

Family planning differentials among religious groups: A study in India

Abstract

Background: A woman's contraceptive use is largely influenced by the dictates of her religious faith. Acceptance of family planning methods is usually found to be poor among Muslims. This study assesses how acceptance of contraception and contraceptive choices varies across various religious groups. **Objectives:** (1) To determine the prevalence of contraceptive use among various religious groups. (2) To study the contraceptive use pattern among different religious groups. **Materials and Methods:** The study was conducted among ever-married women (15-49 years) residing in the field practice areas of Department of Community Medicine, Jawaharlal Nehru Medical College, Aligarh, Uttar Pradesh. The study was a community-based cross-sectional study. Current use and ever-use of contraceptives were assessed among women from various religious groups. The contraceptive choice among current users from different religious groups was studied in relation to use of spacing and terminal methods. **Results:** Current use of family planning methods was similar for Hindus (43.1%) and Muslims (44.1%). However, ever-use of contraception was found to be more among Muslims (72%) than Hindus (50.6%). Spacing methods were more popular among Muslim couples (84.3%) compared to Hindus (71.7%), whereas larger number of Hindu couples preferred terminal methods (28.3%) compared to Muslims (15.7%). **Conclusions:** Religion does play a role in the adoption of family planning and the specific method adopted for contraception.

Key words: Contraceptive use, Hindus, Muslims

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INTRODUCTION

The family Welfare Program in India has experienced significant growth and adaptation over the past half-century since its inception in 1951. Several issues continue to daunt the program and many goals remain under-achieved: A significant proportion of pregnancies continue to be unplanned; the contraceptive needs of millions of women remain unmet; several sub-population groups including adolescents and men continue to be neglected and under-served; and contraceptive choice remains conspicuous by its absence, as is quality of care within the program.^[1] The extent of acceptance of contraceptive methods still varies within societies and also among different castes and religious groups. The factors responsible for such varied picture operate at the individual, family, and community level with their roots in the socioeconomic and cultural milieu of Indian society.^[2] In India, lower contraceptive use rates and higher fertility rates among Muslims than among Hindus and people of "other" religions are well-documented.^[3-5] The present study was undertaken with the objectives to determine the prevalence and type of contraceptive usage and among religious groups in rural and urban areas of Aligarh.

MATERIALS AND METHODS

A community-based cross-sectional study was conducted in the field practice areas of urban and rural health training centers of Department of Community Medicine, Jawaharlal Nehru Medical College, Aligarh, Uttar Pradesh, India. The sample size for the study was estimated using the Couple protection rate as an indicator of the prevalence of contraceptive practice in a population. Sample size was calculated according to couple protection rate of Uttar Pradesh, which was around 38%^[6] using the formula $4pq/L^2$. The estimated sample size determined for the study was 718.

Ever-married women in the age group 15-49 years present in the household and who gave consent for the interview were included in the sample. On the basis of the household size in the district Aligarh, the average number of ever-married women in the age group 15-49 years was two. To study 718 women, the number of household to be covered was 359. Taking nonresponse into account the number of households covered were 396. The households in the field practice areas were selected according to the probability proportional to the size.

Systematic random sampling was subsequently done in the respective areas taking into account the calculated sampling interval for each village or urban locality. If the woman was not found in the household, next household was included in the study. Informed consent was taken from the woman prior to the interview. All eligible women in the household were included in the study. The study was conducted over a period of 12 months from August 2007 to July 2008.

A preformed and pre tested structured interview schedule was used for the study which was administered by the researcher to the women. The entire survey was conducted by a team of researcher and medicosocial worker. The proforma was divided into 2 sections; the first section contained baseline information about the woman and her family which included age, religion, caste educational status, education, social class, type of family, age at marriage, number of years of married life, number of children, obstetric history of the woman. Assessment of socioeconomic status was done using the modified BG Prasad's classification.^[7] For the purpose of depiction of data, social class II and III were clubbed and are depicted as middle class and social class IV and V depicted as low class.

The second section contained information about knowledge of family planning method, for assessing attitude of a woman, her husband, and her family members (mother in law). Probing questions were not asked to women whose husbands were not alive or who were separated from their husbands. Regarding practices related to family planning, the woman was methods of contraception she is currently using and methods she had ever used during her lifetime. If more than one method was used, then the latest contraceptive method was taken into account for current use. Ever-use of contraception was considered if the woman has ever used anything or tried in any way to delay or avoid getting pregnant.^[8] Current use of contraception was defined as currently married women age 15-49 years who are currently using a contraceptive method or whose husbands are using a contraceptive method.^[8] The study was approved by the institutional ethical committee prior to its commencement.

Data compilation, tabulation, and analysis were done using statistical software, SPSS version 16.0 (Chicago, SPSS Inc). The data collected were analyzed using frequencies and percentages, Chi-square test was used to test the significance of the association.

RESULTS

The basic characteristics of the study population are depicted in Table 1. Majority of the women were in the age group of 20-29 years. The sample had more Hindus than Muslims. Most women were from the general caste category whereas the sample also had women belonging to backward classes and scheduled castes. Literacy status of these women was poor, and a large proportion of them were illiterate. Women were largely from the poor socioeconomic class. Results presented in Table 2; indicate that overall current use of

Table 1: Sociodemographic characteristics of the study population (N = 718)

Background characteristics	Frequency (n)	Percentage (%)
Age group (in years)		
15-19	43	6
20-29	343	47.8
30-39	218	30.4
40-49	114	15.9
Religion		
Hindu	411	57.2
Muslim	304	42.3
Christian	3	0.4
Caste		
General	326	45.4
Scheduled Caste	150	20.9
Other Backward Class	242	33.7
Education of woman		
Illiterate	422	58.8
Primary	94	13.1
Secondary	164	22.8
Graduate and above	38	5.3
Social class		
High	1	1
Middle	108	15.0
Low	609	84.8

Table 2: Current use and ever-use of contraceptives in relation to religion of woman

Current use of contraceptive and religion of woman				
Religion	Nonusers n (%)	Current users n (%)	Not applicable* n (%)	Total n (%)
Hindu	142 (34.5)	177 (43.1)	92 (22.4)	411 (100.0)
Muslim	104 (34.2)	134 (44.1)	66 (21.7)	304 (100.0)
Christian	1 (33.3)	2 (66.7)	—	3 (100.0)
Total	247 (34.4)	313 (43.6)	158 (22.0)	718 (100.0)
Ever-use of contraceptive and religion of woman				
Religion	Never users n (%)	Ever users n (%)	Total n (%)	
Hindu	203 (49.4)	208 (50.6)	411 (100.0)	
Muslim	85 (28.0)	219 (72.0)	304 (100.0)	
Christian	—	3 (100.0)	3 (100.0)	
Total	288 (40.1)	430 (59.9)	718 (100.0)	

*Women who are currently pregnant, menopausal, infecund, subfecund, widows, had a hysterectomy or are not cohabiting with their husbands. $\chi^2=0.083$, $df = 2$, $P > 0.05$, insignificant, $\chi^2=33.365$, $df = 1$, $P < 0.05$, significant (calculated only for Hindus and Muslims)

Table 3: Use of different contraceptive methods in relation to religion among current users (n = 313)

Religion	Spacing methods					Total n (%)	Terminal methods			Total n (%)
	Oral contraceptive pills n (%)	Male condom n (%)	Copper-T n (%)	Natural methods n (%)	Folk methods n (%)		Female sterilization n (%)	Male sterilization n (%)	Total n (%)	
Hindu	12 (6.8)	74 (41.8)	9 (5.1)	26 (14.7)	6 (3.4)	127 (71.7)	49 (27.7)	1 (0.6)	50 (28.3)	177 (100)
Muslim	6 (4.5)	94 (70.1)	3 (2.2)	8 (6.0)	2 (1.5)	113 (84.3)	21 (15.7)	—	21 (15.7)	134 (100)
Christian	—	1 (50.0)	1 (50.0)	—	—	2 (100)	—	—	—	2 (100)
Total	18 (5.8)	169 (54.0)	13 (4.2)	34 (10.9)	8 (2.6)	242 (77.3)	70 (22.4)	1 (0.3)	71 (22.7)	313 (100)

$\chi^2 = 6.152$, $df = 1$, $P < 0.05$, significant

contraception was 43.6%, current use rates among Hindus and Muslims was almost similar at 43.1% and 44.1%, respectively. Overall ever-use observed was much higher at 60%. However, there were inter-religion differentials for ever-use of contraception during their lifetime among Muslims and Hindus. This difference in ever-use was found to be statistically significant.

Table 3 shows the type of contraceptive used by women from different religious groups among current users of contraception. It can be observed that spacing methods were much more popular than terminal methods among all women. The adoption of terminal methods like sterilization was less among Muslim women as compared to Hindus. Among temporary methods oral contraceptives, Copper-T, natural methods, and folk methods were more popular among Hindus whereas the condom was the preferred among the Muslims.

DISCUSSION

Comparable findings for current use have been reported from Mumbai where acceptance of family planning was slightly higher in Muslims than in Hindus.^[9] However, country wide conducted national family health survey suggests that the highest contraceptive prevalence rate (CPR) was among Jains followed by Buddhists/Neo-Buddhists and Sikhs, these religious groups were not encountered in the present sample. The CPR was 58% for Hindus and Christians which was more than that found in the present study of Hindus and less than that for Christians. The CPR was 46% among Muslim women, which was close to the observations of the present study.^[8] Contrary to our results, other studies have found lower contraceptive use rate among Muslims.^[10-12] District level household survey also reported current use of contraceptives in district Aligarh for any method at 34.5% which was less than that observed in our study.^[13]

National family health survey reports have concluded that two-third of currently married women have used a family planning method at some time in their lives which was higher than ever-use found in the present study.^[8] Other researchers have also reported higher percentage of ever-users.^[14-16]

The prevalence of female sterilization was the lowest among Muslims (21%) reported by national family health survey which was also observed in the present study. The use of pills, intrauterine devices (IUDs), and condoms was higher among Muslims (14%) as reported by them, whereas only condom was more popular in the present study. Reports of the above national survey further

indicated highest use of the traditional method among Muslim and Christian women each whereas the present findings indicate the highest use of traditional methods among Hindus only.^[8] Sterilization was the most preferred method among Hindus and condom among Muslims, which was in conformity with the present findings.^[11] Results from district-level household survey for Aligarh have reported use of terminal methods, IUD, Oral pill lesser than observed in the present study, however, higher condom use was seen in the current study.^[13]

SUMMARY

The current use of contraceptives in the study population was 43.6%. Condom was the most popular method (54%) of family planning followed by female sterilization (22.4%), natural methods (10.9%). A sizeable percentage (59.9%) of women had ever used contraceptives during their lifetime. Maximum number of women had ever used a condom (55.3%).

Both current use (44.1%) and ever-use (72.0%) of contraceptives was found to be higher among Muslims, the relation between ever-use and religion was statistically significant. The use of contraceptive methods varied with the religion of women, condoms were more used by Muslims (70.1%).

CONCLUSION

On the basis of the observations from the present study, we can conclude that current use of contraceptives was almost similar among Hindus and Muslims, though significant differences existed for ever-use of contraceptives among them. As is evident from the results of the study, terminal methods were adopted mostly by Hindus than Muslims, which is reflective of the religious preaching against the use of permanent methods of contraception by Islam. This fact itself should direct us to adopt culture sensitive approaches towards communities and increasing the family planning choices for spacing methods in the basket of family planning program for couples.

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