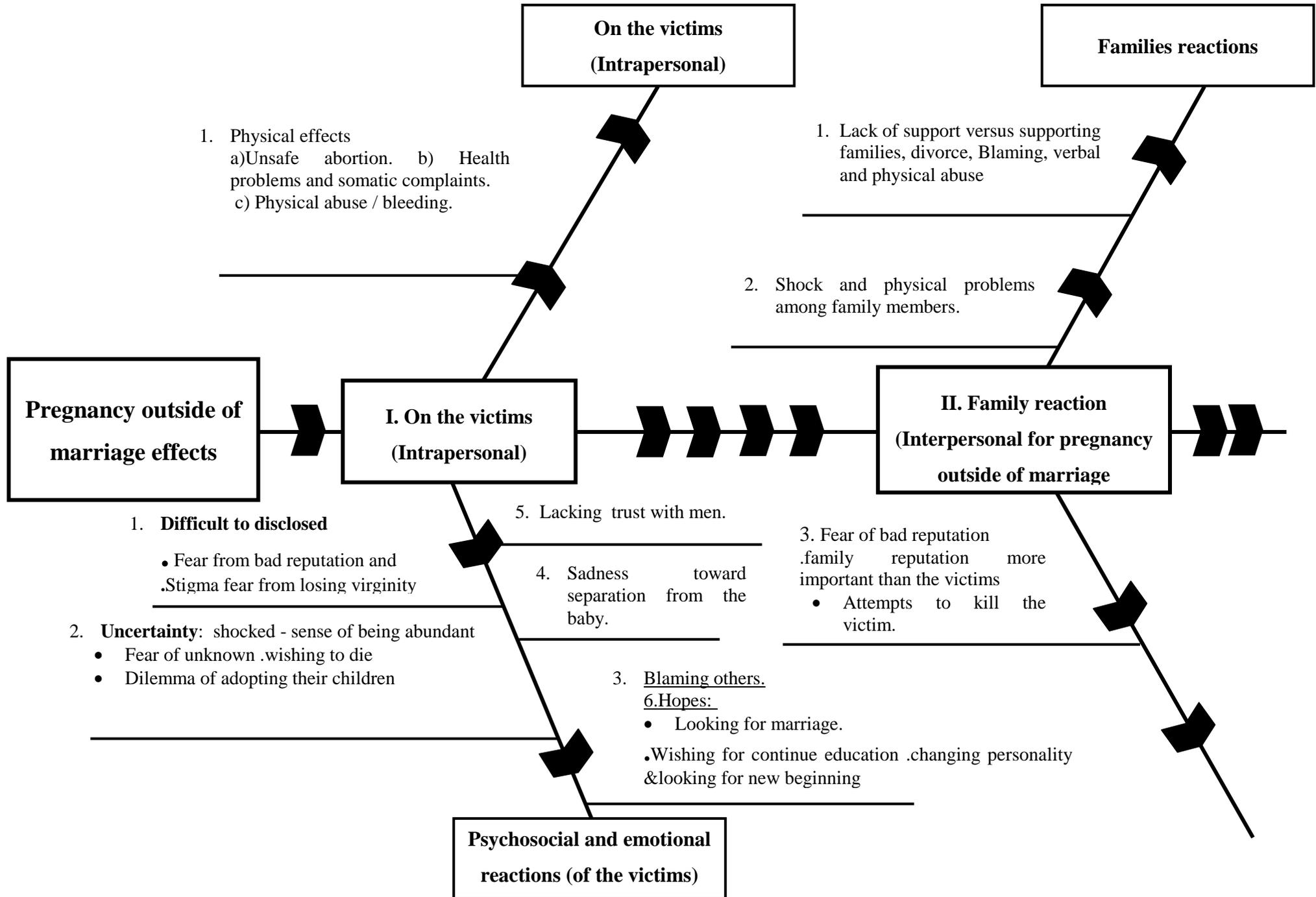
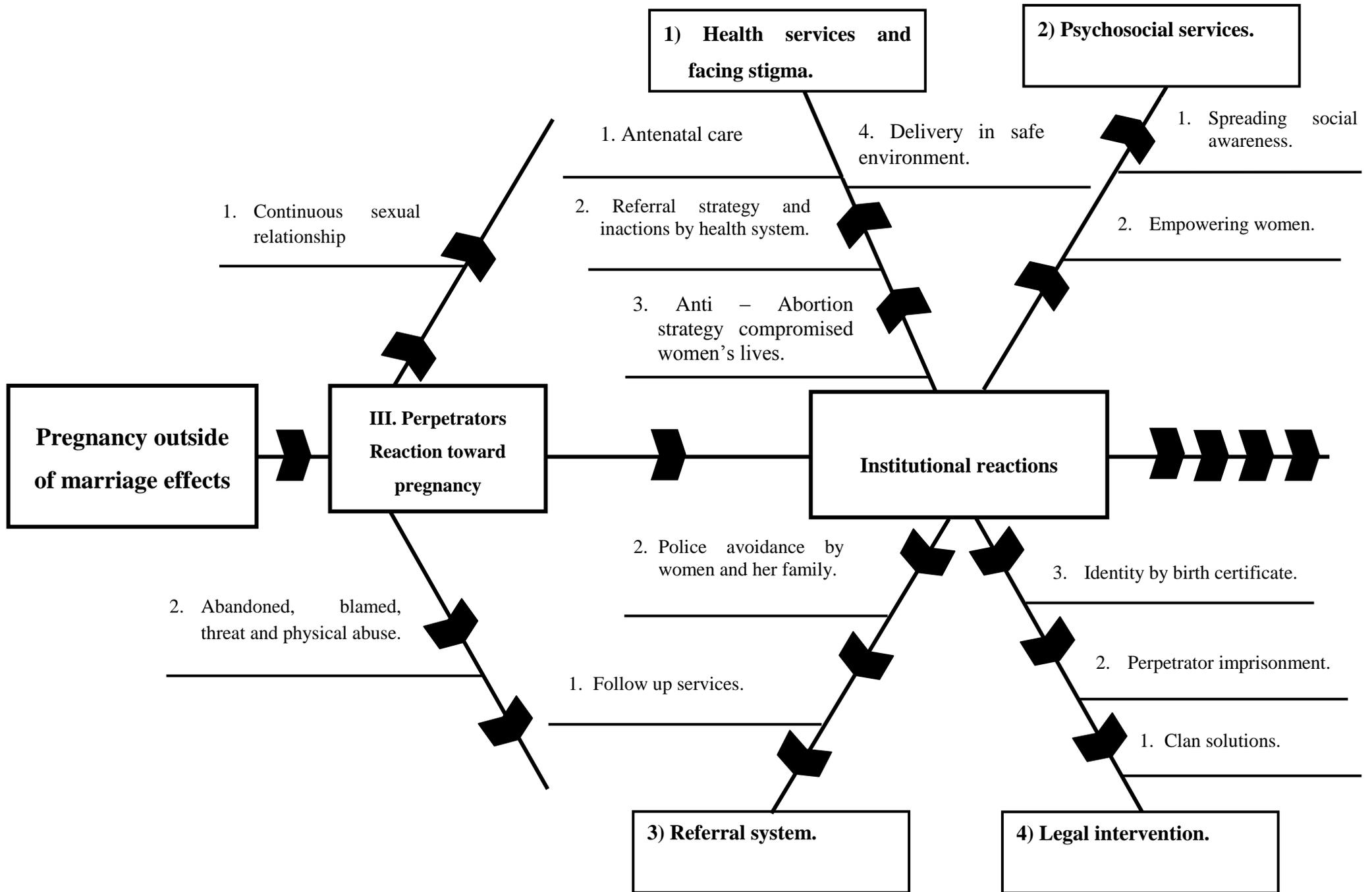


Figure (5.7) Consequences of pregnancy outside of marriage (B)



Chapter VI

Discussion chapter

6.1 Introduction

This chapter will provide a discussion of the research findings by incorporating both data collected from the women participants and the professional co-workers. The current study examined pregnancy outside of marriage, causes of pregnancy outside of marriage, explored the experiences of pregnancy outside of marriage in relation to the context of the Palestinian society and the services offered to those women by the Palestinian community. The discussion of the research findings was based on the women's own understanding and explanation of their relevant circumstances and experiences. This study also placed an emphasis on women's knowledge of their own experience as socially constructed, and dependent on the specific locations and processes of social interaction, where the Palestinian society and the series of factors have a significance role in influencing women's reactions.

The discussion in this chapter will attempt to link the findings of the experiences of women who are pregnant outside of marriage with a broader conceptual framework.

When writing about pregnancy outside of marriage among Palestinian women, it is also important to connect such discussion with the ecological model as well as the patriarchal and feminist approach. The data from this study showed that different factors contributed to the cause of pregnancy outside of marriage in the Palestinian society.

The meaning of pregnancy outside of marriage as it is understood by the participants and the Palestinian society comes from the religious and cultural interpretation of female chastity and its connection with virginity. In a Patriarchal culture like the Palestinian culture, women have to keep their virginity until they are married (Matthew J et al 2010). That is why people show disrespect to women who have pre-marriage sexual relations (Matthew J et al 2010). On the other hand, the same roles and morals that are derived from religions and moral codes in the Palestinian society emphasize that the sexual relationship of married women has to be inside marriage.

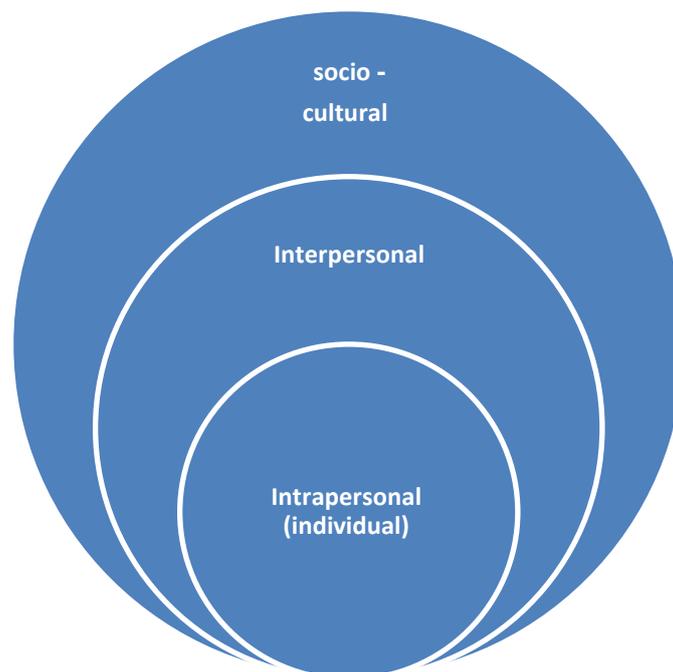
Women virginity is related to their hymen; this means that a society values women based on one part of their body. Feminists believe that the way society values women's chastity and virginity is to control women. Women's behavior and sexuality is controlled by their hymen. To be good girls, they have to keep their virginity; women are allowed to have sex only in the service of their husbands. Therefore, it is unacceptable to have sex outside

marriage and become pregnant because of that. In general, in such a conservative society like the Palestinian society this belief which men and women have been brought up with and internalized within their inner selves produces the women's perception about their pregnancies; even though, it is outside of marriage.

6.2 Finding in the context of the social – ecological model

This study is based on Bronfenbrenners (1977) model, which proposes a broad approach to human behavior, considering the multiple factors and environments or system that influence individuals, and change throughout individuals life span. These influences and environments or systems are embedded in one another, moving from the innermost level to the outside.

There are three levels within the ecological framework: (Intrapersonal) individual, Interpersonal (family, friends, peer group, perpetrator), and social which were found to influence pregnancy outside of marriage in Palestine.



The innermost circle represents the personal life and experiences that affect an individual's behavior in relationships. The second circle represents the immediate context in which the family or other intimate relationship and peer groups exist. The third circle represents the social structures, both formal and informal, in which relationships are embedded. Social

networks, in the outermost circle are the economic and social environment, including cultural norms.

6.3 Causes of pregnancy outside of marriage

The first level of ecological model are the individual factors; some individual level factors that led to pregnancy outside of marriage include lack of love and affections, lack of jealousy, naivety, early and forced marriage and high sexual drives.

It was found in the result chapter that various individual factors led to extramarital relationships including lack of love, decline in marital happiness and affections and lack of jealousy. This study contributed to the literature in expanding the traditional understanding of extramarital relationship to include sexual and emotional involvement. For example, it was found that women who were married at an early age or forced to marry their husbands looked for other relationships not only to fulfill their physical needs but also to share emotional intimacy. This is consistent with various studies about extramarital relationship like a study done in Ethiopia in 2013; it is titled, "Early marriage, Marital relation and Intimate Partner violence in Ethiopia" by Annabel Erulkar. It is worth to mention that in the Palestinian and Arab society love is seen as a desirable outcome of marriage but not as a good reason for getting married in the first place. Therefore, when love does not exist and flourish after marriage, it might increase women's dissatisfaction. Additionally, women who were married at an early age might put high expectations on love and marriage; therefore, their emotional dissatisfaction might become greater and then lead them to seek satisfaction from other lovers. This is in line with a similar study by, Niehuis (2001) who addressed the question of loss of love and affection. The findings suggest that the lack of love and affection are represented mostly in early marriage (2001). Niehuis related this to low level of love toward the partner, due to many problems during the marital time and premarital time like they don't want to marry each other's but they did even with the present of these problems, like that they married by some force, which show lack of love at the end like the finding of the present study. Another study by Prins, et al. (2015) who examined inequity, normative disapproval and marital dissatisfaction which related to involvement in sexual relationships outside of marriage, which is in constancy with the current study results, 30% of the participants were involved in extramarital relationships. The results showed that both married men and women, due to their dissatisfaction with their marriage life had the desire to become involved in extramarital sexual relationships. Only women reported that inequity was a reason for their extramarital relations.

In harmony with this result, a case study was done in Kenya about determinants of teenage pregnancies in Kenya in 2007 by Economic and Human Biology, (2007). Its results indicated that girls' educational level had significant influence on the probability of teenage birth among non-schooling adolescents and those with primary school level education are more vulnerable. On the other hand, the variables used as proxies for access to sex education, availability of church forums that educate adolescents about sex and family life issues reduce probability of teenage pregnancy. Other key factors as outlined by the adolescents themselves include peer pressure and social environment-related factors like inappropriate forms of recreation. This came in consistency with the results of this study which found that lack of access to educational opportunities, sex education; as well the widespread of poverty predispose girls to teenage pregnancies. In a study that was held in Kenya, it was found that the adolescents should be equipped with the relevant knowledge to enable them to make informed choices regarding sexual relationships. In the same study, the recommendations were aimed to promoting girl education and poverty alleviation to prevent or minimize teenage pregnancy.

It is worth mentioning that the girl's naivety was one of the obvious causes of pregnancy outside of marriage. It is also one of the individual causes which might accompany poverty and low standard of living as indicated by the results of this study. It was found the girl's naivety, especially if it came with the girl's loss of family support and poverty made this girl sexually vulnerable whether through being seduced by money, promise of marriage or providing her with the needed love, affection and support by the perpetrator who eventually exploited her sexually and thus leading to pregnancy outside of marriage. These findings highlighted the interplay between individual and interpersonal factors in contributing to the occurrence of pregnancy outside of marriage. This means that no single cause can explain the occurrence of this social problem which indicates complexity of it and the responsibility of each actor in the society for its occurrence. Therefore, families and society could not give a full responsibility of this issue on these women. One of the main findings of this study was the alteration in family dynamics and functions, beside other individual factors. For example, it was found that the relationship inside the family was one of the contributing factors to pregnancy outside of marriage. Family members especially mother and sisters were supposed to be a source of support; On the other hand the Palestinian culture does not encourage the daughter to discuss sexual issues with her mother or sister since sex is considered a taboo. The information given by the participants show that they came from families with weak relations lacking love and

affections, and no support. This lack of love at the family level with weak family relations is one of the major causes that made the victims involved in such sexual relations outside of marriage as a compensation for losing love. This is in line with a study by, Tiruneh (2010) which found that teen girls became pregnant as a result of rape, lack of good relationships among family members; moreover, pregnancy happened as a result of lack of knowledge on reproductive health issues and lack of interest in education. This is not a surprising finding in the context of Palestinian cultural and social norms of enhancing passivity and dependency of women and their inability to discuss sexual issues and to make informed decisions about their sexual life, and thus create situations where women are at an increased risk of engaging in sexual risk activities.

At the interpersonal level, the findings of this study showed that the absence of normal healthy forms of family like divorce, polygamy, and/or irresponsible mothers and/or fathers played a significant role in this regard. At this level, it must be mentioned that living in the family without any dominant and powerful person who advises the girl inside family about many socio-cultural issues related topics affects her behaviors. This study showed that most of the participants complained of being alone, ignored and lacked love and affection inside their families. The most specific complaint was that they lacked family interest and care. Lacking a healthy family and a warm interaction increased the vulnerability of women to engage in extramarital relationships, which came constant with Olubunmi study (2011), that showed that the family structures and relations played a big role in making the unmarried adolescent girls in Nigeria go through such experiences, in another study by Olubunmi (2011), that examined the different types of families or homes and its effect on involvement of teenage girls in sexual relations premarital, the study result was constant with the current study result in considering the family structure as a cause of such involvement, which can lead to unpredictable pregnancies. (Olubunmi, 2011).

The vulnerability of girls is also aggravated by the situation in which they are living. One of the significant findings in this study is lack of clear boundaries inside the family. This made the woman unable to differentiate what is the acceptable and unacceptable behavior, which is constant with (Mmari & Blum, 2009) who found that some family elements and structure can increase the risk and the probability of the girls to be sexually active before marriage, which can cause pregnancy; and in more details by discussing that the family characters like permissiveness and inadequate communication, adolescent female living away from home, and adolescent living in a home with a sibling can get pregnant as an

unmarried adolescent, (Mmari & Blum, 2009), so here it's found that those girls who lived away and never being under the family roles or boundaries, are more vulnerable to have sex before marriage which came in the constant with the current study results; while the absence of certain protective factors such as parents, sisters, brothers, and husband and families members may increase the woman's vulnerability to other risks including sexual risks and pregnancy. This study argued that the silence about sex did not inhibit extramarital pregnancy rather it influenced its occurrence because girls were not afforded the opportunity to learn about sex and protecting self from abstaining from premarital sex because sex education or discussion was not allowed in the school system or at home. It is in line with Abu Baker., et al (2003) who stressed that an individual is expected to suffer in silence if her voice would bring shame to the family. In fact, lack of communication inside the family and sex education played a central factor in extramarital sexual relationships, Mmari & Blum, (2009), this study also found that issues related to quality of marital relationship such as lack of communication between the woman and her husband also led to infidelity.

This study showed different forms of absence such as absence of father role even if he is there, as some fathers were weak and unable to practice authority or to keep boundaries at his home. Another form of absence was the absence of husband but not by body, but by emotions or physical relations due to their sickness. This makes it more possible for other men to fulfill the emptiness and loneliness and to seek another relation outside of marriage to fulfill their needs. The patriarchal nature of the Palestinian society, played central role in this issue as it shows how patriarchy creates dependence on males to the extent that in the absence of males, many women cannot manage their lives as they were socialized to believe. On the other hand it shows the extent of patriarchy in shaping men's beliefs that women who live without men are powerless and easy for sexual exploitation. The patriarchal gender system affected women's lives at various levels; features in male domination and restrictive codes of female behavior and the linkage of family honor with female virtue. Male relative and particularly the fathers are considered the source of power and authority; women in the Palestinian society are not allowed to live alone or to act freely. In a patriarchal setting, where the concept of unmarried, divorced, single women is deemed as a threat to society's moral order, women can not be allowed to be independent. Therefore, when women lived with her children without a man into the society, a closely knit society feels obliged to compensate the male absence by providing her with support.

Some women whose husbands are absent as a result of death or imprisonment are living in economic hardships; they lose a resource (the partner) who previously contributed to the household maintenance. Despite their male relatives' supports, they also feel eligible to be responsible for them and a means to control over them. In the extreme, some women in this study reported being economically and sexually exploited by men who provided them with this help. In the same discussion, Barakat (1993) reported the preference of male over females, restricts women and determines their economic dependency by father, brother husband, or any male member of extended family. A study that was conducted by Jasinsk et al. (2002) in Florida, found that a total of 78.3% of homeless women in the study had been subjected to rape, physical assault, and/or stalking at some point in their lifetimes. Of victimized respondents, over half of the respondents (55.9%) had been raped, almost three-quarters (72.2%) had been physically assaulted, and one-quarter (25.4%) had been subjected to stalking. These rates of victimization were much higher than the national average found in the National Violence against Women Survey. They considered homeless women as a traditionally marginalized group who exploited by men related to their vulnerability.

One of the striking results in this study was sexual harassment by family members such as fathers and brothers-in-law. Therefore, it is important to understand the nature of rape in the Palestinian culture and how patriarchy operates in affecting woman's actions and interaction such as silence as a response to harassment. As it was found in this study, this led to women inability to report abuse to other family members or even accept being sexually harassed. The conservative nature of the Palestinian society and the sensitivity of discussion of any sexual act in public might explain women's inability to report abuse to police or relatives. In addition, they have feelings of shame and guilt or intimidation, especially when the perpetrators threatened them with death. Sexual taboo combined with passivity, naivety and dependency of women on male relatives made it difficult for them to challenge their power and authority on them. Therefore, when the abusers were family members such as fathers, this will undermine their ability to resist abuse or in some cases may consider it a socially accepted behavior particularly when they were sexually abused at young age. This was explained by Al Haj et al (2009) who emphasized that men want to control women; especially their sexuality which was the major reason for male domination over women. Through sexuality, men force their view of femininity on women. Kevorkian (1999) also addressed the relation between rape and a patriarchal, gender based perception of women's status. Kevorkian reviewed the rape related literature since 1970 until 1998 and

found that rape mirrors the social, cultural and political conditions of given society. She also elaborated that Palestinian women sexuality is one of the most private topics, and it is not easy to be disclosed in such context, particularly if she is unmarried, because such topic can be a constant threat to the family reputation and honor which is affected by her role inside the family (extended, hierarchical) (Kevorkian, 1999).

Some of the women who participated in this study came from a conservative and closed family that made her a weak woman, passive and unable to protect herself. Obviously, obedience was one of the causes that made some of the participants unable to stop their perpetrators' sexual abuse and /or relations which then led to pregnancy outside of marriage.

The study indicates that in the United States, researchers estimate that 40%–50% of all first marriages will end in divorce it also indicates that there are well known factors that put people at higher risk for divorce like marrying at a very early age, less education and income, premarital pregnancy, and feelings of insecurity. The most common reasons people give for their divorce are lack of commitment, too much arguing, infidelity, marrying too young, unrealistic expectations, lack of equality in the relationship, lack of preparation for marriage. Another significant factor that contributes to having extramarital relationship is when the husband is suffering from physical problems or chronic illnesses especially if he is old. This is consistent with the finding of this study as one of the reasons that were cited by women in this study was their husband's inability to fulfill their sexual needs as a result of their physical illness. These problems impaired their sexual ability. This condition affects the wife's sexual satisfaction especially if she has a high sex drive. This is in line with what was mentioned in a televised interview with Sharif conducted by Women News Agency (2013). In an open and lengthy dialogue with the Sexologist, Family consultant and researcher in human sexual activity on the main problems of sexual relations that lead to couples repugnance, aversion and divorce in Arab societies, Sharif indicated that the majority of divorce cases relate to this issue. Most couple's problems which fill courts in the Arab countries refer to problems in sexual relations. Despite the various causes of divorce, sexual problems whether those of the husband or the wife come on top of the list. He stressed that 38% of divorce lawsuits in the Tunisian courts refer to pure sexual reasons. These are caused by the Arab societies ignorance of sex education and culture and the domination of masculine mentality in the interpretation of the sexual relation within the couple. It also strips the female of her right to enjoy and feel satisfied like man which is in line with the findings of this study.

Data also showed that alcohol use and peer pressure are predisposing factors to pregnancy outside of marriage which might be explained by lack of parental control or disappointment with marriage relationship. Peer pressure was found to be a significant factor in leading to extramarital relationship which might be explained as a result of their influence particularly on young women who are unable to figure out the consequences of their acts. It is found also in this study that their relationship with drug addicted friends and the consumption of alcohol with their friends may positively affect the occurrence of extra marital relationship. This is in line with studies that found respondents, who used to attend night clubs (Mitike, 2008; Tura et al., 2012). Lack of parental control, prior expectation about the university, being in the youth age group, living out-off campus, substance use, peer pressures, campus and outside environment and low income level were identified as predisposing factors for risky sexual behavior (Mitike, 2008; Tura et al., 2012).

Therefore, it is not surprising to find that women who lived with families with no boundaries, lack of love and supervision to engage in alcohol and drug abuse, ultimately led to pregnancy outside of marriage. Similarly, a study that was conducted to examine the determinants of teenage pregnancies in (2007) in Kenya found that peer groups affected teenagers in being involved in sexual relations. Another similar qualitative study held by Department of Psychiatry and Behavioral Sciences (2014) in Kenya showed that alcohol and addiction, largely occurring in bars and nightclubs, emerged as an important precursor to many of the unintended events described. Alcohol use was associated with a variety of dangerous and unintended sexual events; the study highlights the link between alcohol use and sexual victimization and the need for intervention development to reduce the emotional and physical harms resulting from the unintended consequences of alcohol use.

6.4 Effects of pregnancy outside of marriage

When discussing the impact of pregnancy outside of marriage, it becomes clear that there is a strong interrelation between the impact on the individual (the victim) and the reaction of the society, and even local institutions, to pregnancy outside of marriage in women's reactions to pregnancy outside of marriage.

As it was found that all participants expressed concerns over being pregnant outside of marriage and becoming mother; most of them were worried about their future prospects for marriage, or the cultural identity of the baby after birth, or raising the baby without father whether it is allowed or not. As there are no previous studies that explored the perceptions of pregnancy outside of marriage among Palestinian women and their reactions, this study

has added a significant contribution to the bulk of literature about their voices and experiences.

All participants in this study experienced negative emotions as a result of their pregnancy outside of marriage, negative reactions from their families, and the community, compound with lacking of proper support from their family members and the community. Therefore, these are novel findings and provide a database about the experiences of Palestinian women and their families when they are faced with pregnancy outside of marriage. This finding is consistent with Asonye study (2014) about the experiences and perceptions of pregnant unmarried girls in Nigeria, which found that all the participants experienced negative emotions due to their experience, negative reactions from their parents, family members and the community and they never received special support from family members, or the closed knit society.

In the present study, the majority of the participants who experienced pregnancy outside of marriage reported that they first shared with their family their experiences of pregnancy. However, as it was shown from the findings of this study, not all the women received support from their family. The study showed the tremendous experiences and difficulties that women and their family members faced as a result of their fear at family reputation, whereas all their measures directed toward saving family honor more than the lives of the victims.

6.5 Silence, difficulty to disclose, avoidance of the police by the victim and her family

In Palestine, an Arab family reputation is the most important resource for keeping their social standing and therefore they reacted to sexual acts with adopting the process of silence. In presence of such silence and difficulty to disclose by the victim and her family, the perpetrator is still free from any legal considerations. On the contrary, the result from this study shows that the perpetrators in most cases of pregnancy outside of marriage, blame the woman and make her carry all the responsibilities for what had happened, especially if the sexual relation is kind of incest; some of them even abused the victims physically as kind of trial of unsafe abortion, and abandonment is another way to make the women carry all the responsibility. Most of the victim cannot inform any of the surrounding people as long as there are no solutions. This come on line with what Kevorkian (1999) found, that it is evident that pregnancy outside marriage has several

social impacts on the victim and her family, so the solution to such problems would be full silence just to protect the reputation of the girl and her family (Kevorkian, 1999). In another case study, about the politics of disclosing female sexual abuse, Kevorkian, (1999) explored the socio-cultural context and the issue of sexual abuse and pregnancy in some cases. Contextual analysis of the data revealed that acknowledgment of sexual abuse took place only in situations where the abuse was extremely traumatic, and the victim was absolved of blame. Disclosure resulted in approximately 10% of the cases in the killing of the victim. Responses involving measures such as hymen reconstruction, marriage to the rapist, and abortion were used by family and society to “nullify” sexual abuse, (Kevorkian, 1999). A similar study and conclusions by Lefley,(1993) found that the tendency of Hispanic victims of sexual violence to avoid sharing their abuse with close relatives resulted in underreporting, and leaving the victim alone to cope with her trauma.

One of the most important result of the present study is avoidance of police and authorities to avoid scandal and to protect the family reputation which is considered a sensitive issue; if it was conveyed to authorities then it would cause confusion. It will also be known by the surrounding neighbors and the extended family and eventually the entire society. This is a clear and strong evidence that the family’s aim in such problems is to preserve its good reputation and overlook the victim’s rights. They in this way show leniency with the perpetrator; it is possible that such silence might not be a deterrent reason and it would increase assaults. The victims pretext in this study is that the police and members will not treat them well. The perception of community response to sexual assault in a survey done in Washington state by Fain, (2001) on women, showed the same result regarding police avoidance, despite the presence of transcultural changes between Palestine and Washington contexts.

Police avoidance by the victims and their families is another serious defense by them to keep their good reputation. This explains that the minimum number of those victims who are reached by the researcher does not reflect the real number or size of pregnancy outside of marriage in the Palestinian society, in the presence of such silence. The concern of single women with pregnancy outside of marriage was related to fear of being judged by the social group they are living in, because this showed there was sexual intercourse before marriage, a behavior that is considered inadequate since it involved the moral integrity of families; thus, women’s right is lost if the cause of pregnancy is sexual assault. They would renounce their right just to keep their good reputation by silence.

At the institutional level, the victims of sexual violence in this study who become pregnant outside of marriage encounter significant difficulties obtaining help from, legal (Family Protection Units), medical (hospital 'HFH'), and psychosocial systems (Mehwar), and the help they do receive can leave them feel blamed, doubted and revictimized. As a result, the victims after pregnancy outside of marriage got into a state of distress may be not due to the pregnancy and sexual violence itself, but also to how they are treated by the social system after pregnancy outside of marriage.

Birth certificate for the baby is one of the serious and important services that is offered from the community institution. As for the baby stay in the institution and not with his mother, there are many details that are ignored and they relate to the mother's post delivery psychological and emotional problems.

6.6 The Clan solution in Palestine after pregnancy outside of marriage

The clan solution as a Crisis Group in 2007 describes the Palestinian society ways to solve conflicts between individuals through adoption of the clan law as (Hama'il). It is the widespread use of internal justice outside the formal judicial system. Clan conflicts (Asha'er) and traditional conflict resolution have existed for a long time, and they have changed over time in line with social and political developments. In the same source, it was mentioned that The Mediation Committees and Mediators attempt to mediate between the clans in order to reach conciliation (Sulh). They base this mediation on traditional law (Urf), which differs from official law. According to a West Bank Palestinian experienced in working in the mediation committees, "The phenomenon exists everywhere, but it is currently prevalent in particular in Gaza Strip and in Hebron on the West Bank, "Birzeit University, Crisis Group et.al 2007". While the presence of pregnant woman outside of marriage in one family is considered a big social problem in relation to the Palestinian context, the immediate actions taken by family members with the pregnant girl outside of marriage is to get their daughter marry as dictated by the Clan solution which is in the core of Palestinian context. However marriage in adverse conditions led to more harms than benefits on the women psychological status, but it can convince the society that the family reputation and family honor are still good, while in reality the people will never forget such event in the woman's life. Marriage provides a context for people in the Palestinian society to be sexually active without having to live in fear of pregnancy outside of marriage. It is a formal, binding relationship that has proved remarkably conducive for raising a family.

This perspective has not only caused further discrimination and subordination of the victim, but it also created a situation in which the perpetrator of rape, instead of being punished, he will be encouraged and motivated through rewarding him with marrying the woman just as reward for his violence. In return, she will not be given any of her rights as wife; just she and her family have to be grateful to him to keep their family honor and reputation; this reflects the superficial mentality of such context. On the other hand, the individual's difficulty to disclose and silence are influenced by such culture and values, as social shame and family reputation affect any actual solution for this social problem in the Palestinian society.

Having pregnancy outside of marriage whether it is for a single or married woman in such conservative and closed society like Palestinian society as a result of rape or other sexual relations outside marriage frame would prolong the social stigma on the victims life. People will continue to judge women and their families, since people tend to blame women and their families for having pregnancy outside of marriage. As it was found in this study, both professional co-workers and women insisted that stories related to honor always existed and transcended through generations in which this affects emotionally both women and their families and even children. This is in line with Al khatib (2012) results which concluded that any transgressions related to honor might lead to social consequences and insisted that honor killing damages family honor and leads to social death (such as social exclusion and rejection). Although family members killed their female relatives primarily in an attempt to re-establish their honor, the murder failed to fulfill this purpose and in fact made their situation (at social and emotional levels) worse. Therefore, it is not surprising to find out that fear of being killed is one of the main concerns of women and their families. In this study, these fears are the result of varied emotional difficulties such as excessive stress, anger and shock. Studies on sexual assaults and consequent pregnancy concluded that social reactions affect mental health outcomes such as depression and PTSD (Burgess & Holmstrom, 1979; Kramer & Green, 1991; Ruch & Chandler, 1983; Ruch & Leon, 1983; Sales et al., 1984). In general, this literature suggests that social support from family, friends, and intimate partners facilitates sexual assault survivors' recovery. The availability of family and friends, living with family, and feeling close to family members are related to better adjustment (Burgess & Holmstrom, 1979; Kramer & Green, 1991; Ruch & Chandler, 1983; Ruch & Leon, 1983; Sales et al., 1984). Additionally, studies showed that negative social reactions by families and friends have strong detrimental effect on women'

mental health, household stress and excessive psychological distress (Campbell, Ahrens, Sefl, Wasco, & Barnes, 2001; Coker et al., 2002). Interestingly, a study by Ahrens et al. (2007) revealed that when initial disclosures were negative, victims refrained from further disclosures and were less likely to seek further help; this was associated with higher self-reported distress. This may explain women's high level of stress and their silence in disclosing assaults and pregnancies to family members as their fears from family reactions were noticed. This is in line with a study by, Tiruneh (2010). The study found that teen girls became pregnant as a result of rape, Tiruneh found that those mothers experienced isolation from social contacts and economic resources as a result of violation of values, norms and beliefs of the community. They were not allowed to participate in the society and lacked the opportunity to make friends and other contacts outside of their household.

Another sticking point in this study is legislation role, and police avoidance; while the victim is very anxious about the family reputation and not reporting to police, in contrast, the perpetrator will not be punished by law. By the same token, sexual assault experiences and perception of community response to sexual assault, a survey done in Washington state by Fain (2001), showed that few women reported their experiences to the police; only about 3% of women over 60 who shared the survey reported their assault to police. In another study by Taylore et al. (2011) about reporting rape in national sample it's found that a small percentage of rape are reported to law office, also rape by the stranger found to be more likely to be reported than the family rape. On the other hand, the report also found that rapes involving drugs and/or alcohol are less likely to be reported by examined the prevalence of reporting rape to law enforcement in a national sample of 2,000 interviewed college women.

Radical feminists explain that this situation arises from how women value their bodies (Tong, et al., 1989). According to this, women sexuality is to serve men not women themselves. This perception causes psychosocial effects on the victims, such as lack of self esteem, feeling of inferiority, and withdrawal from society. The woman who experiences pregnancy outside of marriage tends to blame herself and thinks that people will blame and look down at her. In order to cope with this effect on the women with pregnancy outside of marriage, those victims need support from their families and society in general whether governmental or NGO. They should expand work in this area to build protective strategies and awareness of women's issues by empowering them and spreading information related to gender based violence and its effects on the women life and on Palestinian society in

general. In a more in depth discussion, some of the victims' families were worried about pregnancy more than losing virginity that their daughters have, in the contrast of the victims themselves who cared about losing virginity. This reflects the family carelessness about the woman rights and her body rights, but they were only concerned about pregnancy because of its physiological changes that cannot be hidden, and can be seen by the surrounding members. This is enough to break family reputation in the Palestinian context; moreover, it is clear that the family members find great difficulty to disclose their daughter's pregnancy or/and involvement in sexual relation outside of marriage. As a result, these factors tend to encourage silencing of the victim owing to the difficult and complicated social consequences. Moreover, family honor and reputation predispose the victim and her family to search for other solutions, like looking for unsafe abortion, or/and hymen repair or graft if she is single.

This study contributed to the literature by showing the intangible cost and devastating effect of pregnancy outside of marriage on Palestinian women as they are prevented from seeing or keeping their children with them. This decision is related to secrecy and social stigma attached to pregnancy outside of marriage. The women desire that their children have the best interest; they make a harmful decision in marrying the perpetrators in order to give their children a family name. Article 308 of the Jordanian law (1960) that is enforced in Palestine gives more space to judges and courts to stop any legal action or even defer the sentence of rapists who agree to marry their victims (HRW 2006:92). Even worse, the Palestinian laws criminalize abortion in cases of rape or incest, forcing victims of sexual violence to carry their pregnancy to full term. Therefore, women found themselves unprotected by law to do abortion. The fact that the mother develops emotional attachment with her infant during pregnancy makes her unable to accept giving him up for custody despite social consequences. However, the Palestinian law regarding this is clear in sending the child to custody in order to provide social and medical care. In a study conducted in Sri Lanka by Jordal et al. (2013) it was found that single mothers were conscious of the violated social norms regarding sexuality and exhibited this through self-blame, obedience and even thought committing suicide. The fact that they gave up their infant for adoption made them conscious of their responsibility for premarital pregnancy. Pregnancy outside of marriage affects the victim's education; those victims suffer from its negative effect because school starts to be forbid them from coming to school and this comes in line with their family views regarding not allowing those victims to go outside their home after what had happened to them. In the Palestinian society and in many

countries, as policy, girls who become pregnant are not allowed to continue attending school. It is reported that in Kenya, an estimated 10,000 girls a year leave school because of pregnancy (UNFPA, 2010), most students would often drop school because of feelings of shame not only due to this policy. Many women who become pregnant outside of marriage had to drop out of school. A girl with little or no education has fewer skills and opportunities to find a job. This can also have an economic impact in a country where there is a deterioration of women and child health.

6.7 Results and effects of pregnancy outside of marriage:

Moreover, pregnancy outside of marriage causes significant health implications due to unsafe abortion which might lead to the death among women (WHO, 2014); this would have serious implications on mortality rate internationally. The lack of prenatal care of the mother and her infant would have a serious implications on their health in postnatal stage and thus increase infant mortality rate, (UNICEF, 2015; CDC, 2016). In this study, all the women experienced similar physiological changes during their pregnancy and most were registered for mother and baby healthcare after they were sheltered in the institutions. This registration for health care is by the institutional law but not requested by the mother and according to her will; this finding supports the findings of Olanrewaju and Olurounbi (2012) who reported that the adolescent mothers who experienced unwanted pregnancy were at risk of anemia and preeclampsia because they were less likely to have an insufficient development of the pelvis resulting in difficult vaginal deliveries, and higher incidence of cesarean deliveries.

Campbell and Raja (2005) study about “Companion reader on violence against women” found that increased level of distress symptoms predicted sexual assault. In this study, many victims described the medical care they received as cold, impersonal, and detached, which may explain women’ avoidance of seeking health institution. This is in line with this study, as some women in some occasions mentioned having unsupportive attitudes from health workers as a result of their outside marriage pregnancy.

On the same physiological effects, the findings showed that abortion was the first choice of families, women and perpetrators as a result of pregnancy outside of marriage. Palestinian societal approach promotes expulsion of pregnant women. The gender-based discrimination does not only violate the girls’ human rights, but is likely to push young women to seek unsafe abortions especially in countries where there is no access to safe abortion. The women have to endure physical pain or even they are not allowed to express

physical pain during their pregnancy outside of marriage because family reputation is more important than the victim herself; many of them tried traditional ways of unsafe and induced abortion and tolerated the pain produced as a result of that. When this strategy was not successful, they suffered from bleeding and other pains like abdominal pain.

It is not surprising therefore that those women do not seek medical care during pregnancy. This is usually avoided in order not to be recognized by the closely knitted community. On the other hand, none of those women was concerned of her health. In this study, all the participants reported that they did not care about seeking health services especially antenatal care which must be offered to any pregnant women. In fact, they were concerned about the societal and social norms and measures which have to be observed in order to protect themselves and their families from stigmatization and bad reputation.

In a study about adolescent girls in illegally induced abortion in Dar Salaam, the discrepancy between sexual behavior and lack of access to contraceptives by Health Matters (2000) showed that more than half of the young women attempted to terminate pregnancy. It showed that 47% of all young people below the age of 20 years who became pregnant while in school resorted to abortion. This follows the generally observed trend in many countries. The methods they adopted to have abortion with were quite unsafe and unsuccessful and included use of local concoctions such as hot pepper soup, hot drinks and injections from quacks. Unmarried pregnant women and girls in the Palestinian context are a high-risk group for unsafe abortion in order to keep the family reputation while they do not care about their health.

6.8 Virginit

Although the participants in this study show interest about hymen repair especially those who are not married, this reflects an excellent example of significance of virginity in the Palestinian context. It also reflects the social beliefs toward the importance of virginity, this fear from society which is seen in almost all unmarried cases in this study is a way to protect her from family honor killing. A similar situation can be seen in Iranian women as they believe that virgin always goes to heaven (Fernandez, 1992). In the same line, (Kevorkian, 2004), reported that virginity testing reflects the views about women's status in general and political attempt to control women and their sexuality, and it reflects the international debate on all forms of violence against women, emerging from and reinforcing the social relationships that give men power over women (Kevorkian, 2004). This fact explains why women first concern was to repair the hymen in order to not lose

their future marriage despite her psychosocial pain, but she still care about her hymen to prove her chastity as her society judges her by.

6.9 Summary

After pregnancy outside of marriage, the worst effect on those women was the social stigma which is related to bad family reputation, so the victims experience guilt, stress, shame, hopelessness and many kinds of fear related to her experience, like fear from being killed or fear of bad reputation and fear from the unknown as well as isolation, as well as many thoughts of killing herself or wishing to die. One way to avoid bad reputation is by sending the woman to the safe shelter until she ends her pregnancy and gives birth; another strategy is trying unsafe abortion upon suggestions by her family members and/or friends.

Chapter VII

Conclusion and recommendations

7.1 Conclusion

Pregnancy outside of marriage is a common and serious public health problem worldwide, affecting millions of women each year. As the literature shows, it is driven by many factors operating in a range of social, economic and cultural contexts.

On the other hand, data on most aspects of pregnancy outside of marriage are lacking in Palestine as any countries and there is a great need everywhere for research of all aspects of this condition; of importance and interventions, supporting women pregnant outside of marriage and women victims of sexual abuse medically, socially and psychologically. Psychosocial and health care professionals have a large role to assist victims.

Palestinian women pregnancy outside of marriage is seen as a complex and multidimensional problem. This study has highlighted one of the most sensitive problems that the Palestinian women faced, which is the pregnancy outside of marriage, due to its connection to sexuality and the taboo.

Ecological framework was adopted to be conceptualized in numerous ways by various scholars in this study, to understand the causes, prevalence and consequences of pregnancy outside of marriage. based on Bronfenbrenners (1977), there are three levels within the ecological framework: (Intrapersonal) individual, Interpersonal (family, friends, peer group, perpetrator), and social which were found to influence pregnancy outside of marriage in Palestine. Furthermore, this study expands the ecological model by looking at it from another dimension which is to focus women by bringing individual, family, community and the larger society to combat the issue of sexual abuse in general and specifically the pregnancy that resulted from such relations in the Palestinian community. The family, community and society can exert a strong influence on an individual's beliefs, attitudes and reactions when this individual experiences pregnancy after sexual relations. Since traditional beliefs and values, and for fear of 'what the community will say' are the main concern and values that are to be protected, women did not want to bring scandal and bad reputation to their family. This indicates that sexual relation outside of marriage and/or sexual abuse within the Palestinian community is still unacknowledged at the community level and is more likely considered to be a private family matter rather than acknowledged

as a social issue. Additionally, the study findings have also revealed that the lack of specific support services related to sexual violence also hinders woman from approaching formal support. Thus, at the societal level, the lack of specific services for sexual violence and/ or sexual relations outside of marriage can/ or not lead to pregnancy, indicate that pregnancy outside of marriage is still an unexplored issue.

The victims and their families have several strategies to avoid social stigma, thing to hide the pregnancy, by giving unreal rationale about the absence of the women from home during the sheltering period, and abundant of the baby. So this reactions from both the victims and their families indicated that the families reputations is more important than the victims themselves.

Women's decisions regarding whether or not to seek help may be influenced by the availability of support from family members, community and larger society. As observed from the findings of this study, most of the women tend to first approach members of their natal family or relatives and friends when experiencing pregnancy outside of marriage. However, for those participants whose families have supported them in seeking help for keeping good family reputation, have been told to tolerate and maintain the marriage of the perpetrators. This indicates that the culture-specific context at the family and community level has influenced their help seeking process. The participating women along with the co-workers professionals, also revealed that many Palestinian women hesitate to speak out about their experiences of pregnancy outside of marriage or to seek help from outside their family due to their traditional beliefs and values, and for fear of 'what the community will say'.

Finally Pregnancies outside of marriage are stigmatized in the Palestinian community, especially among unmarried women. When pregnancies among unmarried Palestinian women are discovered, discussions occur between both families, often leading to an early marriage that will save the social status and reputation of the victim and her family. Once Palestinian women are found to be pregnant, her family will force her to leave school and have a decreased chance to return. Married women also face stigma in the community due to pregnancy outside of marriage. Women may become pregnant through extramarital relationships and if pregnancies from these relationships are discovered, the community labels these women as "bad women" and her family reputation will be broken. Unfortunately, stigmatizing behavior continues to exist and social consequences of pregnancy outside of marriage will continue.

7.2 Recommendations

Based on the results of this study, there are several ways to contribute toward the empowerment of Palestinian women, they have to understand their rights regarding reproductive health and rights.

1. In Palestinian society there is a big need to conduct gender sensitivity training, to increase Palestinian people awareness toward issues of sexuality, abuse and gender role in general. Those trainings should challenge the beliefs of Palestinian men and women that are strongly influenced by religious and cultural values, predominant in the family and social environment.
2. There is need to raise awareness among Palestinian, the needs and benefits of sex education among both girls and boys in schools.
3. Additionally, increase the permitted age of marriage among Palestinian women because of its effect on marital discourse and dissatisfaction.
4. One of the important strategies which are followed and used in the Palestinian society is the Clan solution by making the women marry the perpetrator even in case of abuse /rape as a way to keep family reputation unblemished and thus ignoring the psychological effects on the woman herself by marrying her the one who hurt her in the first place. This solutions have to be addressed by the decision makers by emphasizing on respecting the need of women who experienced sexual abuse.
5. In the light of the limitation of skills of co-workers professionals in how to deal with women and their families, there is a need for more qualified people to deal with such cases especially because they faced, several physical social and psychological problems
6. The health care providers in the Palestinian institutions who deal with the victims of sexual violence or/and pregnancy outside of marriage need to be more sensitive to women's need and to avoid further stigmatization on them. Health care providers and the other professional-coworker have to be informed of the type of action they should take with pregnant woman outside of marriage.
7. There is a need for further researches that addressed public view about extramarital relationship and marriage in order to understand how people perceive this phenomenon which will provide policy makers with further strategies for combating its consequences.
8. Quantitative studies also are needed to study pregnancy outside of marriage with large populations in Palestine to get more information about women with pregnancy outside

of marriage, to examine PTSD and depression among women and its further consequences, their needs and the complications they face related to social and legal issues, as well as to study the babies/children who born in such cases, identify the facilities and problems these babies/children face.

9. Based on the study results the Palestinian legislations requiring intervention to amend the provisions used in judgments to extenuate punishment for the perpetrators of this action in related to perpetration sexual abuse or what they called honor kill after pregnancy outside of marriage or virginity related issues.
10. The Ministry of Women's Affairs, should ensure effective access to legal, health, and psychosocial services for the women with pregnancy outside of marriage toward preventing the consequences of such serious multidimensional problem; by strengthen the institutional policies in referring and dealing with pregnancy outside of marriage victims, and making their role as women's affairs exceeding sheltering but increasing the chances of women's empowerment projects as trial to prevent this problem, and work in rehabilitate those women.

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Annexes

Annex 1: The information sheet

The information sheet

My name is Fatima Ahmad Hammed I am Master student in AL-Quds University in Mother Child Health and I am midwife. This study is held to explore the factors and characteristics of women or girls with pregnancy outside of marriage, in order to understand the factors that lead to pregnancy outside of marriage on women and girls in Palestine, and to explore the emotional, physical and social effects of pregnancy outside of marriage on those women and to investigate kind of care which those women received in the institutions if there are.

You have a full right to refuse to take part or to interrupt the interview at any time, and please know that everything you say here today is confidential and we will not be using your name or identifying you personally in any way in any of our research. While we can protect what you say in our data.

The information that you will give us is quite useful to achieve the objective of the study and to bring change in the women health and encourage the improvement of health polices and may help in gardening future victims in such painful experience in Palestine.

It will take 50-60 minutes to converse with you in this interview. Are you willing to participate in the study?

- 1- Yes
- 2 - No

(If the answer is yes, thank the participant. Then have the signature and conduct the interview. Otherwise, the participant is not forced to participate)

Name and signature.....Date.....

Do you have any question

Annex 2: Written Consent form for the interview

Written Consent form for the interview:

My name is Fatima Ahmad Hammad I am Master student at AL-Quds University in Mother Child Health and I am midwife. This study will held to continue my degree and it aims to explore the experience of Palestinian women with pregnancy outside of marriage, to investigate the health care available for those women, and to explore the consequences of the pregnancy outside of marriage among Palestinian women and girls who received care at Holy Family Hospital (HFH) Bethlehem.

Participation in this study is voluntary. You may discontinue participation at any time without penalty or the loss of benefits to which you are otherwise entitled

Please know that everything you say here today is confidential and we will not be using your name or identifying you personally in any way in any of our research. While we can protect what you say in our data and results we cannot protect what you say from other members of the group.

We would like to tape record the interview and to write your answers because it is hard for me to remember everything that is said. The tapes will be destroyed after we have transcribed notes from the discussion. We won't use your names in our interview here today. And if someone accidently mentions your name, whoever transcribes the tape recordings will delete your name from the notes. There are no wrong answers to any of the questions. We are just looking for your experiences and feelings, so anything you have to say will be helpful. The information that you will give us is quite useful to achieve the objective of the study and to bring change in the women health and encourage the improvement of health polices and may help in gardening future victims in such painful experience in Palestine.

It will take 50-60minutes for the interview Are you willing to participate in the study?

- 1- Yes
- 2 - No

(If the answer is yes, thank the victim. Then have the signature and conduct the interview. Otherwise, the victim t is not forced to participate)

Name and signature.....Date.....

Do you have any questions?

Annex 3: The interview guide

The Interview Guide

1st part:

Socio demographic data:

1. Age by years: -----
2. Religion: Islam Christianity others -----
3. Type of family: Nuclear family Extended family
4. Number of people inside family.....
5. Place of residence:
 Camp village City Bedouin
- 6- The governorate -----
- 7- Your educational level:
 illiterate Primary secondary school college University others.
- 8- Marital status:
 Single engaged Married Divorced Separated widow.
- 9- If you are married please answered the following:
10. How long have you been married? ----- (years)
11. Number of children: -----.
12. The husband age-----
13. The husband educational level:
 illiterate Primary secondary school college University others.
14. Is the husband works:
 yes No, If the answer is yes, the type of his work -----
- 15- Are you employed: yes No, If yes what is your occupation-----

16-Monthly income by shekels: [] \leq 1000 [] 1001-2000 [] 2001-3000
[] $>$ 3000.

17. Physical illnesses:-----

18. Mental health problems:-----

19. Are you pregnant at this time:-----

2ed Part

Personal questions

Main theme	Prop
Individual factors	1-How would you describe yourself as a person? -What are you good at? - What motivates you? 2- Can you talk about the character that you don't like in your personality 3- How do you handle the challenges you face in everyday life? 4-Please discuss more about your childhood? Are you still suffering from problems you had faced when you were child? Clarify more if you can? 5-Have ever you tried use of alcohol and drugs?
Obstetric and reproductive history	1-Tell me about: -Your age at menarche, how was your experience, did you receive explanations and support from any one and how? 2-If you are pregnant now when was your last menstrual period? 3- Is This is your first pregnancy? If the answer is no, please tell me about your previous pregnancies and your reproductive history?

<p>Family relationship:</p>	<p>1- Would you like to describe your family? Tell me about the people you live with?</p> <p>2- Tell me about the characters of:</p> <ul style="list-style-type: none"> - Who makes the decision in the family? - Who is responsible for household duties ? - The characters of the bread owner in your family? <p>3- Tell me about your relationship in the family?</p> <ul style="list-style-type: none"> - your relationship with your mother - your relation with your father - your relation with sisters and brothers - your relation with any one live with you in the same home (if married your husband and his family) <p>4- would you like to speak about each one level of education? Tell me?</p> <p>5- How did your family react to your behaviors generally, give an example?</p> <p>6- You feel that you can go freely; discuss it to me how it's going on in your family?</p> <p>7- Who is in your family involve in solving problems, describe please, and how?</p> <p>8- If she is married, tell me something</p>
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	about your marriage?
Pregnancy outside of marriage	
I:main causes	
Main causes	<p>1- Can we proceed by asking about your pregnancy? Would you like to talk about this experience?</p> <p>2- From your point of view what were the main factors for pregnancy?</p> <p>3-How this story happened with you, if there was threatening, what kind of threatening it was, are objects ever involved?</p> <p>4- Have you had this experience by your will, or forced tell me more?</p> <p>5- Have you any emotions toward the perpetrator? Describe it?</p> <p>6-Have ever this man or another man gave you money for any reason? Why?</p> <p>7-Who you want to blame for this pregnancy? And why?</p> <p>8-Do you think your economical statues had any reason guiding you to pregnancy outside of marriage, how?</p> <p>9-This question for married cases(do you think that your husband way in</p>

	<p>dealing with you can be the cause of what you experiences, tell me?</p>
<p>III If the cause of pregnancy outside of marriage is sexual abuse please answer the flowing questions.</p>	
<p>-History of sexual abuse</p>	<p>1-Tell me about your childhood; and if you experienced abuse in that period how, and by whom, What is your story? 2-Tell me about the kind of abuse you experienced in your life? -Does it involve verbal abuse, how? - Does it involve physical abuse, how? 3-Was there any sexual abuse before, how? 4-How often does the abuse occur; can you tell me the stories? 5-Can you tell me when abuse begins, and how often does it occurs, in your opinion what make this happened? 6-How you tried to defend yourself, if happened? What Happened? 7- At what point in the relationship would you say it became abusive, and you start to be worried 8-If you experienced abused in your life, how your respond was, did you tell anyone if yes whom, or you kept</p>

	silence,why?
III Characteristics of perpetrator	
- individual factors	<p>1-Can you tell me about the perpetrators?</p> <p style="padding-left: 40px;">-Is he one of your family, relative, or you knew before, describe the relation?</p> <p style="padding-left: 40px;">-Can you tell me about his age, income education, if religious, and history of physical and mental related problems?</p> <p>2-Would you tell me more if this happened by force or by your well?</p> <p>3-Was he tried before to make you involved in Such relation? If yes how?</p> <p>4-Is he is drugs or alcohol consumer, if yes how this harm you?</p> <p>5-Is this man rich? Describe his financial level?</p> <p>6- Is he is a good and accepted man, if not why?</p> <p>7- did he promised you (if not married) to marry you ?</p>

IV Action and reactions

-Psychological reactions

1-Tell me more about your feeling and about your major concerns when you knew that you get pregnant?

2- How did you feel about yourself and the experiences you faced

3- Tell me more about your thought related to the event?

4- What do you feel toward this pregnancy; and what would you tell the women who have your experience?

5-Had you think or try to get rid of the pregnancy, if yes describe how, when and why?

6-Would you tell me what you did after founding out that you were pregnant?

7-How you tried to hide yourself?

8-Have you ever tried to leave your family because of fear? If yes how? And why, tell me?

9-What about your studies, or working if she is working; there was, what happened, if left the school why?

10-Who is the first member you told about the trouble you faced and why?

11-Can you describe the family reaction when they knew?

-Effects on the family

12- If she is not married (Do you think

<p>-Reactions and social effects</p>	<p>to marry the perpetrator is the solution of your trouble, if yes; why?).</p> <p>13-If you have shared to your family/friends/community/religious leaders, what was their response? One by one?</p>
<p>V- Health consequences of the pregnancy outside of marriage</p>	
<p>-The effect on women health</p>	<p>1-Tell me how this experience affect your health?</p> <p>2-Do you suspect to have normal pregnancy length, a life child, normal, or died (this question if she is still pregnant)?</p> <p>3-Have you tried to abort the baby, if yes, by help of whom, describe?</p> <p>4-Can you describe what health services you receive as pregnant women? And how it was? If not why?</p> <p>5-Tell me more about complications and health problems you face?</p> <p>6-Can you tell me which institutions in your place have offered you the health services the pregnant women need?</p> <p>7-If still pregnant; are you know where</p>

	<p>to deliver? And what will be the baby future? Who will help you in that? Tell me, what you need to know?</p>
<p>Community (referral procedure)</p>	
	<p>1-How you tried to seek for help? If so, from whom? And how(police,doctors, shelter home, relative,NGOs,Community)?</p> <p>2- who tend to help you in difficult situations? how?</p> <p>3-What kind of services from community/religious leaders/social service agencies you received about the experiences you passed in?</p> <p>4-If you have sought help previously, under what circumstances did you seek for help? What motivated you to seek for help?</p> <p>5- What was the response from the people that you sought for help?</p> <p>6- What would you say to women who have the same experiences?</p> <p>7- Have you gone to the police? Under what circumstances did you report to the police? (This question will be asked only if police have been contacted).</p>

Possible closing questions

Heartfelt thanks you for having taken the time to speak to me about your experience, Can you think of any questions I should have asked you to get a proper understanding of your situation?

1. How would you describe your situation/life now?

2. What is your major concern at present?

3. Is there anything that I should have asked or known about but have not covered in today's interview?

4. Would you like to give me some feedback about today's interview (this can help the researcher to improve for the next interview)?



استبانه البحث

عزيزتي المرأة تهدف هذه الدراسة إلى استكشاف الأسباب التي تقود المرأة أو الفتاه الفلسطينية إلى الحمل خارج إطار الزواج، كما تهدف إلى استكشاف الآثار العاطفية والجسدية والاجتماعية من هذه التجربة والتحقق من نوع الخدمات الصحية والنفسية التي تتلقاها النساء في المجتمع الفلسطيني (أن توفرت تلك الرعاية) وذلك بهدف التوصل لتوصيات تخدم حاضر ومستقبل هؤلاء النساء على جميع المستويات.

سيتم التعامل مع هذه البيانات والمعلومات لأغراض البحث العلمي فقط وبسريه تامه، الرجاء من حضرتك التكرم بالتوقيع في حال الموافقة على المشاركة في هذه الدراسة.

وتفضلني بقبول فائق الاحترام

الطالبة: فاطمة احمد حماد.

المشرفة: د.سلام الخطيب.

كلية المهن الصحية (صحة المرأة والطفل).

جامعه القدس

أسئلة المقابلة الشخصية

الجزء الأول:

المعلومات العامة:

- 1- العمر بالسنوات-----
- 2- الديانة:
 مسلمه مسيحيه غير ذلك حدي.
- 3- نوع الأسرة:
 عائله نوويه عائله ممتدة.
- 4- عدد الأشخاص داخل الأسرة:-----
- 5- مكان السكن:
 مخيم قرية مدينه البدو.
- 6- المحافظة:-----
- 7- المستوى التعليمي لك:
 غير متعلمة أساسي ثانوي كلية جامعة غير ذلك.
- 8- الحالة الاجتماعية:
 أرمله منفصلة مطلقه متزوجة مخطوبه عذباء.
- 9- عدد سنوات الزواج-----
- 11- عدد الأطفال-----
- 12- عمر الزوج-----
- 13- المستوى التعليمي للزوج: غير متعلم أساسي ثانوي كلية جامعة غير ذلك.
- 14- مهنة الزوج: يعمل لا يعمل
- 14- هل لديك عمل ----- إذا كان الجواب نعم، ما هو عملك -----
- 15- مستوى الدخل الشهري:

- أقل أو يساوي 1000 شيكل.
- من 1001 شيكل إلى 2000 شيكل.
- من 2001 شيكل إلى 3000 شيكل.
- أكثر من 3000 شيكل.

الجسدية-----

16- الأمراض

17- الأمراض النفسية-----

18- هل أنتي حامل ألان ؟

نعم لا

الجزء الثاني:

أسئلة المقابلة الشخصية:

الموضوع الرئيسي	الأسئلة المساندة:
1-العوامل الفردية	<p>1- كيف تصفين نفسك كشخص؟</p> <p>- ما نقاط ضعفك وقوتك؟</p> <p>- ما الذي يدفعك للتصرف في حياتك؟</p> <p>2- هل لكي إن تتحدثي أكثر عن صفات لا تحبينها في شخصيتك؟</p> <p>3- كيف يمكنك التعامل معاً لتحديات التي تواجهك في الحياة اليومية؟</p> <p>4- هل من الممكن أن تتحدثي عن طفولتك وما تعني لك تلك لمرحلة؟</p> <p>5- هل حاولت تناول الكحول والمخدرات من قبل ولماذا؟ أخبريني</p>
التاريخ الإنجابي	<p>1- أخبريني عن:</p> <p>-عمرك عند أول حيض؟ وكيف كانت تجربتك؟ هل تلقيت الدعم والتوعية من أحد؟ كيف؟</p> <p>2- في حال أنك حامل الآن: متى كان آخر حيض قبل هذا الحمل؟</p> <p>3- هل هو حملك الأول؟ إذا كانت الإجابة لا تحدثي عن حمولاتك السابقة وتاريخك الإنجابي بالتفصيل إذا سمحتي؟</p>
2- العائلة والعلاقات الأسرية	<p>1- هل يمكن أن تصفي لي عائلتك؟ تحدثي لي عن الأشخاص الذين تعيشين معهم؟</p> <p>2- هل لك أن تتحدثي لي عن صفات الشخص:</p> <p>- المسؤول عن اتخاذ القرارات في العائلة؟</p> <p>- المسؤول عن أداء الواجبات المنزلية؟</p> <p>- المسؤول عن المصروف اليومي لك ولبقية</p>

<p>أفراد العائلة؟</p> <p>3- تحدثي عن كل من أمك، والدك، إخوتك وأخواتك: وأي شخص آخر تسكنين معه (في حال أنك متزوجة) عن زوجك وعائلته؟</p> <p>4- ما هي مستوى تعليمهم -أوصفي لي علاقاتكم بالبيت (علاقتك مع جميع أفراد العائلة)؟</p> <p>5- كيف تكون ردود فعل أفراد عائلتك على تصرفاتك بشكل عام؟ تحدثي أكثر؟ أعطيني مثال؟</p> <p>7- هل يمكنك الخروج من البيت بحرية؟ هل لك أن تشرحي لي كيف يتم هذا الأمر في بيتكم؟</p> <p>8- من الشخص المسؤول عن حل المشاكل العائلية؟ صفيه لي، اشرحي كيف (أن أمكن)؟</p> <p>9- إذا أنت متزوجة، تحدثي لي عن زواجك أكثر؟</p>	
<h3>الحمل خارج إطار الزواج</h3>	
<h3>I: أسباب الحمل خارج إطار الزواج</h3>	
<p>1- هل يمكننا المضي قدما بالسؤال عن الحمل خارج إطار الزواج؟</p> <p>-هل ترغبين في الحديث عن هذه التجربة؟</p> <p>2- من وجهة نظرك ماهي العوامل الرئيسية لهذا الحمل؟</p> <p>3- كيف حدثت هذه القصة معك إذا كان هناك تهديد لك، أي نوع من التهديد؟ هل تم استعمال أدوات أثناء التهديد في وقت سابق؟</p> <p>4- هل كانت هذه التجربة بإرادتك أم بشكل قسري أشرحي لي أكثر؟</p> <p>5- هل لديك أي مشاعر اتجاه الجاني؟ أوصفي ذلك؟</p>	<h3>الأسباب الرئيسية</h3>

<p>6- هل سبق وأن حصلت على المال من هذا الرجل أو من أي رجل آخر لأي سبب من الأسباب ولماذا؟</p> <p>7- من هو الشخص الملام بسبب هذا الحمل؟ ولماذا؟</p> <p>8- هل تعتقد أن الوضع المادي الذي تمرين به سبب هذه التجربة (الحمل خارج إطار الزواج) وكيف؟</p> <p>9- هذا السؤال للمتزوجات (هل تعتقد أن تعامل زوجك معك يمكن أن يكون سبب لهذه التجربة التي تمرين أو مررت بها؟ أخبريني أكثر؟</p>	
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II إذا كان سبب الحمل خارج إطار الزواج هو الأعداء الجنسي،الرجاء الاجابه عن الأسئلة التالية:

<p>1. حدثيني عن طفولتك: هل تم الاعتداء عليك في مرحلة الطفولة وكيف تم ذلك؟ من هو الشخص الذي قام بالاعتداء؟ ما هي قصتك؟</p> <p>2. اخبريني ما هو نوع الإساءة التي تعرضت لها في حياتك؟ هل العنف اللفظي وكيف؟ هل كان عنف جسدي وكيف؟</p> <p>3. ها حصل اعتداء جنسي من قبل وكيف؟</p> <p>4. كم مره حصل الاعتداء الجنسي؟ هل تستطيع إخباري مزيد من هذه القصص؟</p> <p>5. هل تخبريني متى بدأ الاعتداء الجنسي وكم عدد المرات الذي حصل فيه الاعتداء؟ من وجهة نظرك ما الذي جعل هذا الاعتداء أن يحصل؟</p> <p>6. كيف حاولت الدفاع عن نفسك (إذا كان ذلك قد حصل)؟ ماذا حدث؟</p> <p>7. عن أية نقطة تستطيع القول أن هناك اعتداء قد بدأ وعندها أصبحت تشعر بالقلق؟</p> <p>8. أن كنت قد تعرضت لآسائه الجنسية،كنت ترددين على ذلك؟ هل أبلغت أي شخص عن ذلك ومن كان هذا الشخص أم احتفظت بالصمت إزاء ذلك،</p>	<p>تاريخ الإساءة الجنسية</p>
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لماذا؟	
III خصائص متعلقة بالمعتدي	
<p>1- هل يمكنك أن تخبريني عن المعتدي؟</p> <p>- هل هو واحد من أفراد عائلتك؟ قريبك؟ هل هو شخص تعرفينه من قبل؟ أوصفي لي علاقتك به؟</p> <p>- هل يمكن أن تخبريني عن عمره ومستوى تعليمه، درجة تدينه، مستوى دخله ، وهل يعاني من مشاكل جسديه أو نفسية؟</p> <p>2- هل لك أن تبيني لي أكثر إذا حدث ذلك بالإكراه أم بإرادتك؟</p> <p>3- هل حاول هذا الرجل من قبل إقحامك بعلاقة مشابهة؟ أن كانت الإجابة نعم، كيف كان ذلك؟</p> <p>4- هل هذا الرجل ممن يتعاط المخدرات أو الكحول؟ إذا كانت الإجابة نعم كيف سبب ذلك الضرر لك؟</p> <p>5- هل هذا الرجل غني؟ أوصفي لي المستوى المادي له؟</p> <p>6- هل هو رجل محبوب وجيد؟ إذا كانت الإجابة لا: اشرحي لي لماذا؟</p> <p>7- (السؤال لغير المتزوجات)، هل وعدك بالزواج؟ اشرحي لي؟</p>	عوامل فرديه
IV - ردود فعل المرأة ما بعد الحمل خارج أطار الزواج والآثار المتعلقة بها:	
<p>1 - أخبريني المزيد عن مشاعرك وحول المخاوف الرئيسية الخاصة بك عندما عرفتي عن الحمل؟</p> <p>2- أوصفي لي شعورك بخصوص نظرتك لنفسك، وكيف ترين التجربة التي تمرين بها؟</p> <p>3 - أخبريني المزيد عما تفكرين به بشكل خاص</p>	- ردود الفعل المحيطة والآثار العاطفية

<p>بخصوص هذا الحدث؟</p> <p>4 - ماهو شعورك تجاه هذا الحمل؟وماذا يمكن أن تخبري النساء اللواتي لديهم نفس التجربة؟</p> <p>5- هل حاولت التخلص من الحمل؟إذا كان الجواب نعم صفي لي كيف؟ومتى؟ولماذا؟</p> <p>6-هل لك أن تخبريني عما قمتي به بعد أن عرفتني أنك حامل؟</p> <p>7- كيف حاولت إخفاء نفسك؟</p> <p>8- هل سبق لك أن حاولت ترك بيتك وعائلتك بسبب الخوف؟إذا كان الجواب نعم: اخبريني كيف؟ولماذا؟</p> <p>9- ماذا عند دراستك (أذا كانت على مقاعد الدراسة)،أو العمل (أذا كانت تعمل) ما حدث وهل قمتي بترك المدرسة او العمل؟</p> <p>10- من هو أول فرد من عائلتك قمتي بأخباره عن المشاكل التي واجهتها؟ولماذا؟</p> <p>11- صفي لي كيف كانت رده فعل عائلتك على هذه المشكلة؟</p> <p>12- إذا كانت غير متزوجة (هل تعتقدين أن زواجك من المعتدي هو الحل للمشكلة التي تواجهيها؟(إذا كان الجواب نعم) لماذا ؟</p> <p>13- فيما لو أشركت الأصدقاء أو أفراد العائلة،المجتمع،رجل الدين:كيف كانت ردود فعلهم حول هذا الموضوع؟واحدًا تلو الآخر؟</p>	<p>- الآثار المادية.</p> <p>- الآثار على مستوى التعليم</p> <p>- الآثار على العائلة.</p> <p>- ردود الفعل والآثار الاجتماعية.</p>
<p>V- الآثار الصحية المترتبة على الحمل خارج إطار الزواج</p>	
<p>1. اخبريني كيف أثرت هذه التجربة على صحتك؟</p>	<p>الآثار الصحية على المرأة</p>

<p>2. هل تتوقعي أن يكون عندك فترة حمل طبيعي وولادة طفل حي، طبيعي، أم طفل ميت؟ (هذا السؤال يسأل في حال أنها ما زالت حامل).</p> <p>3. هل حاولت إجهاض الجنين؟ إذا كانت الإجابة نعم من حاول القيام بذلك؟ اشرحي أكثر.</p> <p>4. ما هي الخدمات الصحية التي حصلت عليها كحامل. وكيف كانت هذه الخدمات؟ وفي حال لم تحسني عليها فلماذا؟</p> <p>5. اخبريني أكثر عن أية مضاعفات أو مشاكل صحية حدثت لك؟</p> <p>6. هل تستطيعي أخباري ما هي المؤسسات التي قدمت لك الخدمات الصحية التي تحتاجينها كحامل في منطقتكم؟</p> <p>7. إذا ما زلتني حامل هي تعرفي المكان الذي ستلدين فيه طفلك؟ ما هو مستقبل هذا الطفل؟ من سيساعدك في ذلك؟ اخبريني ماذا تحتاجي تعرفي؟</p>	
<h3>المجتمع المحيط وإجراءات التحويل</h3>	
<p>1. هل حاولت البحث عن مساعدة؟ وإذا كان ذلك فمن من وكيف (الشرطة، الأطباء، البيت الآمن، الأقارب، مؤسسات المجتمع الغير حكومية)؟</p> <p>2. من مد يد العون لك في تلك الظروف الصعبة؟ وكيف؟</p> <p>3. ما هو نوع الخدمة التي حصلت عليها من: المجتمع، رجال الدين، أو الخدمات الاجتماعية والمتعلقة بالتجارب التي مررت بها؟</p> <p>4. تحت أية ظروف قمت بالبحث عن مساعدة في حال حاولت ذلك في الماضي؟ ماذا كان دافعك</p>	

<p>للبحث عن تلك المساعدة؟</p> <p>5. كيف كانت استجابة هؤلاء الأشخاص الذين طلبت مساعدتهم؟</p> <p>6. ماذا تقولين للنساء اللواتي لديهن تجارب مشابهة؟</p> <p>7. هل حاولت الوصول للشرطة؟ تحت أية ظروف قدمت تقريرك للشرطة؟</p> <p>(هذا السؤال يسأل فقط في حال تم الاتصال بالشرطة)</p>	
<p>أسئلة إغلاق محتمله</p>	
<p>نهاية أقدم لك الشكر الجزيل على الوقت الذي منحتيه للتحدث معي حول تجربتك، وهل يمكنك التفكير في أي أسئلة أخرى لم أقم بطرحها عليك وذلك لفهم قصتك على أكمل وجه، ومن أجل الفهم الصحيح لموقفك؟</p> <p>1. كيف تصفي حالتك وحياتك الآن؟</p> <p>2. ما هو أكبر اهتمامك في الوقت الحالي؟</p> <p>3. هل لديك أمور كان من المفترض أن أسأل عنها لمعرفتها ولم يتم السؤال عنها أثناء المقابلة اليوم؟</p> <p>هل ترغب في إعطائي تغذية راجعة (رأي) حول مقابلة اليوم؟ هذا يمكن أن يساعد الباحث لتحسين المقابلة التالية؟</p>	

Annex 4: The agreement paper between Mehwar and the researcher

Annex 5: The letter for Al-Quds University three supervisor to test the validity of the instrument

تحكيم استمارة

أستاذي الفاضل \ أستاذتي الفاضلة

تقوم الباحثة بإجراء دراسة حول تجربته " الحمل خارج إطار الزواج بين النساء الفلسطينيات " وتعد هذه الاستبانة جزء من هذه الدراسة لإكمال متطلبات رسالة الماجستير، لذا أرجو التكرم بإبداء رأيكم وملاحظاتكم وتعديلاتكم حول فقراتها من حيث صلاحيتها للقياس أو عدم صلاحيتها.

شكرا " لكم حسن تعاونكم

الطالبة: فاطمة حماد

المشرفة: د. سلام الخطيب

فيما يلي أهداف الدراسة:

الهدف الرئيس:

استكشاف تجربته النساء أو الفتيات الفلسطينيات اللواتي مررن بتجربة الحمل خارج إطار الزواج، من أجل فهم العوامل التي تؤدي إلى تلك التجربة في فلسطين.

الأهداف الفرعية:

- 1- استكشاف العوامل التي تؤدي إلى الحمل خارج إطار الزواج.
- 2- استكشاف الآثار العاطفية والمادية والاجتماعية من الحمل خارج إطار الزواج.
- 3- معرفه نوع الخدمات الصحية والنفسية التي تلقتها تلك النساء في المؤسسات.

Annex 6

Official letters from AL-Quds University to the institutions

Annex 7: The interview guide for the professional co-workers



استبانة البحث

عزيزتي وعزيزي مقدم الخدمات للمرأة، أنا الطالبة (فاطمة أحمد عمر حماد) أقوم بأجراء دراسة حول تجربته " الحمل خارج إطار الزواج بين النساء الفلسطينيات " وتعد هذه الاستبانة جزء من هذه الدراسة لإكمال متطلبات رسالة الماجستير.

تهدف هذه الدراسة إلى استكشاف العوامل والخصائص المتعلقة بالنساء أو الفتيات اللواتي حملن خارج إطار الزواج وذلك من أجل فهم العوامل التي تؤدي إلى حمل المرأة والفتيات خارج إطار الزواج، وأيضاً استكشاف الآثار العاطفية والجسدية والاجتماعية للحمل خارج إطار الزواج وأثرها على المرأة وفحص نوع الخدمات الصحية والنفسية التي تلقتها تلك النساء من المؤسسات في المجتمع الفلسطيني.

لديك الحق الكامل في رفض المشاركة أو التوقف عن المقابلة في أي وقت تشاء/أين، والرجاء التأكد أن أية معلومات ستدل/لين بها هنا ستكون سرية ، ولن يتم استخدام اسمك أو أي شيء يشير إلى شخصيتك ولا بأي شكل من الأشكال ولا في أي بحث من أبحاثنا حيث إننا نستطيع حفظ وحماية المعلومات في بياناتنا..

المعلومات التي ستوفرها لنا في المقابلة ستكون مفيدة جدا في تحقيق هدف من الدراسة، وإلى إحداث تغيير في صحة المرأة وتشجيع المعنيين على تطوير وتحسين السياسات الصحية التي يمكنها أن تؤسس لمستقبل أفضل لضحايا مثل تلك التجربة المؤلمة للنساء في فلسطين..

سوف تستغرق ألقابله والحديث معك من ساعة ونصف إلى ساعتين، هل أنت على استعداد للمشاركة في الدراسة؟

1- نعم 2- لا

إذا كانت الاجابه نعم الرجاء التوقيع.

الاسم والتوقيع....., التاريخ.....

وتفضلوا بقبول فائق الاحترام

الطالبة: فاطمة احمد حماد.

المشرفة: د.سلام الخطيب.

جامعة القدس

عنوان الدراسة: (الحمل خارج إطار الزواج بين النساء الفلسطينيات)

أهداف الدراسة:

الهدف الرئيس:

استكشاف تجربته النساء والفتيات الفلسطينيات اللواتي مررن بتجربة الحمل خارج إطار الزواج، من أجل فهم العوامل التي تؤدي إلى تلك التجربة في فلسطين.

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- 3- معرفه نوع الخدمات الصحية والنفسية التي تلقتها تلك النساء في المؤسسات.

أسئلة المقابلة:

1 - حدثني كيف تصل إلى مؤسستكم حالات (الحمل خارج إطار الزواج) وما هي طريقه التنسيق ومع من المؤسسات الأخرى ؟

هنا سألته ماذا تقصد بمشاكل عليها؟

2 - من خلال تعاملك مع تلك الحالات اللواتي تعرضن للحمل (خارج إطار الزواج) هل لك أن تجيب عن الاسئلة التالية ؟

1- حدثني عن الصفات المشتركة لهؤلاء الضحايا التي لاحظتها من خلال خبرتك وتعاملك معهن ؟

2- أخبرني من فضلك عن ردود أفعالهن المشتركة أو الملحوظة حول وضعهن كحوامل خارج إطار الزواج ؟

3- كيف كانت ردود أفعال العائلات حول ما حدث؟ هل لك إن تصف لي بعضها لو سمحت ؟

4- من خلال تعاملك مع الضحايا أو عائلاتهم. هل لك إن تحدثني ماهو أكبر همهم في تلك الفترة ومركز تفكيرهم واهتمامهم ؟

5- هل لك أن تتحدث لي عن وضعهن (ضحايا الحمل خارج إطار الزواج) الصحي حال وصولهن لمؤسستكم ؟

6- أخبرني أكثر من فضلك عن وضع هؤلاء النساء النفسي. حال وصولهن لمؤسستكم ؟

7- كيف لك ان تصف لي حالهن ما بعد الولادة. وما هي طبيعة مشاعرهن ؟

6- من خلال خبرتكم في هذا المجال هل لك ان تتحدث لنا عن الأسباب المشتركة التي أدت إلى الحمل خارج إطار الزواج مع معظم الحالات ؟

8- صف لنا من فضلك أشكال العائلات التي تنحدر منها هؤلاء الفتيات والصفات المشتركة بينهم. إذا لوحظ اشتراك العائلات بصفات معينة فما هي ؟

9- ما هي درجة التدخل القانوني بالنسبة لتلك الحالات ؟ أصفها لي من فضلك أن وجدت ؟

10 -حدثني عن الخدمات التي تتلقاها الضحايا من ناحية صحية في مؤسستكم ؟

- 11- ما هو دوركم كمؤسسه مع النساء من ناحية اجتماعيه ؟ حدثني من فضلك ؟
- 12- هل لديك ما تخبرني عنه من اجرائات تتخذونها لتقويه الجانب النفسي لدى لتلك النساء ؟
اخبرني أرجوك
- 13- هلي لي أن اعرف عن الاجرائات التي تتخذونها من اجل نسب الطفل ومن ثم مصيره ؟
حدثني عن ذلك أرجوك
- 14 - ما هي أولى اهتمامات النساء بعد إنجابهم الأطفال
ما هي تحديات العمل مع هذه القضايا ؟
- 15- لوحظ إن النساء والأهل يولون أهمية عالية لان تكون جميع الإجراءات ذات سرية عالية. -
برأيك ما هو سبب هذا الأمر؟
- 16- هل لاحظت أن الأسر والنساء يبدؤون البحث عن الحلول عند اكتشاف الحمل وليس عند علمهم بالاعتداء الجنسي فما السبب برأيك؟

الشكر الجزيل لتلك المعلومات القيمة وهل تحب
أضافه إي معلومة ؟

أشكرك على وقتك و على معلوماتك